

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
MCCLINTOCK FOR CONGRESS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	178898.09	976167.35
(b) Total Contribution Refunds (from Line 20(d))	5450.00	9255.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	173448.09	966912.35
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	219282.97	795390.81
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1475.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	219282.97	793915.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	459477.95	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

MCCLINTOCK FOR CONGRESS

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	108954.00	520823.00
(ii) Unitemized.....	48979.84	379201.55
(iii) TOTAL of contributions from individuals ▶	157933.84	900024.55
(b) Political Party Committees.....	0.00	350.00
(c) Other Political Committees (such as PACs).....	20964.25	75792.80
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	178898.09	976167.35
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
	0.00	1475.62
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	178898.09	977642.97

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	219282.97	795390.81
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	5450.00	9255.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5450.00	9255.00
21. OTHER DISBURSEMENTS	0.00	135701.52
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	224732.97	940347.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	505312.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	178898.09
25. SUBTOTAL (add Line 23 and Line 24).....	684210.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	224732.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	459477.95

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. LORA BENEDICT

Mailing Address 144 LOMA ALTA DR

City OCEANSIDE State CA Zip Code 92054

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **385.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : INCA104687

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY JR.

Mailing Address 20637 LEONARD RD

City SARATOGA State CA Zip Code 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : INCA104689

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JASON GEYER

Mailing Address 1478 DARBY RD

City SEBASTOPOL State CA Zip Code 95472

FEC ID number of contributing federal political committee. **C**

Name of Employer UCSF Occupation STATISTICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2014

Transaction ID : INCA104707

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CATHERINE MATT

Mailing Address 1801 PORT ASHLEY PL

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : INCA104697

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. SHEILA THOMSEN

Mailing Address 10 RUE CANNES

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : INCA104684

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
GARY JENSEN

Mailing Address PO BOX 3528

City State Zip Code
CAMARILLO CA 93011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FOX INSURANCE AGENCY INC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : INCA104718

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM SMITTCAMP

Mailing Address 10152 N PEACH

City State Zip Code
CLOVIS CA 93619

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WAWONA FROZEN FOODS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 03 / 2014

Transaction ID : INCA104719

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. T. DEFFINGER

Mailing Address 3515 SIERRA RD

City State Zip Code
SAN JOSE CA 95132

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104720

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BETH FERRY

Mailing Address 4587 ECHO SPRINGS CIR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
KAISER NURSE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104951

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CHARLINE GAJDOS

Mailing Address 3121 MURIEL DR

City RIVERSIDE State CA Zip Code 92509

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **435.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : INCA104744

Amount of Each Receipt this Period
90.00

B. Full Name (Last, First, Middle Initial)
MR. HAROLD GILBREATH

Mailing Address 7630 EL ESCORIAL WAY

City BUENA PARK State CA Zip Code 90620

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **313.45**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : INCA104725

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MRS. AUDREY HAINES

Mailing Address 3470 KINGMONT DR

City LOOMIS State CA Zip Code 95650

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2014

Transaction ID : INCA104748

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

165.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES HAWSE

Mailing Address 13792 PACIFIC BREEZE DR

City State Zip Code
SANTA ROSA VALLEY CA 93012

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SIERRA TOYOTA OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA104740

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MARK MONTGOMERY

Mailing Address 9907 ANTHONY PL

City State Zip Code
BEVERLY HILLS CA 90210

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MEM CONSULTING BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA104723

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DR. JOHN NOONAN

Mailing Address 19651 GLEN UNA DR

City State Zip Code
SARATOGA CA 95070

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VALLEY MED. CENTER PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA104747

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LINDA PEDDIE D. V.

Mailing Address 4201 FARIA RD

City State Zip Code
VENTURA CA 93001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104735

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JERRY AND SUSAN THOMAS

Mailing Address 4400 CORDERO C T

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104954

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
VIRGINIA AND DANIEL WAGNER

Mailing Address 3345 MIDAS AVE

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104950

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ANTHONY WRIGHT

Mailing Address **PO BOX 750669**

City **PETALUMA** State **CA** Zip Code **94975**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 04 / 2014

Transaction ID : INCA104742

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID DEGLI'INNOCENTI

Mailing Address **7182 CEDAR OAKS DR**

City **GRANITE BAY** State **CA** Zip Code **95746**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DEFENSE CONTRACT MGMT AGENCY** Occupation **DEPUTY DIRECTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : INCA104949

Amount of Each Receipt this Period
1300.00

C. Full Name (Last, First, Middle Initial)
MRS. MARGERY KARLING

Mailing Address **5334 BANTRY PL**

City **EL DORADO HILLS** State **CA** Zip Code **95762**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 07 / 2014

Transaction ID : INCA104952

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SHELDON MOORE

Mailing Address 1584 SMMERHILL LN

City LINCORN State CA Zip Code 95648

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 07 / 2014

Transaction ID : INCA104953

Amount of Each Receipt this Period
 _____ 100.00

B. Full Name (Last, First, Middle Initial)
CALLEGUAS LAND CO., LTD

Mailing Address PO BOX 2485

City MALIBU State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation PARTNERSHIP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : INCA104922

Amount of Each Receipt this Period
 _____ 250.00

C. Full Name (Last, First, Middle Initial)
MR. SIDNEY COLE

Mailing Address 13640 PASEO DEL ROBLE CT

City LOS ALTOS State CA Zip Code 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer BEST EFFORTS LETTER SENT 5/20/14 Occupation BEST EFFORTS LETTER SENT 5/20/14

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 325.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : INCA104924

Amount of Each Receipt this Period
 _____ 150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

_____ 500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 169	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES DAUGHERTY

Mailing Address 2000 OUTRIGGER DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
FAR WEST BUSINESS SYS BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
449.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA104921

Amount of Each Receipt this Period
199.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM MULLIN

Mailing Address 685 OAKHAVEN RD

City State Zip Code
AUBURN CA 95603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TACO BELL, INC & APPILIATES CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA104972

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
MRS. JOANN REBANE

Mailing Address 10832 CEMENT HILL RD

City State Zip Code
NEVADA CITY CA 95959

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 09 / 2014

Transaction ID : INCA104906

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1049.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 169
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. OTTO SIEDE

Mailing Address 4108 ERRANTE DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 10 / 2014

Transaction ID : INCA105483

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA ALHOUSE

Mailing Address 620 SAND HILL RD APT 412E

City State Zip Code
PALO ALTO CA 94304

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : INCA104937

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. JANICE BARMAKSEZIAN

Mailing Address PO BOX 526

City State Zip Code
NUEVO CA 92567

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
255.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 11 / 2014

Transaction ID : INCA104929

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

470.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. GRANT DUNCAN

Mailing Address 1822 BEVERLY GLEN DR

City SANTA ANA State CA Zip Code 92705

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : INCA104925

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JACK AND SHANNON HANSEN

Mailing Address 7360 STATE HIGHWAY 49

City EL DORADO State CA Zip Code 95623

FEC ID number of contributing federal political committee. **C**

Name of Employer CDC Occupation CORRECTIONAL OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : INCA104940

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BRAD REGER

Mailing Address PO BOX 711

City SUSANVILLE State CA Zip Code 96130

FEC ID number of contributing federal political committee. **C**

Name of Employer MOUNTAIN EMS Occupation RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2014

Transaction ID : INCA104941

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS EILEEN AMOS

Mailing Address 35101 ALDERPOINT RD

City: BLOCKSBURG State: CA Zip Code: 95514

FEC ID number of contributing federal political committee: **C**

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 440.00

Date of Receipt: 04 / 14 / 2014

Transaction ID : INCA104965

Amount of Each Receipt this Period: 25.00

B. Full Name (Last, First, Middle Initial)
MR. KENNETH CAMPBELL

Mailing Address 3636 MCCOURTNEY RD

City: LINCOLN State: CA Zip Code: 95648

FEC ID number of contributing federal political committee: **C**

Name of Employer: KENNETH WADE CAMPBELL Occupation: INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 350.00

Date of Receipt: 04 / 14 / 2014

Transaction ID : INCA105478

Amount of Each Receipt this Period: 350.00

C. Full Name (Last, First, Middle Initial)
MR. DANIEL CROTTY

Mailing Address 182 MONTCLAIR DR

City: VENTURA State: CA Zip Code: 93003

FEC ID number of contributing federal political committee: **C**

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 04 / 14 / 2014

Transaction ID : INCA104955

Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

475.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. H. FAULKNER

Mailing Address 5327 BANTRY PL

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : INCA105482

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MR. JOHAN HULTIN

Mailing Address 6514 HORSEMANS CANYON DR

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : INCA104968

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. LAJEAN SALONITES

Mailing Address 3206 WOODLEIGH LN

City State Zip Code
CAMERON PARK CA 95682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 14 / 2014

Transaction ID : INCA105480

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CAROL SCIFRES

Mailing Address 26700 PALO HILLS DR

City State Zip Code
LOS ALTOS CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 14 / 2014

Transaction ID : INCA104970

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
COLLEEN RANALLI

Mailing Address 4889 PETERSEN LN

City State Zip Code
LOTUS CA 95651

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 15 / 2014

Transaction ID : INCA105485

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
ROBERT CALCAGNO

Mailing Address 4533 MOSHER DR

City State Zip Code
STOCKTON CA 95212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CALCAGNO INVESTMENTS REAL ESTATE DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : INCA104984

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAROL MANNING

Mailing Address 24141 OLEANDER WAY

City LAGUNA NIGUEL State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer TECHNICAL MAINTENANCE SUPPORT, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : INCA104977

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
CAROL MANNING

Mailing Address 24141 OLEANDER WAY

City LAGUNA NIGUEL State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer TECHNICAL MAINTENANCE SUPPORT, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : INCA104976

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
MR. EVERETT MANNING

Mailing Address 24141 OLEANDER WAY

City LAGUNA NIGUEL State CA Zip Code 92677

FEC ID number of contributing federal political committee. **C**

Name of Employer TECHNICAL MAINTENANCE SUPPORT, INC. Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 16 / 2014

Transaction ID : INCA104979

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. EVERETT MANNING		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 24141 OLEANDER WAY		Transaction ID : INCA104978	
City LAGUNA NIGUEL	State CA	Zip Code 92677	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2400.00	
Name of Employer TECHNICAL MAINTENANCE SUPPORT, INC.	Occupation VICE PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) B. MR. LANCE WAITE		Date of Receipt M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 2235 ENCINITAS BLVD #216		Transaction ID : INCA104980	
City ENCINITAS	State CA	Zip Code 92024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00	
Name of Employer INTEGRAL COMMUNITIES	Occupation PRINCIPAL		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500.00		

Full Name (Last, First, Middle Initial) C. MR. DANIEL BLATT		Date of Receipt M M / D D / Y Y Y Y 04 / 17 / 2014	
Mailing Address 7970 S LAKE CIR		Transaction ID : INCA105481	
City GRANITE BAY	State CA	Zip Code 95746	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1300.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4300.00		

SUBTOTAL of Receipts This Page (optional).....	5200.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PATRICK FRINK

Mailing Address 5112 MADISON AVE STE 201

City State Zip Code
SACRAMENTO CA 95841

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RPM AUTOMOTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : INCA104987

