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27-0447

KAUFMAN DOWNING LLP
M E M O R A N D U M

SECRETARY OF THE SENATE
05 JUL 18 PM 1:30

Original to: Secretary of Senate
from: Leilani Rudow
subject: Form 3
file no: BOX 2119.001
date: July 14, 2005

Enclosed for filing please find the following forms:

Friends of Barbara Boxer - Form 3 4/1/05-6/31/05 - (Original + 1 Copy + 1 Face Page).

Please confirm the face pages and return to the undersigned in the enclosed self-addressed stamped envelope.

Thank you for your assistance.

From the desk of...

Leilani Rudow
Campaign Finance Supervisor

Smith Kaufman LLP
777 S. Figueroa Street, Suite 4050
Los Angeles, CA 90017

(213) 452-6565
Fax: (213) 452-6575

25020270448
25020270448

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE
05 JUL 18 PM 1:30
Office Use Only

1. NAME OF COMMITTEE (In full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines

Friends of Barbara Boxer

ADDRESS (number and street) ▼ Post Office Box 641751

☐ Check if different than previously reported. (ACC)

Los Angeles | CA | 90064

2. FEC IDENTIFICATION NUMBER ▼ C00279315

CITY ▲ | STATE ▲ | ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) OR ☐ AMENDED (A)

STATE ▼ DISTRICT: CA | 00

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☒ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☐ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on ☐ ☐ ☐ In the State of ☐

(c) 30-Day POST-Election Report for the:

☐ General (30G) ☐ Runoff (30R) ☐ Special (30S)

Election on ☐ ☐ ☐ In the State of ☐

5. Covering Period 04 01 2005 through 06 30 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer: Andrew Wender, Asst. Treas.

Signature of Treasurer: [signature] Date 07 13 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only							

FEC FORM 3
(Revised 02/2003)

25020270449

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Barbara Boxer

Report Covering the Period: From: M M 04 D D 01 Y Y Y Y 2005 To: M M 06 D D 30 Y Y Y Y 2005

	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)).....	715.00	30676.87
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	5098.20
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	715.00	25578.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	61766.09	808835.01
(b) Total Offsets to Operating Expenditures (from Line 14).....	10993.25	48531.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	50772.84	760303.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	615710.10	
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

25020270450

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Barbara Boxer

Report Covering the Period: From: M M 04 D D 01 Y Y Y Y 2005 To: M M 08 D D 30 Y Y Y Y 2005

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)	0.00	8250.00
(ii) Unitemized	715.00	18976.87
(iii) TOTAL of contributions from individuals ▶	715.00	27226.87
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACS)	0.00	3450.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	715.00	30676.87
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	90000.00
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.)	10993.25	48531.81
15. OTHER RECEIPTS (Dividends, Interest, etc.)	1015.73	