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. & MRS. WILLIAM WEBB

Mailing Address 4421 CORDERO CT

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : NONA106092

Amount of Each Receipt this Period
500.00
FUNDRAISING ENTERTAINMENT

C. Full Name (Last, First, Middle Initial)
MR. JAMES BUELL

Mailing Address 4790 CAUGHLIN PKWY # 518

City State Zip Code
RENO NV 89519

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA104991

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HAMILTON FAMILY TRUST

Mailing Address **345 W MEATS AVE**

City **ORANGE** State **CA** Zip Code **92865**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA104999

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. ALAN JONES

Mailing Address **340 PINEWOOD DR**

City **PARADISE** State **CA** Zip Code **95969**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA105000

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
KEN AND JANICE COULSON TRUST

Mailing Address **1732 HAMER DR**

City **PLACENTIA** State **CA** Zip Code **92870**

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA104995

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES MCCONNELL

Mailing Address 1029 GILSTRAP AVE

City State Zip Code
GRIDLEY CA 95948

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA105002

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. KEVIN WENTZ

Mailing Address PO BOX 11

City State Zip Code
GEORGETOWN CA 95634

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WENTZ LOGGING LOGGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA105005

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES WINTERSTEEN

Mailing Address 27 MYRTLE AVE

City State Zip Code
MILL VALLEY CA 94941

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 18 / 2014

Transaction ID : INCA105006

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SCOTT YOUNGREN

Mailing Address 15378 E BENWOOD DR

City State Zip Code
MOORPARK CA 93021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 18 / 2014

Transaction ID : INCA105008

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. EUGENE CRAMER

Mailing Address 2176 VIA TECA

City State Zip Code
SAN CLEMENTE CA 92673

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 19 / 2014

Transaction ID : INCA105489

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. STEVE DRAGLAND

Mailing Address PO BOX 1713

City State Zip Code
ORANGEVALE CA 95662

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 19 / 2014

Transaction ID : INCA105498

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1175.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BECKY MCLAIN		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2014	
Mailing Address 48785 AMARILLO CT		Transaction ID : INCA105491	
City FREMONT	State CA	Zip Code 94539	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) B. STEVE MORGAN		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2014	
Mailing Address 3855 ATHERTON RD		Transaction ID : INCA105494	
City ROCKLIN	State CA	Zip Code 95765	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer WILDLANDS, INC.	Occupation OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

Full Name (Last, First, Middle Initial) C. MR. KARL RODEFER		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2014	
Mailing Address PO BOX 2134		Transaction ID : INCA105495	
City COLUMBIA	State CA	Zip Code 95310	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1750.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DEL RUTZ

Mailing Address 301 SAINT BOSWELL CT

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : INCA105477

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MS. LIZ SCHROETER

Mailing Address 1722 LAPORTE DR

City State Zip Code
ROSEVILLE CA 95747

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : INCA105013

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
KOLE UPTON

Mailing Address PO BOX 575

City State Zip Code
CHOWCHILLA CA 93610

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 19 / 2014

Transaction ID : INCA105012

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. CHARLES CLUPPER

Mailing Address 12545 OAK GLEN DR

City RENO State NV Zip Code 89511

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2014

Transaction ID : INCA105020

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DOUG VEERKAMP

Mailing Address 2585 COLD SPRINGS RD

City PLACERVILLE State CA Zip Code 95667

FEC ID number of contributing federal political committee. **C**

Name of Employer DOUG VEERKAMP GENERAL ENGINEERING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2014

Transaction ID : INCA105964

Amount of Each Receipt this Period
1300.00

C. Full Name (Last, First, Middle Initial)
MR. DOUG VEERKAMP

Mailing Address 2585 COLD SPRINGS RD

City PLACERVILLE State CA Zip Code 95667

FEC ID number of contributing federal political committee. **C**

Name of Employer DOUG VEERKAMP GENERAL ENGINEERING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 20 / 2014

Transaction ID : INCA105965

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. PATRICIA AMTOWER

Mailing Address PO BOX 2456

City RANCHO SANTA FE State CA Zip Code 92067

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105058

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN BAKER

Mailing Address 1101 VIA GOLETA

City PALOS VERDES ESTAT State CA Zip Code 90274

FEC ID number of contributing federal political committee. **C**

Name of Employer US MANAGERS REALTY, INC. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105057

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL BASS

Mailing Address 1395 MAGNOLIA AVE

City UPLAND State CA Zip Code 91786

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105186

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 169
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. GWEN BLOMGREN

Mailing Address 4178 W KELLY AVE

City State Zip Code
FRESNO CA 93722

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105232

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA BRIGGS

Mailing Address 936 BIG BRIAR WAY

City State Zip Code
LA CANADA CA 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105054

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. BLAINE BRIGGS

Mailing Address 1969 LANCEWOOD LN

City State Zip Code
CARLSBAD CA 92009

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MANAGEMENT SERVICE, INC. INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105263

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. HENRIETTA BUGAJ

Mailing Address 1703 CRINELLA DR

City SAINT HELENA State CA Zip Code 94574

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105134

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
JOSEPH & BERNARDA CALABRETTA

Mailing Address 15250 DITTMAR DR

City WHITTIER State CA Zip Code 90603

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105121

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. GERALD CAUTHEN

Mailing Address 900 PARAMOUNT RD

City OAKLAND State CA Zip Code 94610

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation TRANSPORTATION ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105157

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

185.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. HELEN CLOER

Mailing Address 2315 TREELANE AVE

City State Zip Code
MONROVIA CA 91016

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105144

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
JAMES & VICKI COX

Mailing Address 6560 MARSHES FLAT RD

City State Zip Code
COULTERVILLE CA 95311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105158

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL DILLION

Mailing Address 13422 JESSICA DR

City State Zip Code
GARDEN GROVE CA 92843

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
L A COUNTY SANTITATION DISTRICT WATER TREATMENT OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105137

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

500.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. OLEVA DORMAN

Mailing Address 4571 PARK PAXTON PL

City State Zip Code
SAN JOSE CA 95136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
685.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105264

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. JOSEPH DOX

Mailing Address 14603 EL PUENTE WAY

City State Zip Code
SARATOGA CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105215

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. JUNE ENGLAND

Mailing Address PO BOX A

City State Zip Code
EL VERANO CA 95433

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105123

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES ENNIS

Mailing Address 10332 BOGARDUS AVE

City State Zip Code
WHITTIER CA 90603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105224

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MRS. KAY FINLAY

Mailing Address 10 LA CERRA CIR

City State Zip Code
RANCHO MIRAGE CA 92270

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105251

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES FISHER

Mailing Address 3040 JAVA RD

City State Zip Code
COSTA MESA CA 92626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105234

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

285.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS OLIVIA FISHER

Mailing Address 583 29TH AVE

City State Zip Code
SAN FRANCISCO CA 94121

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105200

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JESSE FOSTER JR.

Mailing Address 305 KAREN WAY

City State Zip Code
TIBURON CA 94920

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COUNTY OF SONOMA CIVIL ENGINEER TECH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105184

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. GORDON GRAY

Mailing Address 19462 HOLIDAY LN

City State Zip Code
SANTA ANA CA 92705

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105078

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS SYBIL HALE		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 3415 WARWOOD RD		Transaction ID : INCA105221	
City LAKEWOOD	State CA	Zip Code 90712	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. MR. E. CARL HANKS JR.		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 6994 GRANDWOOD WAY		Transaction ID : INCA105275	
City SAN JOSE	State CA	Zip Code 95120	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. MR. BERT HASSLER		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 128 ELKINS AVE		Transaction ID : INCA105077	
City ARCADIA	State CA	Zip Code 91006	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

SUBTOTAL of Receipts This Page (optional).....	250.00
TOTAL This Period (last page this line number only).....	250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT HELDMAN

Mailing Address 21466 ENCINA RD

City State Zip Code
TOPANGA CA 90290

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105153

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY KAMINS

Mailing Address 135 COPLEY PL

City State Zip Code
BEVERLY HILLS CA 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105283

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. DAVID KEYSTON

Mailing Address PO BOX 7066

City State Zip Code
CARMEL CA 93921

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105042

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES KIRK

Mailing Address 6132 RAINBOW HEIGHTS RD

City FALLBROOK State CA Zip Code 92028

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105074

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MIYO KUNITAKE

Mailing Address 3541 GRIFFITH PARK BLVD

City LOS ANGELES State CA Zip Code 90027

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105179

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MS. SAMUEL LANGBERG

Mailing Address 1420 AMBASSADOR ST #103

City LOS ANGELES State CA Zip Code 90035

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105241

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

635.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HERBERT LEVIN

Mailing Address 724 E GRINELL DR

City State Zip Code
BURBANK CA 91501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CA STATE DEPT OF JUSTICE LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105280

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. CALVIN MALINKA

Mailing Address 117 W WABASH ST

City State Zip Code
RIALTO CA 92376

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105097

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
SHERRILL MARTINEZ

Mailing Address 981 S CLOVER AVE

City State Zip Code
SAN JOSE CA 95128

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105070

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

485.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DRUMMOND MCCUNN

Mailing Address 6840 POCA MONTOYA DR

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF EMPLOYED LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA105090

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
TERRY MEINZER

Mailing Address 3305 ELKHORN BLVD STE 1

City State Zip Code
NORTH HIGHLANDS CA 95660

FEC ID number of contributing federal political committee.

Name of Employer Occupation
MEINCO PROPERTIES PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA105172

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. GERALD MITCHELL

Mailing Address 3120 CAPISTRANO WAY

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TRI CONTINENT SCI QUALITY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA105242

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ARTHUR MUIR JR.

Mailing Address 1874 SUMMER CLOUD DR

City THOUSAND OAKS State CA Zip Code 91362

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105022

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MRS. JACQUELINE NEVITT

Mailing Address 6745 COLTON BLVD

City OAKLAND State CA Zip Code 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105167

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES OLIVER

Mailing Address 375 BULLARD AVE STE 1

City CLOVIS State CA Zip Code 93612

FEC ID number of contributing federal political committee. **C**

Name of Employer STATE FARM INSURANCE Occupation INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105062

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

225.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HAROLD PEASE

Mailing Address 20600 OAKSBORO CIR

City: WOODLAND HILLS State: CA Zip Code: 91364

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 470.00

Date of Receipt: 04 / 21 / 2014

Transaction ID : INCA105045

Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
MR. MELVIN PETERSEN

Mailing Address 945 NATCHEZ DR

City: WALNUT CREEK State: CA Zip Code: 94598

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 04 / 21 / 2014

Transaction ID : INCA105267

Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
MR. MELVIN PETERSEN

Mailing Address 945 NATCHEZ DR

City: WALNUT CREEK State: CA Zip Code: 94598

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 04 / 21 / 2014

Transaction ID : INCA105266

Amount of Each Receipt this Period: 1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AGNES PETERSON

Mailing Address 30435 PACIFIC COAST HWY

City MALIBU State CA Zip Code 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105208

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. ERNEST PLECHATY

Mailing Address 430 TRELIS CT

City LINCOLN State CA Zip Code 95648

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105254

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MRS. L. PATRICIA RAMAEKERS

Mailing Address 4952 SEAPINE CIR

City HUNTINGTON BEACH State CA Zip Code 92649

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105119

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

325.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MORTON RAPPAPORT

Mailing Address 3068 DONA SUSANA DR

City State Zip Code
STUDIO CITY CA 91604

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105260

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. BETTY REICHARDT

Mailing Address 520 FAIR AVE

City State Zip Code
PETALUMA CA 94952

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105272

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
E. JAMES ROGERS M.D.

Mailing Address 1028 LAKEHOME DR

City State Zip Code
LODI CA 95242

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105110

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT ROUSE

Mailing Address 1260 FRESCHI LN

City LINCORN State CA Zip Code 95648

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105065

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
MR. RAYMOND ROWE

Mailing Address 49 E E ST

City ENCINITAS State CA Zip Code 92024

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105093

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. GERALD SCOTT

Mailing Address 23511 MIRAGE LN

City DIAMOND BAR State CA Zip Code 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105149

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. RALPH SCRIBA		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 2055 VIA VISALIA		Transaction ID : INCA105033	
City PALOS VERDES ESTAT	State CA	Zip Code 90274	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5500.00		

Full Name (Last, First, Middle Initial) B. MS PATRICIA SERIO		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 20134 E DAMERAL DR		Transaction ID : INCA105268	
City COVINA	State CA	Zip Code 91724	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer SERIO MOLD INC.	Occupation PRESIDENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		

Full Name (Last, First, Middle Initial) C. MRS. BETTY SHERRY		Date of Receipt M M / D D / Y Y Y Y 04 / 21 / 2014	
Mailing Address 1724 W CATALPA AVE APT 320		Transaction ID : INCA105112	
City ANAHEIM	State CA	Zip Code 92801	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

SUBTOTAL of Receipts This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHN STRONG

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code
LOS ANGELES CA 90019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOS ANGELES COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105277

Amount of Each Receipt this Period
23.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN STRONG

Mailing Address 1432 CRENSHAW BLVD

City State Zip Code
LOS ANGELES CA 90019

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LOS ANGELES COUNTY AUDITOR INTERMEDIATE CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105278

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
THE WESTPHAL FAMILY TRUST

Mailing Address 621 BAYSIDE DR

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 21 / 2014

Transaction ID : INCA105282

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

278.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. SHARON UPJOHN

Mailing Address 4881 GRESHAM DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105842

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MR. EARL WHETSTONE

Mailing Address 9624 CROSBY DR

City State Zip Code
PLEASANTON CA 94588

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
388.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105165

Amount of Each Receipt this Period
113.00

C. Full Name (Last, First, Middle Initial)
MR. WARREN WISECARVER

Mailing Address 40 ANDERSON CIR

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BISHOP-WISECARVER CORPORATION CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105281

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

488.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS. M. GLORIA ZARAVIA

Mailing Address 1425 2ND AVE SPC 132

City CHULA VISTA State CA Zip Code 91911

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105126

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
GAETANO ZAZZARO

Mailing Address 8544 YARROW LN

City RIVERSIDE State CA Zip Code 92508

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 21 / 2014

Transaction ID : INCA105192

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MR. SCOTT BANISTER

Mailing Address PO BOX 997

City HALF MOON BAY State CA Zip Code 94019

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation STARTUP CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105476

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

95.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 OF 169
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM BECKLEY

Mailing Address 4150 RHODES WAY

City State Zip Code
OCEANSIDE CA 92056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105432

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DON BIDDLE

Mailing Address PO BOX 1320

City State Zip Code
ROCKLIN CA 95677

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105346

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM BUDGE

Mailing Address 65 DOWNEY WAY

City State Zip Code
HILLSBOROUGH CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105436

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WILLIAM COLLINS

Mailing Address 1150 FLYING FISH ST

City State Zip Code
FOSTER CITY CA 94404

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105419

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. SALVATORE DE MASI

Mailing Address 708-325 PINE ST

City State Zip Code
JANESVILLE CA 96114

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105298

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. NELSON DILWORTH

Mailing Address 2097 BEGONIA CT

City State Zip Code
HEMET CA 92545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105374

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 169
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES D'ORSO

Mailing Address 809 DRAGONFLY CT

City ROSEVILLE State CA Zip Code 95747

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105468

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. NEIL DUDDY

Mailing Address 15062 FLAMENCO PL

City VICTORVILLE State CA Zip Code 92394

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105448

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JAMES & JOYCE FEUSI

Mailing Address PO BOX 1245

City LOOMIS State CA Zip Code 95650

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105343

Amount of Each Receipt this Period
105.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

205.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. E. LLOYD GRAHAM

Mailing Address 4443 MOORPARK WAY APT 303

City TOLUCA LAKE	State CA	Zip Code 91602
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
568.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105450

Amount of Each Receipt this Period
117.00

B. Full Name (Last, First, Middle Initial)
MR. DONALD GREGORY

Mailing Address 962 PATRICIA WAY

City SAN RAFAEL	State CA	Zip Code 94903
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105398

Amount of Each Receipt this Period
55.00

C. Full Name (Last, First, Middle Initial)
MS CELIA GUERRERO

Mailing Address 1809 GRAYLOCK AVE

City MONTEREY PARK	State CA	Zip Code 91754
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105430

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

222.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOAN HADLEY

Mailing Address 692 W 9TH ST

City CLAREMONT State CA Zip Code 91711

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105301

Amount of Each Receipt this Period
 225.00

B. Full Name (Last, First, Middle Initial)
MR. J. KERN HAMILTON

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City LOS GATOS State CA Zip Code 95032

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105334

Amount of Each Receipt this Period
 300.00

C. Full Name (Last, First, Middle Initial)
MR. RALPH HARRISON

Mailing Address PO BOX 4997

City VENTURA State CA Zip Code 93007

FEC ID number of contributing federal political committee. **C**

Name of Employer E J HARRISON & SONS INC Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105375

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

675.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. HAZEL HART

Mailing Address 842 MUIRLANDS VISTA WAY

City LA JOLLA State CA Zip Code 92037

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105413

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. PATRICIA HERRON

Mailing Address 139 LANSBERRY CT

City LOS GATOS State CA Zip Code 95032

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF, PATRICIA A. HERRON Occupation BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105420

Amount of Each Receipt this Period
175.00

C. Full Name (Last, First, Middle Initial)
MRS. CONSTANCE HOH

Mailing Address 1580 EDMOND DR

City SAN CARLOS State CA Zip Code 94070

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105444

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. MARIE KUZMA

Mailing Address 2615 W 166TH PL

City State Zip Code
TORRANCE CA 90504

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105427

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. HENRY LEONARDI

Mailing Address 432 CALLE DE LA MESA

City State Zip Code
NOVATO CA 94949

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LEONARDI PROPERTIES PROPERTY MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
380.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105388

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM MATTOX

Mailing Address 1058 N LA CADENA DR

City State Zip Code
COLTON CA 92324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
775.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105378

Amount of Each Receipt this Period
125.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT MCKEOWN

Mailing Address 266 BELMONT AVE

City REDWOOD CITY State CA Zip Code 94061

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105466

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID MENNE

Mailing Address 1554 CALLE PORTADA

City CAMARILLO State CA Zip Code 93010

FEC ID number of contributing federal political committee. **C**

Name of Employer DEL CHARRO RANCH Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105292

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. ARTHUR MICHELETTI

Mailing Address 25380 BECKY LN

City LOS ALTOS HILLS State CA Zip Code 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105467

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
YAICHIRO MINAMI

Mailing Address 645 S COLLEGE DR

City State Zip Code
SANTA MARIA CA 93454

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF - YAICHIRO MINAMI COMMERCIAL PROPERTY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105318

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. SALLY O'BRYAN

Mailing Address 9308 ANNETTA AVE

City State Zip Code
SOUTH GATE CA 90280

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105421

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLIE OLSON

Mailing Address 588 CRAWFORD DR

City State Zip Code
SUNNYVALE CA 94087

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
C J OLSON CHERRIES FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105321

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL POLLARD

Mailing Address 185 SENTAR RD

City State Zip Code
CARPINTERIA CA 93013

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF, MICHAEL POLLARD REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
875.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105332

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN REED

Mailing Address 808 WEST ST

City State Zip Code
HOLLISTER CA 95023

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AMERICAN CASTING COMPANY ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105387

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN ROSS

Mailing Address 340 W CLARK ST

City State Zip Code
UPLAND CA 91784

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ROLYN OPTICS COMPANY BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105447

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. LOU ROSSI

Mailing Address 2255 SALISBURY WAY

City SAN MATEO State CA Zip Code 94403

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105456

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. NANCY ROTH

Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4900.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105328

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MS. DOROTHY SCOTT

Mailing Address 5105 SEABREEZE WAY

City OXNARD State CA Zip Code 93035

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2014

Transaction ID : INCA105365

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JOSEPH SILVA		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 513 STARLIGHT LN		Transaction ID : INCA105306	
City ARROYO GRANDE	State CA	Zip Code 93420	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		

Full Name (Last, First, Middle Initial) B. ARLIE SKOV		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 1108 CALLE DE LOS AMIGOS APT D		Transaction ID : INCA105389	
City SANTA BARBARA	State CA	Zip Code 93105	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. SNIDER EXECUTIVE OFFICE		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 5150 MADISON AVE		Transaction ID : INCA106049	
City SACRAMENTO	State CA	Zip Code 95841	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 400.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. DENISE SOLEM

Mailing Address **PO BOX 214**

City **JANESVILLE** State **CA** Zip Code **96114**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CALIFORNIA DEPARTMENT OF CORRECTION** Occupation **CASE RECORDS SUPERVISOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105312

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS GAIL STURGEON

Mailing Address **5657 COLTON BLVD**

City **OAKLAND** State **CA** Zip Code **94611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105394

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. EDWARD TREADGOLD

Mailing Address **1025 ANZA ST**

City **SAN FRANCISCO** State **CA** Zip Code **94118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105366

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

160.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. CHARLES WAIDELICH

Mailing Address PO BOX 898

City RANCHO SANTA FE State CA Zip Code 92067

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105400

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MARY WALDSCHMIDT

Mailing Address 740 SANTA FE ST

City FILLMORE State CA Zip Code 93015

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105329

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA WARREN

Mailing Address 6373 W 78TH ST

City LOS ANGELES State CA Zip Code 90045

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3500.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 22 / 2014

Transaction ID : INCA105313

Amount of Each Receipt this Period
900.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. PATRICIA WARREN		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 6373 W 78TH ST		Transaction ID : INCA105314	
City LOS ANGELES	State CA	Zip Code 90045	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3500.00		

Full Name (Last, First, Middle Initial) B. MRS. NANCY AYALA		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 16109 SIRUS MINE LN		Transaction ID : INCA105506	
City SONORA	State CA	Zip Code 95370	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 50.00	
Name of Employer DOCTORS MEDICAL CENTER, MODESTO	Occupation RN		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550.00		

Full Name (Last, First, Middle Initial) C. MR. ROBERT BROWN		Date of Receipt M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 2164 HIGHGATE RD		Transaction ID : INCA105558	
City WESTLAKE VILLAGE	State CA	Zip Code 91361	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250.00	
Name of Employer THE COMDYN GROUP	Occupation I.T. SERVICES		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2200.00		

SUBTOTAL of Receipts This Page (optional).....	400.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. EUGENE CRAMER

Mailing Address 2176 VIA TECA

City SAN CLEMENTE State CA Zip Code 92673

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105514

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT CRIDER

Mailing Address 8454 EL MODENA AVE

City ELVERTA State CA Zip Code 95626

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105516

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. BRENDAN EICH

Mailing Address 2871 PRUNERIDGE AVE

City SANTA CLARA State CA Zip Code 95051

FEC ID number of contributing federal political committee. **C**

Name of Employer MOZILLA CORPORATION Occupation CTO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105564

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

325.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. SHARON ESKELSON

Mailing Address 10266 SHARONJACK RD

City State Zip Code
AUBURN CA 95602

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CA ASSOCIATION BUSINESS PROPERTY OFFICE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
248.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : INCA105529

Amount of Each Receipt this Period
99.00

B. Full Name (Last, First, Middle Initial)
MRS. BARBARA GALYEAN

Mailing Address 210 CALLE MARINA

City State Zip Code
SAN CLEMENTE CA 92672

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : INCA105519

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT GOURLAY

Mailing Address 10400 SHIRLEY AVE

City State Zip Code
NORTHRIDGE CA 91326

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : INCA105510

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

249.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JASON LUJAN M.D.

Mailing Address 4630 E TALMADGE DR

City SAN DIEGO State CA Zip Code 92116

FEC ID number of contributing federal political committee. **C**

Name of Employer ANEST. SERVICE MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105572

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MRS. LOUEEN MILLER

Mailing Address 816 MONTE VISTA AVE

City VENTURA State CA Zip Code 93003

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED WIDOW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105523

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
CRAIG MISSAKIAN

Mailing Address 116 CLUB RD

City PASADENA State CA Zip Code 91105

FEC ID number of contributing federal political committee. **C**

Name of Employer WESTLAND REAL ESTATE GROUP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105559

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

525.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. THOMAS PETERSEN

Mailing Address 1457 ALAMO PINTADO RD

City SOLVANG State CA Zip Code 93463

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105522

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM SPANGLER

Mailing Address 3196 N ALLEGHENY CT

City WESTLAKE VILLAGE State CA Zip Code 91362

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105571

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. LILLIE TONKIN

Mailing Address 3939 WALNUT AVE UNIT 106

City CARMICHAEL State CA Zip Code 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 23 / 2014

Transaction ID : INCA105513

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

375.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GILLES VAN NEDERVEEN

Mailing Address **PO BOX 610**

City **LINCOLN** State **CA** Zip Code **95648**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **247.50**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 23 / 2014

Transaction ID : INCA105508

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
TAGHI ALEREZA

Mailing Address **2660 HIGHLAND HILLS DR**

City **EL DORADO HILLS** State **CA** Zip Code **95762**

FEC ID number of contributing federal political committee. **C**

Name of Employer **ADM ASSOCIATES** Occupation **ENERGY CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA105966

Amount of Each Receipt this Period
1300.00

C. Full Name (Last, First, Middle Initial)
MRS. TERRY BENGARD

Mailing Address **955 OLD STAGE RD**

City **SALINAS** State **CA** Zip Code **93908**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA105591

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1435.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHG CHEN

Mailing Address 3941 J ST #250

City State Zip Code
SACRAMENTO CA 95819

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106053

Amount of Each Receipt this Period
1300.00

B. Full Name (Last, First, Middle Initial)
WILLIAM AND CAROL ESTEE

Mailing Address 4580 ECHO SPRINGS CIR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106052

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
MR. JOE HARN

Mailing Address 3340 ROLLS DR

City State Zip Code
SHINGLE SPRINGS CA 95682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
EL DORADO COUNTY AUDITOR-CONTROLLER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106057

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. CARL HSU		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO BOX 1105		Transaction ID : INCA106062
City RANCHO CORDOVA	State CA	Zip Code 95741
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1300.00	
Name of Employer REQUESTED	Occupation REQUESTED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1950.00	

Full Name (Last, First, Middle Initial) MR. HANS ROEBBELEN		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 2611 SEEBLICK CT		Transaction ID : INCA106054
City EL DORADO HILLS	State CA	Zip Code 95762
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 900.00	

Full Name (Last, First, Middle Initial) SARA SABZEVARY		Date of Receipt M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 6050 OAK HILL DR		Transaction ID : INCA106059
City GRANITE BAY	State CA	Zip Code 95746
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 350.00	
Name of Employer CASE DENTAL GROUP	Occupation DENTIST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

SUBTOTAL of Receipts This Page (optional).....	2000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. CLAY SIGG

Mailing Address 9715 WEDGEWOOD PL

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LYON REAL ESTATE REAL ESTATE EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106050

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. NANCY SWENSON

Mailing Address 3681 MIRA LOMA DR

City State Zip Code
SHINGLE SPRINGS CA 95682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106055

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
SLOANE ULLIMAN

Mailing Address 6001 LAGUNA VILLA WAY

City State Zip Code
ELK GROVE CA 95758

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
COMPUTER ASSOCIATES INC. PROPOSAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA105587

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

575.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRIAN VAN CAMP

Mailing Address 2252 WOODSIDE LN

City State Zip Code
SACRAMENTO CA 95825

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED JUDGE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA106065

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN WARKENTIN

Mailing Address 6521 CORDOBA #2

City State Zip Code
GOLETA CA 93117

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF - KAMAP PROPERTY MGMT PROPERTY MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1150.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA105589

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MARILYN WHITEN

Mailing Address 1734 CANBERRA PL

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA106051

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS AND BETTY WICKSTED

Mailing Address 4535 SHENANDOAH RD

City State Zip Code
ROCKLIN CA 95765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 24 / 2014

Transaction ID : INCA105593

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. BONNEY BANCROFT

Mailing Address 3833 STAR RIDGE RD

City State Zip Code
HAYWARD CA 94542

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WIND RIVER SYSTEMS EXECUTIVE ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105696

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MRS. ANN BEHRENDT

Mailing Address 6915 GULL CT

City State Zip Code
VENTURA CA 93003

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105613

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS AUDREY BELL

Mailing Address 15 CLARK DR

City State Zip Code
SAN MATEO CA 94401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AUDREY BELL INC CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105605

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. LYLE BLYTHE

Mailing Address 2482 STARLING DR

City State Zip Code
PASO ROBLES CA 93446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STATE OF CALIFORNIA CORRECTIONAL OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105806

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. RAY BOETTGER

Mailing Address 1255 N BROADWAY APT 430

City State Zip Code
ESCONDIDO CA 92026

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105636

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 169
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. LINNEA BRECUNIER

Mailing Address 5191 READ RD

City State Zip Code
MOORPARK CA 93021

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105797

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY BROOKS

Mailing Address 683 ANDERSON AVE

City State Zip Code
BRENTWOOD CA 94513

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105753

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. BEN CAGLE

Mailing Address 10992 CANYON HILL LN

City State Zip Code
SAN DIEGO CA 92126

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105663

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HOWARD CHRISTIE

Mailing Address 26 CORRAL RD

City State Zip Code
BELL CANYON CA 91307

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105677

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MS BEVERLY DI VECCHIO

Mailing Address 2825 PARKVIEW DR

City State Zip Code
ALHAMBRA CA 91803

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105621

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY JR.

Mailing Address 20637 LEONARD RD

City State Zip Code
SARATOGA CA 95070

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105626

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 169	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NANCY ELBING

Mailing Address 4528 SCENIC DR

City State Zip Code
ROCKLIN CA 95765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105670

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. CAROL FREEMAN

Mailing Address 420 W SANTA INEZ AVE

City State Zip Code
HILLSBOROUGH CA 94010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105607

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. GREGORY GIBSON

Mailing Address 17174 ALEXANDRA WAY

City State Zip Code
GRASS VALLEY CA 95949

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED GENERAL CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA106060

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HAROLD GILBREATH

Mailing Address 7630 EL ESCORIAL WAY

City State Zip Code
BUENA PARK CA 90620

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
313.45

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105609

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. CHARLES GORDER

Mailing Address 5526 TOYON RD

City State Zip Code
SAN DIEGO CA 92115

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105647

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. MARK HEDLUND

Mailing Address 1045 TRANQUIL HILLS CT

City State Zip Code
PASO ROBLES CA 93446

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
P G & E SYSTEM OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105786

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. JANE HILLMAN

Mailing Address 63 ORCHARD RD

City ORINDA State CA Zip Code 94563

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105660

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. GLORIA HOLDEN

Mailing Address 9663 SANTA MONICA BLVD STE 848

City BEVERLY HILLS State CA Zip Code 90210

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105671

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MRS. BARBARA HOOVER

Mailing Address 200 RED FOX RIDGE

City WATSONVILLE State CA Zip Code 95076

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105601

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAYNE & DENNIS HORN

Mailing Address 5211 MOUNT ARIANE TER

City SAN DIEGO State CA Zip Code 92111

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **385.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105812

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. MICHAEL JACOBS

Mailing Address 25 OLD COACH RD

City NAPA State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C**

Name of Employer HECO INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105829

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. JAN KAHLER

Mailing Address PO BOX 5085

City SANTA BARBARA State CA Zip Code 93150

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105627

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

800.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LT. COL. ARVO KANNISTO

Mailing Address 5915 LA CUESTA DR

City State Zip Code
SANTA ROSA CA 95409

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105632

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
MR. WAYNE KELLY

Mailing Address 25275 LA LOMA DR

City State Zip Code
LOS ALTOS HILLS CA 94022

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105685

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. CAROL LANG

Mailing Address PO BOX 952

City State Zip Code
LA MIRADA CA 90637

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ARGUS CONTRACTING INC. ADMIN. ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105604

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

170.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAPT. W. LEBERT USN RE

Mailing Address 1375 FAIRWAY DR

City State Zip Code
CAMARILLO CA 93010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE USN RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105751

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. WILLIAM LITTLETON

Mailing Address 1447 N WISHON AVE

City State Zip Code
FRESNO CA 93728

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WILLIAM LITTLETON FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105642

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. GREAYER MANSFIELD - JONES JR.

Mailing Address 876 KALLIN AVE

City State Zip Code
LONG BEACH CA 90815

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105618

Amount of Each Receipt this Period
375.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

725.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. KATHARINE MCCONNELL

Mailing Address 5346 WILD HORSE VALLEY RD

City NAPA State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C**

Name of Employer BECKSTOFFER VINEYARDS Occupation ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105631

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW MITCHELL

Mailing Address 3006 HAMMOND WAY

City EL DORADO HILLS State CA Zip Code 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105796

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MS MAUREEN O'NEILL

Mailing Address 1810 ALDEN ST

City BELMONT State CA Zip Code 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105691

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ALEXANDER POWER

Mailing Address PO BOX 1160

City SOLVANG State CA Zip Code 93464

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105620

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. DENNIS PRATHER

Mailing Address 968 ROSEWOOD LN

City LEMOORE State CA Zip Code 93245

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **410.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105803

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. LEW PRICE

Mailing Address PO BOX 88

City GARDEN VALLEY State CA Zip Code 95633

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF, LEW P. PRICE Occupation WRITER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105778

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. COLLEEN RICKEY

Mailing Address 860 ALOHA ST

City State Zip Code
CAMARILLO CA 93010

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
330.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105762

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS., SHIRLEY SCHULTZ

Mailing Address 855 COTTONWOOD CT

City State Zip Code
LINCOLN CA 95648

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105662

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH STACK

Mailing Address 3310 MARCUS AVE

City State Zip Code
NEWPORT BEACH CA 92663

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105675

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT STICKEL

Mailing Address 2666 DOVE ST

City SAN DIEGO State CA Zip Code 92103

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105606

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR. BYRON TAYLOR

Mailing Address PO BOX 577

City WOODLAKE State CA Zip Code 93286

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105617

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. HERMAN THOMS JR.

Mailing Address 2403 LINCOLN AVE

City BELMONT State CA Zip Code 94002

FEC ID number of contributing federal political committee. **C**

Name of Employer STUDEBAKERS WEST Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105699

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS PATRICIA TURESIN

Mailing Address 1731 WALNUT DR

City MOUNTAIN VIEW State CA Zip Code 94040

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105679

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. KAREN VAUGHN

Mailing Address 43991 JOHN WARNER RD

City TEMECULA State CA Zip Code 92592

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105664

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
HENRY WALTHER M.D.

Mailing Address 6845 RANCHO LOS PAVOS LN

City GRANITE BAY State CA Zip Code 95746

FEC ID number of contributing federal political committee. **C**

Name of Employer CASE MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 25 / 2014

Transaction ID : INCA105811

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CATHERINE WELCOME

Mailing Address 2120 CACTUS CT APT 1

City State Zip Code
WALNUT CREEK CA 94595

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105755

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH WILSON

Mailing Address 33201 E CARMEL VALLEY RD

City State Zip Code
CARMEL VALLEY CA 93924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RANCHO CHUPINOS RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105653

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. ANTHONY WRIGHT

Mailing Address PO BOX 750669

City State Zip Code
PETALUMA CA 94975

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 25 / 2014

Transaction ID : INCA105651

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN CHIHOREK

Mailing Address 24881 ALICIA PKWY #E241

City LAGUNA HILLS State CA Zip Code 92653

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 26 / 2014

Transaction ID : INCA105835

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. WARREN STRACENER

Mailing Address 4190 HENSLEY CIR

City EL DORADO HILLS State CA Zip Code 95762

FEC ID number of contributing federal political committee. **C**

Name of Employer EL DORADO COUNTY Occupation JUDGE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 28 / 2014

Transaction ID : INCA106308

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MRS. SONJA BILLOTTE

Mailing Address 441 TRINITY AVE

City YUBA CITY State CA Zip Code 95991

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105917

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PARK CHAMBERLAIN

Mailing Address 21373 DEXTER DR

City State Zip Code
CUPERTINO CA 95014

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
H&R BLOCK TAX PREPARER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105863

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. GERMAINE COUCH

Mailing Address 7770 BUENA VISTA DR

City State Zip Code
RANCHO CUCAMONGA CA 91730

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105869

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
ALBERT & JANET GONZALES

Mailing Address 19132 CONSUL AVE

City State Zip Code
CORONA CA 92881

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105868

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

650.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MS CAROLYN HOOPER

Mailing Address 13118 WINDBREAK RD

City SAN DIEGO State CA Zip Code 92130

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation INTERIOR DESIGNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105931

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MR. PHILIP HUFTON

Mailing Address 109 VARGAS CT

City MILPITAS State CA Zip Code 95035

FEC ID number of contributing federal political committee. **C**

Name of Employer ALUM ROCK ELEMENTARY SCHOOL DISTRI Occupation TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105933

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. KENNETH JONES

Mailing Address 40955 LAREDO TRL

City CHERRY VALLEY State CA Zip Code 92223

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **251.00**

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105876

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHN LUTHER

Mailing Address 837 E WALNUT AVE

City State Zip Code
GLEN DORA CA 91741

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED POLICE DET. SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105919

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. FRED MEYER

Mailing Address 6893 HAMPTON DR

City State Zip Code
SAN JOSE CA 95120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105956

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES MIKESKA

Mailing Address 16211 DOWNEY AVE UNIT 66

City State Zip Code
PARAMOUNT CA 90723

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105904

Amount of Each Receipt this Period
35.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

135.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHN MURRAY

Mailing Address 6150 ROCKHURST WAY

City State Zip Code
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
WESTPARK ASSOCIATES COF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA106276

Amount of Each Receipt this Period
1300.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES O'CONNOR

Mailing Address 2912 N KRISTOPHER BND

City State Zip Code
SAINT CHARLES MO 63303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INSURANCE SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105940

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD O'NEIL

Mailing Address 1374 HARVEST RD

City State Zip Code
PLEASANTON CA 94566

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105943

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. J. PURKEY

Mailing Address 140 MAGNOLIA AVE

City LARKSPUR State CA Zip Code 94939

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105920

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. DIANNE SCHACK

Mailing Address 19 REATA PL

City OAKLAND State CA Zip Code 94618

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105944

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
COL. SHERMAN SMITH USMC R

Mailing Address 3890 NOBEL DR UNIT 1704

City SAN DIEGO State CA Zip Code 92122

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2014

Transaction ID : INCA105936

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

200.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NANCY TACHIKAWA

Mailing Address 13813 MASLINE ST

City State Zip Code
BALDWIN PARK CA 91706

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105867

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MS CARLA TRENT

Mailing Address 324 CHESTNUT HILL CT APT 16

City State Zip Code
THOUSAND OAKS CA 91360

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2150.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105882

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MRS. PATRICIA WALKER

Mailing Address 812 BIRCHWOOD DR

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2014

Transaction ID : INCA105853

Amount of Each Receipt this Period
75.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

425.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HOWARD GROFF

Mailing Address 9832 CALVIN AVE

City NORTHBRIDGE State CA Zip Code 91324

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTHWEST EXCAVATING COMPANY Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105972

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MRS. SUSAN GROFF

Mailing Address 9832 CALVIN AVE

City NORTHBRIDGE State CA Zip Code 91324

FEC ID number of contributing federal political committee. **C**

Name of Employer NORTHWEST EXCAVATING CO., INC. Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105971

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MRS. MARILYN HINTON

Mailing Address 1005 MARIPOSA ST

City VALLEJO State CA Zip Code 94590

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105973

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5225.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARY KATZ

Mailing Address 9021 GROVE CREEST LN

City LAS VEGAS State NV Zip Code 89134

FEC ID number of contributing federal political committee. **C**

Name of Employer COLLEGE LOAN CORP. Occupation BOARD MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105976

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
CARY KATZ

Mailing Address 9021 GROVE CREEST LN

City LAS VEGAS State NV Zip Code 89134

FEC ID number of contributing federal political committee. **C**

Name of Employer COLLEGE LOAN CORP. Occupation BOARD MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105975

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
DR. COREY MAAS

Mailing Address 12752 CALEB DR

City TRUCKEE State CA Zip Code 96161

FEC ID number of contributing federal political committee. **C**

Name of Employer TMC Occupation SURGEON

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 30 / 2014

Transaction ID : INCA105974

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 169
(check only one)
 11a 12
 11b 13a
 11c 13b
 11d 14
 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MARTIN BOOYE

Mailing Address 1916 REDWOOD AVE

City REDWOOD CITY State CA Zip Code 94061

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA105981

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MRS. MARY BUERGER

Mailing Address 115 STONY RIDGE CT

City HILLSDALE State MI Zip Code 49242

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA105997

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
DAVID CABELL

Mailing Address PO BOX 7173

City BEAUMONT State TX Zip Code 77726

FEC ID number of contributing federal political committee. **C**

Name of Employer MCNEESE STATE U Occupation PROFESSOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA106030

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MRS. YVONNE CARR		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 2215 VINA DEL MAR		Transaction ID : INCA105980
City OXNARD	State Zip Code CA 93035	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period 600.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MR. SIDNEY COLE		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 13640 PASEO DEL ROBLE CT		Transaction ID : INCA106043
City LOS ALTOS	State Zip Code CA 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 175.00
Name of Employer BEST EFFORTS LETTER SENT 5/20/14	Occupation BEST EFFORTS LETTER SENT 5/20/14	Amount of Each Receipt this Period 325.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) MS. SALLY GIDARO		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address 891 RORKE WAY		Transaction ID : INCA105977
City PALO ALTO	State Zip Code CA 94303	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	475.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LEONA GRANT		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 16003 GRIFFITH AVE		Transaction ID : INCA106006	
City WASCO	State CA	Zip Code 93280	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) B. MR. JAMES HAWKINS		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 3551 GRAND AVE		Transaction ID : INCA105991	
City SAN MARCOS	State CA	Zip Code 92078	Amount of Each Receipt this Period _____ 60.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer EDISON INTERNATIONAL	Occupation NUCLEAR COMPUTER TECH		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 460.00		

Full Name (Last, First, Middle Initial) C. MR. VERNON MCLASKEY		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2014	
Mailing Address 7535 AUBURN FOLSOM RD		Transaction ID : INCA106018	
City GRANITE BAY	State CA	Zip Code 95746	Amount of Each Receipt this Period _____ 188.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 463.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 298.00
TOTAL This Period (last page this line number only).....	_____

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 169	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH MILLER

Mailing Address 1959 AVENIDA FELICIANO

City RANCHO PALOS VERDE State CA Zip Code 90275

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : INCA105979

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN PENROD

Mailing Address PO BOX 1121

City LANCASTER State CA Zip Code 93584

FEC ID number of contributing federal political committee. **C**

Name of Employer LOCKHEED MARTIN Occupation AIRCRAFT MODIFICATION MECHANIC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : INCA106001

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MRS. SHIRLEY REED

Mailing Address 5431 EL DORADO DR

City HUNTINGTON BEACH State CA Zip Code 92649

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 01 / 2014

Transaction ID : INCA106010

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. JOAN RHODES

Mailing Address 30558 S TRACY BLVD

City State Zip Code
TRACY CA 95377

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA105993

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
JO ANN ROTH

Mailing Address 24712 CALVERT ST

City State Zip Code
WOODLAND HILLS CA 91367

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA106013

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MR. ROBERT TREFZGER

Mailing Address 10200 MT VERNON RD

City State Zip Code
AUBURN CA 95603

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2014

Transaction ID : INCA106041

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

130.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. ELEANOR WHEELER

Mailing Address 4220 SAN JUAN AVE

City State Zip Code
FREMONT CA 94536

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2014

Transaction ID : INCA105992

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
EARLE & MARY BUNKER

Mailing Address 132 S EL MOLINO ST

City State Zip Code
ALHAMBRA CA 91801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106087

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN GRAY

Mailing Address PO BOX 155

City State Zip Code
BIG OAK FLAT CA 95305

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106168

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 169
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN HALL

Mailing Address 6940 EASTSIDE CT

City ORANGEVALE State CA Zip Code 95662

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106175

Amount of Each Receipt this Period
 500.00

1000.00

B. Full Name (Last, First, Middle Initial)
MRS. JEAN METCALF

Mailing Address PO BOX 3787

City TUSTIN State CA Zip Code 92781

FEC ID number of contributing federal political committee. **C**

Name of Employer PREFERRED GROUP PROP. Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106164

Amount of Each Receipt this Period
 1000.00

1000.00

C. Full Name (Last, First, Middle Initial)
THE DELAPLANE LIVING TRUST

Mailing Address PO BOX 1729

City CANYON COUNTRY State CA Zip Code 91386

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106079

Amount of Each Receipt this Period
 100.00

400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106077

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. JOHN TODD

Mailing Address 1070 BELLA VISTA ST

City State Zip Code
PALM SPRINGS CA 92264

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106171

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. DENNIS WEINBERG

Mailing Address 2510 ALHAMBRA CT

City State Zip Code
SANTA ROSA VALLEY CA 93012

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CONSULTANT/BOARD MEMBER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106174

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2025.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARIE HOOPER - MARTINELLI

Mailing Address 10801 NATIONAL BLVD STE 603

City: LOS ANGELES State: CA Zip Code: 90064

FEC ID number of contributing federal political committee: **C**

Name of Employer: STUDENT INSURANCE Occupation: ATTY/BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 05 / 03 / 2014

Transaction ID : INCA106091

Amount of Each Receipt this Period: 500.00

B. Full Name (Last, First, Middle Initial)
MRS. NITA BLASHAW

Mailing Address 14618 MCADAMS CREEK RD

City: FORT JONES State: CA Zip Code: 96032

FEC ID number of contributing federal political committee: **C**

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 235.00

Date of Receipt: 05 / 05 / 2014

Transaction ID : INCA106119

Amount of Each Receipt this Period: 30.00

C. Full Name (Last, First, Middle Initial)
MR. KENNETH HARTMANN

Mailing Address 525 E MAGNOLIA BLVD APT C

City: BURBANK State: CA Zip Code: 91501

FEC ID number of contributing federal political committee: **C**

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 3000.00

Date of Receipt: 05 / 05 / 2014

Transaction ID : INCA106113

Amount of Each Receipt this Period: 400.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

930.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KENNETH HARTMANN

Mailing Address 525 E MAGNOLIA BLVD APT C

City State Zip Code
BURBANK CA 91501

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : INCA106114

Amount of Each Receipt this Period
600.00

B. Full Name (Last, First, Middle Initial)
MR. RICHARD NIELSEN

Mailing Address 1731 E ROSEVILLE PKWY STE 250

City State Zip Code
ROSEVILLE CA 95661

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED ARCHITECT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : INCA106134

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES SCHROEDER

Mailing Address 1973 BATCHELDER CT

City State Zip Code
EL CAJON CA 92020

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 05 / 2014

Transaction ID : INCA106107

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PHILLIP DORE

Mailing Address 2414 HUNTINGTON LN

City State Zip Code
REDONDO BEACH CA 90278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOUTHLAND INDUSTRIES HVAC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : INCA106185

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
FLOYD PEDERSEN VENTURES

Mailing Address PO BOX 871

City State Zip Code
MARYSVILLE CA 95901

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOLE PROP.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : INCA106207

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. KENNETH HUNTER

Mailing Address 1621 N REFUGIO RD

City State Zip Code
SANTA YNEZ CA 93460

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VAQUERO ENERGY, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 06 / 2014

Transaction ID : INCA106197

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2850.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. LINDA MACCRAE

Mailing Address 5953 CRIMSON DR

City SAN JOSE State CA Zip Code 95120

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106219

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR NICHOLAS & KATHLEEN NASAROW

Mailing Address 5006 MYKLEOAKS RD

City MARIPOSA State CA Zip Code 95338

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106221

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH PANKEY

Mailing Address PO BOX 10274

City SANTA ANA State CA Zip Code 92711

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106178

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CATHERINE PERCY

Mailing Address 757 HILLSIDE DR

City SOLVANG State CA Zip Code 93463

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106188

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
NANCY REYNOLDS

Mailing Address 339 PARKWOOD DR

City GLENDALE State CA Zip Code 91202

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106202

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. PETER SMYKLA JR.

Mailing Address PO BOX 1305

City PINE BLUFF State AR Zip Code 71613

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106196

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH SPITZLEY

Mailing Address 1925 PARKER ST

City BERKELEY State CA Zip Code 94704

FEC ID number of contributing federal political committee. **C**

Name of Employer SPITZLEY CONSTRUCTION Occupation CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **238.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2014

Transaction ID : INCA106183

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
LAUREL AUXIER

Mailing Address 10914 LA SERNA DR

City WHITTIER State CA Zip Code 90604

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106293

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. MARY KAEHLER

Mailing Address 1025 E ARMSTRONG RD

City LODI State CA Zip Code 95242

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106285

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1050.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ERICH KARLE

Mailing Address 1909 FARRELL AVE

City State Zip Code
REDONDO BEACH CA 90278

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106292

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
MRS. RAMONA MOLOSKI

Mailing Address 16100 CURTIS TRL # 4

City State Zip Code
FRAZIER PARK CA 93225

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106298

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MS. MARILYN ROBINSON

Mailing Address 2607 14TH ST

City State Zip Code
SACRAMENTO CA 95818

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106310

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

210.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRUCE STRATHEARN

Mailing Address PO BOX 867

City OXNARD State CA Zip Code 93032

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
510.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106286

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. BERNARD TRAWEEK

Mailing Address 6022 TIMBERLODGE LN

City ROSEVILLE State CA Zip Code 95747

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106307

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. CATHERINE WALLACE

Mailing Address 12664 HOMEWOOD WAY

City LOS ANGELES State CA Zip Code 90049

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 08 / 2014

Transaction ID : INCA106295

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOHN FELLER

Mailing Address 4101 NAPA LOOP

City State Zip Code
ROSEVILLE CA 95747

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA106319

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA KNOWLES

Mailing Address 1140 STRATFORD AVE

City State Zip Code
SOUTH PASADENA CA 91030

FEC ID number of contributing federal political committee.

Name of Employer Occupation
S.G. KNOWLES ENGINEERING OFFICE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA106320

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM LOCKE

Mailing Address 15012 LOS LOTES AVE

City State Zip Code
WHITTIER CA 90605

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA106329

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT MACISAAC

Mailing Address 1410 W COLORADO BLVD

City PASADENA State CA Zip Code 91105

FEC ID number of contributing federal political committee. **C**

Name of Employer ROBERT V MACISAAC INC., DBA C & R REAL Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : INCA106331

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. ROBIN WILLIS

Mailing Address 196 QUAILS TRL

City THOUSAND OAKS State CA Zip Code 91361

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 12 / 2014

Transaction ID : INCA106322

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MS EILEEN AMOS

Mailing Address 35101 ALDERPOINT RD

City BLOCKSBURG State CA Zip Code 95514

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **440.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106381

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

125.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHARALEE ASPENLEITER

Mailing Address 3910 RAVENSWOOD DR

City State Zip Code
YORBA LINDA CA 92886

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106362

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
. BARONA BAND OF MISSION INDIANS

Mailing Address 1095 BARONA RD

City State Zip Code
LAKESIDE CA 92040

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BARONA BAND OF MISSION INDIANS INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106557

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PATRICIA BENNIE

Mailing Address 1817 FUERTE ST

City State Zip Code
FALLBROOK CA 92028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106363

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. PETER BROWN

Mailing Address 125 WINSTED CT

City State Zip Code
SAN JOSE CA 95139

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IBM CORP PROGRAMMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106357

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT BROWN

Mailing Address 2164 HIGHGATE RD

City State Zip Code
WESTLAKE VILLAGE CA 91361

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
THE COMDYN GROUP I.T. SERVICES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106416

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CARROLLS RIPPEY ROAD

Mailing Address PO BOX 1387

City State Zip Code
LOOMIS CA 95650

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106569

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HENRY CATE

Mailing Address 6708 LANDERWOOD LN

City State Zip Code
SAN JOSE CA 95120

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CHESS & LEGO INSTRUCTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106440

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MARGARET CHAMPLAIN

Mailing Address 6737 ALDEN LN

City State Zip Code
CITRUS HEIGHTS CA 95621

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106565

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JAMES ELBING

Mailing Address 4528 SCENIC DR

City State Zip Code
ROCKLIN CA 95765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106431

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MARK EMMERSON

Mailing Address **PO BOX 496028**

City **REDDING** State **CA** Zip Code **96049**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SIERRA PACIFIC IND.** Occupation **CFO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106573

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
MRS. ARLENE FILIPPI

Mailing Address **42 WOOD ST**

City **SAN FRANCISCO** State **CA** Zip Code **94118**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AMERICAN TERRAZZO CORP.** Occupation **OFFICE MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106445

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. RICHARD FREYMAN

Mailing Address **5349 HUMBOLDT DR**

City **ROCKLIN** State **CA** Zip Code **95765**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106433

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2700.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ERNIE FRIESEN

Mailing Address 453 LYNDSEY LN

City State Zip Code
YUBA CITY CA 95993

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ALL SEASONS RV OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106375

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. JASON GEYER

Mailing Address 1478 DARBY RD

City State Zip Code
SEBASTOPOL CA 95472

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UCSF STATISTICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
375.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106448

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. CHARLES GOMES

Mailing Address 2053 RIESLING WAY

City State Zip Code
CAMERON PARK CA 95682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
VERISIGN, INC. VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106438

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

175.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL HORNER

Mailing Address 4818 FAIRLAWN DR

City State Zip Code
LA CANADA CA 91011

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TOM SAWYER CAMPS, INC EXEC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106415

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. DOROTHY KRACK

Mailing Address 1128 TOBIAS DR

City State Zip Code
CHULA VISTA CA 91911

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106356

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
HARRY & CARLEEN LEISE

Mailing Address 3241 CAVU HILL RD

City State Zip Code
SHINGLE SPRINGS CA 95682

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106564

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

125.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HERBERT LINDNER

Mailing Address 4456 STOLLWOOD DR

City State Zip Code
CARMICHAEL CA 95608

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106471

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JAMES MANION

Mailing Address 7030 BURRO AVE

City State Zip Code
INYOKERN CA 93527

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED NEC BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106463

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. BRUCE MORRISON

Mailing Address 421 EAGLE CREST DR

City State Zip Code
RIO VISTA CA 94571

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106424

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 169	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ERNEST PLECHATY

Mailing Address 430 TRELIS CT

City LINCORN State CA Zip Code 95648

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106574

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. DANIEL PROCTOR

Mailing Address 5401 VERNER DR

City LA PALMA State CA Zip Code 90623

FEC ID number of contributing federal political committee. **C**

Name of Employer TRI WEST LTD. Occupation GENERAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106420

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MS. MARILYN ROBINSON

Mailing Address 2607 14TH ST

City SACRAMENTO State CA Zip Code 95818

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106469

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARGARET SAVERCOOL

Mailing Address 3605 CAMP MINEOLA RD

City State Zip Code
MATTITUCK NY 11952

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106576

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. GERALD SCOTT

Mailing Address 23511 MIRAGE LN

City State Zip Code
DIAMOND BAR CA 91765

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106566

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
BONNIE SHEPARD

Mailing Address 2926 CRESCENT WAY

City State Zip Code
THOUSAND OAKS CA 91362

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106364

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2750.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL STEARNS

Mailing Address 5055 DUBLIN AVE

City State Zip Code
OAKLAND CA 94602

FEC ID number of contributing federal political committee. **C**

Name of Employer REQUESTED Occupation REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106473

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS GAIL STURGEON

Mailing Address 5657 COLTON BLVD

City State Zip Code
OAKLAND CA 94611

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106436

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MR. LEWIS TOPPER

Mailing Address 3605 CAMP MINEOLA RD

City State Zip Code
MATTITUCK NY 11952

FEC ID number of contributing federal political committee. **C**

Name of Employer FAST FOOD SYSTEMS, INC. Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106577

Amount of Each Receipt this Period
2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2725.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RONALD UTECHT

Mailing Address 13411 BASS TRAIL

City GRASS VALLEY State CA Zip Code 95945

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106470

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
HENRY WALTHER M.D.

Mailing Address 6845 RANCHO LOS PAVOS LN

City GRANITE BAY State CA Zip Code 95746

FEC ID number of contributing federal political committee. **C**

Name of Employer CASE MEDICAL GROUP Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106432

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN WEST

Mailing Address 561 TOPEKA LN

City VACAVILLE State CA Zip Code 95687

FEC ID number of contributing federal political committee. **C**

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106442

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

550.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 169
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JAMES WINTERSTEEN

Mailing Address **27 MYRTLE AVE**

City **MILL VALLEY** State **CA** Zip Code **94941**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106418

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. JOHNNY ZAMRZLA

Mailing Address **2229 E AVENUE Q**

City **PALMDALE** State **CA** Zip Code **93550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WESTERN PACIFIC ROOFING** Occupation **CONTRACTOR/OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106425

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
MR. JOHNNY ZAMRZLA

Mailing Address **2229 E AVENUE Q**

City **PALMDALE** State **CA** Zip Code **93550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WESTERN PACIFIC ROOFING** Occupation **CONTRACTOR/OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2750.00**

Date of Receipt
 M M / D D / Y Y Y Y
05 / 14 / 2014

Transaction ID : INCA106426

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

350.00

108954.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 169
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE VICTORY FUND

Mailing Address PO BOX 15245

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00009704

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
742.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 09 / 2014

Transaction ID : NONA105963

Amount of Each Receipt this Period
364.25

MAILING LIST

B. Full Name (Last, First, Middle Initial)
EAGLE FORUM PAC

Mailing Address PO BOX 618

City State Zip Code
ALTON IL 62002

FEC ID number of contributing federal political committee. **C** C00103937

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2014

Transaction ID : INCA105493

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
FREEMPORT-MCMORAN PAC

Mailing Address 333 N CENTRAL AVE

City State Zip Code
PHOENIX AZ 85004

FEC ID number of contributing federal political committee. **C** C00056192

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 19 / 2014

Transaction ID : INCA105500

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6864.25

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 169
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROAD TO VICTORY PAC

Mailing Address 1306 BELLVIEW BLVD A-2

City State Zip Code
ALEXANDRIA VA 22307

FEC ID number of contributing federal political committee. **C** C00385377

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 19 / 2014

Transaction ID : INCA105499

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AEROJET & GENCORP PAC

Mailing Address PO BOX 13222

City State Zip Code
SACRAMENTO CA 95813

FEC ID number of contributing federal political committee. **C** C00129122

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106058

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
GUN OWNERS OF AMERICA POLITICAL VICTORY

Mailing Address 8001 FORBES PL STE 102

City State Zip Code
SPRINGFIELD VA 22151

FEC ID number of contributing federal political committee. **C** C00278101

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 24 / 2014

Transaction ID : INCA106048

Amount of Each Receipt this Period
 2600.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 169
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DIRECTV PAC

Mailing Address 901 F ST NW STE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00331991

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106173

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
ENGPAC

Mailing Address 2980 FAIRVIEW PARK DR

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106165

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address 2900 CLEARVIEW PKWY STE 206

City METAIRIE State LA Zip Code 70006

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 02 / 2014

Transaction ID : INCA106172

Amount of Each Receipt this Period
 2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 169
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL PAC

Mailing Address 208 S AKARD ST STE 2701

City State Zip Code
DALLAS TX 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 07 / 2014

Transaction ID : INCA106277

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
VALERO POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 696000

City State Zip Code
SAN ANTONIO TX 78269

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 14 / 2014

Transaction ID : INCA106558

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

20964.25

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P. O. BOX 537104		Amount of Each Disbursement this Period 85.51 Transaction ID : EXPB104624
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CONSOLIDATED COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 291.13 Transaction ID : EXPB104612
City LOS ANGELES State CA Zip Code 90030	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 1116.44 Transaction ID : EXPB104616
City ROCKLIN State CA Zip Code 95677	Purpose of Disbursement MILEAGE Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1493.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 169			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 2037.97 Transaction ID : EXPB104610
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 70.35 Transaction ID : EXPB104618
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement SUPPLIES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 15.00 Transaction ID : EXPB104620
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement MEETING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2123.32
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 169			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.80
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB106251	
State:	District:		

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.35
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB106250	
State:	District:		

Full Name (Last, First, Middle Initial) C. TERRA ECLIPSE			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 9043 SOQUEL DR.			Amount of Each Disbursement this Period 2500.00
City Aptos	State CA	Zip Code 95003	
Purpose of Disbursement FUNDRAISING CONSULTING		Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : EXPB104608	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	2503.15
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Joseph Yocca Jr.		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address P. O. BOX 421		Amount of Each Disbursement this Period 1250.00 Transaction ID : EXPB104611
City CARMICHAEL	State CA	
Zip Code 95609	Purpose of Disbursement FUNDRAISING CONSULTING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 2200 WILSON BLVD.		Amount of Each Disbursement this Period 41.53 Transaction ID : EXPB106223
City ARLINGTON	State VA	
Zip Code 22201	Purpose of Disbursement SHIPPING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHASE BANK		Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 242.01 Transaction ID : EXPB106249
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1533.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 169			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 160.50	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106252	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.85	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106253	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 03 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 60.00	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106248	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	221.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLUE POINT LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 35311 N. 92ND WAY		Amount of Each Disbursement this Period 3000.00
City SCOTTSDALE	State AZ	
Purpose of Disbursement CAMPAIGN CONSULTING	Zip Code 85262	Transaction ID : EXPB104717
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FIA CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 429.54
City WILMINGTON	State DE	
Purpose of Disbursement CREDIT CARD PAYMENT	Zip Code 19886	Transaction ID : EXPB104716
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. STOR N LOK		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00
City SACRAMENTO	State CA	
Purpose of Disbursement STORAGE	Zip Code 95828	Transaction ID : EDTB297EXPB104716
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3429.54
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRY'S ELECTRONICS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 180 N. SUNRISE AVE.		Amount of Each Disbursement this Period 64.47
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement SUPPLIES	Transaction ID : EDTB298EXPB104716
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. NATIONAL CAR RENTAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address BURBANK AIRPORT		Amount of Each Disbursement this Period 100.06
City Burbank	State CA	
Zip Code 91506	Purpose of Disbursement CAR RENTAL	Transaction ID : EDTB299EXPB104716
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. FRY'S ELECTRONICS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 180 N. SUNRISE AVE.		Amount of Each Disbursement this Period 625.35
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement OFFICE EQUIPMENT	Transaction ID : EXPB106224
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	625.35
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THOMAS MCCLINTOCK		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 2601 MARINA POINT LN.		Amount of Each Disbursement this Period 372.37 Transaction ID : EXPB104713
City Elk Grove State CA Zip Code 95672	Purpose of Disbursement MILEAGE Candidate Name Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PARKWAY PLAZA INVESTORS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00 Transaction ID : EXPB104714
City Roseville State CA Zip Code 95678	Purpose of Disbursement RENT Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. TIM MACY & ASSOC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 7996 CALIFORNIA AVE. #F		Amount of Each Disbursement this Period 548.24 Transaction ID : EXPB104715
City FAIR OAKS State CA Zip Code 95628	Purpose of Disbursement MASS MAIL Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2213.61
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTE RITE SYSTEMS, INC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 1624.74
City SACRAMENTO	State CA	
Zip Code 95827	Purpose of Disbursement DATA PROCESSING	Transaction ID : EXPB104710
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 92.78
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB106254
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 312 N. SUNRISE BLVD.		Amount of Each Disbursement this Period 391.28
City Roseville	State CA	
Zip Code 95661	Purpose of Disbursement SUPPLIES	Transaction ID : EXPB106226
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2108.80
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 35.00
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB106255
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30.63
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB106256
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CONSERVATIVE VICTORY FUND		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address PO BOX 15245		Amount of Each Disbursement this Period 364.25
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MAILING LIST	Transaction ID : NONB105963
Candidate Name CONSERVATIVE VICTORY FUND	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	429.88
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. STATE COMPENSATION INSURANCE FUND

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 748170

City LOS ANGELES State CA Zip Code 90074

Purpose of Disbursement
INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 09 / 2014

Amount of Each Disbursement this Period
33.45

Transaction ID : EXPB104890

Category/Type
001

B. Mr. Joseph Yocca Jr.

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 421

City CARMICHAEL State CA Zip Code 95609

Purpose of Disbursement
FUNDRAISING CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 09 / 2014

Amount of Each Disbursement this Period
1250.00

Transaction ID : EXPB104889

Category/Type
003

C. PAYPAL

Full Name (Last, First, Middle Initial)
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 12 / 2014

Amount of Each Disbursement this Period
2.50

Transaction ID : EXPB106257

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 1285.95

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.00 Transaction ID : EXPB106258
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 2037.97 Transaction ID : EXPB104946
City ROCKLIN State CA Zip Code 95677	Purpose of Disbursement PAYROLL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 Transaction ID : EXPB106259
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2043.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.70	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106260	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PUBLIC STORAGE			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014	
Mailing Address 715 CIRBY WAY			Amount of Each Disbursement this Period 64.00	
City Roseville	State CA	Zip Code 95678	Transaction ID : EXPB106230	
Purpose of Disbursement STORAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 308.70	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106261	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	374.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DAVID BAUER		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 519.80 Transaction ID : EXPB104983
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 9.27 Transaction ID : EXPB106262
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2014
Mailing Address 330 VERNON ST.		Amount of Each Disbursement this Period 4.90 Transaction ID : EXPB106233
City ROSEVILLE	State CA	
Zip Code 95678	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	533.97
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. STATE COMPENSATION INSURANCE FUND

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 748170

City LOS ANGELES State CA Zip Code 90074

Purpose of Disbursement INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 17 / 2014

Amount of Each Disbursement this Period: 192.25

Transaction ID : EXPB104981

Category/Type: 001

B. THE MONACO GROUP

Full Name (Last, First, Middle Initial)
Mailing Address 1011 S. LINWOOD AVE.

City SANTA ANA State CA Zip Code 92705

Purpose of Disbursement MASS MAIL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 17 / 2014

Amount of Each Disbursement this Period: 9239.92

Transaction ID : EXPB104982

Category/Type: 003

C. MR. & MRS. WILLIAM WEBB

Full Name (Last, First, Middle Initial)
Mailing Address 4421 CORDERO CT

City EL DORADO HILLS State CA Zip Code 95762

Purpose of Disbursement FUNDRAISING ENTERTAINMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 17 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : NONB106092

Category/Type:

SUBTOTAL of Disbursements This Page (optional)..... 9932.17

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 12.20 Transaction ID : EXPB106263
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 8.30 Transaction ID : EXPB106264
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 8.25 Transaction ID : EXPB106265
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	28.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BETH SOGAARD CATERING			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address P. O. BOX 863			Amount of Each Disbursement this Period 6185.10 Transaction ID : EXPB105016
City PLYMOUTH	State CA	Zip Code 95669	
Purpose of Disbursement CATERING	Candidate Name		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. NEUMANN ENTERPRISES			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2676 ALBATROSS WAY			Amount of Each Disbursement this Period 600.00 Transaction ID : EXPB105014
City SACRAMENTO	State CA	Zip Code 95815	
Purpose of Disbursement VALET PARKING SERVICE	Candidate Name		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 98.83 Transaction ID : EXPB106266
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	6883.93
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STATE COMPENSATION INSURANCE FUND		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address P. O. BOX 748170		Amount of Each Disbursement this Period 14.43 Transaction ID : EXPB105017
City LOS ANGELES	State CA	
Zip Code 90074	Purpose of Disbursement INSURANCE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2014
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 750.00 Transaction ID : EXPB105015
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 346.34 Transaction ID : EXPB105290
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1110.77
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address P. O. BOX 537104		Amount of Each Disbursement this Period 85.61 Transaction ID : EXPB105289
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 115.67 Transaction ID : EXPB105288
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITAL DEVELOPMENT STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 1127 11TH ST. #310		Amount of Each Disbursement this Period 2486.44 Transaction ID : EXPB105287
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement FUNDRAISING COMMISSION Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2687.72
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EFUNDRAISING.COM			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 1225 8TH ST. #425			Amount of Each Disbursement this Period 23.25	
City SACRAMENTO	State CA	Zip Code 95814	Transaction ID : EXPB105285	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. NATIONAL RESEARCH INC.			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 146 STATE HWY 34 #250			Amount of Each Disbursement this Period 16500.00	
City HOLMDEL	State NJ	Zip Code 07733	Transaction ID : EXPB105286	
Purpose of Disbursement POLLING		Category/ Type 005		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. OFFICE MAX			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address 312 N. SUNRISE BLVD.			Amount of Each Disbursement this Period 11.81	
City Roseville	State CA	Zip Code 95661	Transaction ID : EXPB106236	
Purpose of Disbursement SUPPLIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	16535.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 28.89
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB106267
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 201.60
City Rocklin State CA Zip Code 95677	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type 001	Transaction ID : EXPB106235
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014
Mailing Address 2200 WILSON BLVD.		Amount of Each Disbursement this Period 187.87
City ARLINGTON State VA Zip Code 22201	Purpose of Disbursement SHIPPING	
Candidate Name	Category/Type 001	Transaction ID : EXPB106239
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	418.36
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. US SENATE GIFT SHOP			Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2014	
Mailing Address U.S. CAPITOL BUILDING			Amount of Each Disbursement this Period 354.00	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : EXPB106237	
Purpose of Disbursement GIFTS FOR FUNDRAISER		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 67.49	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106268	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 21.85	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106269	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	443.34
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLASSIC IMPRESSIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 8723 AUBURN FOLSOM RD.		Amount of Each Disbursement this Period 55.37
City GRANITE BAY State CA Zip Code 95746	Purpose of Disbursement SUPPLIES 001 Category/Type	
Candidate Name		Transaction ID : EXPB106243
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HOTEL PENNSYLVANIA		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address 401 7TH AVE.		Amount of Each Disbursement this Period 326.92
City NEW YORK State NY Zip Code 10001	Purpose of Disbursement LODGING 002 Category/Type	
Candidate Name		Transaction ID : EXPB106241
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 53.40
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name		Transaction ID : EXPB106270
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	435.69
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TERRA ECLIPSE		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB105585
City Aptos State CA Zip Code 95003	Purpose of Disbursement FUNDRAISING CONSULTING 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mr. Joseph Yocca Jr.		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2014
Mailing Address P. O. BOX 421		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB105584
City CARMICHAEL State CA Zip Code 95609	Purpose of Disbursement FUNDRAISING CONSULTING 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.20 Transaction ID : EXPB106271
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5007.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 156 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. PAYPAL

Full Name (Last, First, Middle Initial)
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 27 / 2014

Amount of Each Disbursement this Period
0.85

Transaction ID : EXPB106272

Category/Type
001

B. MAILCHIMP.COM

Full Name (Last, First, Middle Initial)
Mailing Address 512 MEANS ST. #404

City ATLANTA State GA Zip Code 30318

Purpose of Disbursement
BROADCAST E-MAIL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 28 / 2014

Amount of Each Disbursement this Period
230.00

Transaction ID : EXPB106246

Category/Type
004

C. EFUNDRAISING.COM

Full Name (Last, First, Middle Initial)
Mailing Address 1225 8TH ST. #425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
04 / 29 / 2014

Amount of Each Disbursement this Period
203.50

Transaction ID : EXPB105838

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 434.35

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. EMPLOYMENT DEVELOPMENT DEPT.

Full Name (Last, First, Middle Initial)
Mailing Address P. O. BOX 826276

City SACRAMENTO State CA Zip Code 94230

Purpose of Disbursement TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 29 / 2014

Amount of Each Disbursement this Period: 535.59

Transaction ID : EXPB105840

Category/Type: 001

B. MR. JON HUEY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1198

City ROCKLIN State CA Zip Code 95677

Purpose of Disbursement PAYROLL

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 29 / 2014

Amount of Each Disbursement this Period: 2037.97

Transaction ID : EXPB105841

Category/Type: 001

C. INTERNAL REVENUE SVC.

Full Name (Last, First, Middle Initial)
Mailing Address

City OGDEN State UT Zip Code 84201

Purpose of Disbursement TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 04 / 29 / 2014

Amount of Each Disbursement this Period: 3039.00

Transaction ID : EXPB105839

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 5612.56

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2014		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 239.30		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106273		
Purpose of Disbursement MERCHANT FEE		001	Category/ Type		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.70		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106396		
Purpose of Disbursement MERCHANT FEE		001	Category/ Type		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2014		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 11.30		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106397		
Purpose of Disbursement MERCHANT FEE		001	Category/ Type		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	252.30
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ARISTOTLE INTERNATIONAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 205 PENNSYLVANIA AVE. SE			Amount of Each Disbursement this Period 4000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB106410	
Purpose of Disbursement SOFTWARE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.80	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106398	
Purpose of Disbursement MERCHANT FEE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014	
Mailing Address 5515 PACIFIC ST			Amount of Each Disbursement this Period 5.60	
City Rocklin	State CA	Zip Code 95677	Transaction ID : EXPB106412	
Purpose of Disbursement POSTAGE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	4008.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 160 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLUE POINT LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 35311 N. 92ND WAY		Amount of Each Disbursement this Period 76232.00 Transaction ID : EXPB106095
City SCOTTSDALE	State AZ	
Zip Code 85262	Purpose of Disbursement MASS MAIL	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EFUNDRAISING.COM		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 13.50 Transaction ID : EXPB106093
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. FIA CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 210.90 Transaction ID : EXPB106094
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	76456.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 169			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 1607 DOUGLAS BLVD.		Amount of Each Disbursement this Period 54.81
City ROSEVILLE State CA Zip Code 95661	Purpose of Disbursement SUPPLIES 001 Category/Type	
Candidate Name		Transaction ID : EDTB300EXPB106094 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. STOR N LOK		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00
City SACRAMENTO State CA Zip Code 95828	Purpose of Disbursement STORAGE 001 Category/Type	
Candidate Name		Transaction ID : EDTB301EXPB106094 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 16.09
City WASHINGTON State DC Zip Code 20006	Purpose of Disbursement MEETING 001 Category/Type	
Candidate Name		Transaction ID : EDTB302EXPB106094 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 169			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 61297.00	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106399	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 60.00	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106400	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BLUE POINT LLC			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014	
Mailing Address 35311 N. 92ND WAY			Amount of Each Disbursement this Period 61297.00	
City SCOTTSDALE	State AZ	Zip Code 85262	Transaction ID : EXPB106275	
Purpose of Disbursement MASS MAIL		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	61429.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 169			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.90
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB106401
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.35
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB106402
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CONSOLIDATED COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 268.49
City LOS ANGELES State CA Zip Code 90030	Purpose of Disbursement PHONE SVC.	
Candidate Name	001 Category/Type	Transaction ID : EXPB106312
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	275.74
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 164 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. PARKWAY PLAZA INVESTORS

Mailing Address P.O. BOX 670

City Roseville State CA Zip Code 95678

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 1293.00

Transaction ID : EXPB106313

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. PAYPAL

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 7.83

Transaction ID : EXPB106403

Category/Type: 001

Full Name (Last, First, Middle Initial)
C. POSTMASTER

Mailing Address 4120 DOUGLAS BLVD.

City GRANITE BAY State CA Zip Code 95746

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 12 / 2014

Amount of Each Disbursement this Period: 196.00

Transaction ID : EXPB106409

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 1496.83

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTE RITE SYSTEMS, INC.			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 1501.60	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB106311	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 3.01	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106404	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 129.85	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB106405	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	1634.46
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 166 OF 169	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTERLINK		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2014
Mailing Address 13348 ALPINE COVE DR.		Amount of Each Disbursement this Period 2538.57
City ALPINE State UT Zip Code 84004	Purpose of Disbursement MAILING LIST	
Candidate Name	Category/Type 004	Transaction ID : EXPB106406
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2538.57
TOTAL This Period (last page this line number only).....	218541.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 167 OF 169	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WILLIAM DODDRIDGE		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 15732 TUSTIN VILLAGE WAY		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB104622
City TUSTIN State CA Zip Code 92780	Purpose of Disbursement REFUND Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. SHINGLE SPRINGS BAND MIWOK INDIANS		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO BOX 1340		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB104674
City SHINGLE SPRINGS State CA Zip Code 95682	Purpose of Disbursement REFUND Category/Type 010	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MR. JON HUEY

Mailing Address PO BOX 1198

City State Zip Code
 ROCKLIN CA 95677

Nature of Debt (Purpose):
 MILEAGE

Outstanding Balance Beginning This Period		Transaction ID : PAYD104613	
<input type="text" value="1116.44"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="1116.44"/>	<input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MR. JON HUEY

Mailing Address PO BOX 1198

City State Zip Code
 ROCKLIN CA 95677

Nature of Debt (Purpose):
 SUPPLIES

Outstanding Balance Beginning This Period		Transaction ID : PAYD104614	
<input type="text" value="70.35"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="70.35"/>	<input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MR. JON HUEY

Mailing Address PO BOX 1198

City State Zip Code
 ROCKLIN CA 95677

Nature of Debt (Purpose):
 MEETING

Outstanding Balance Beginning This Period		Transaction ID : PAYD104615	
<input type="text" value="15.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="15.00"/>	<input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="0.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 169 OF 169
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TERRA ECLIPSE	Nature of Debt (Purpose): FUNDRAISING CONSULTING
Mailing Address 9043 SOQUEL DR.	
City State Zip Code Aptos CA 95003	

Outstanding Balance Beginning This Period 2500.00	Transaction ID : PAYD104607	
Amount Incurred This Period 0.00	Payment This Period 2500.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VOTE RITE SYSTEMS, INC.	Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 3440 VIKING DR. #105	
City State Zip Code SACRAMENTO CA 95827	

Outstanding Balance Beginning This Period 1624.74	Transaction ID : PAYD104709	
Amount Incurred This Period 0.00	Payment This Period 1624.74	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	0.00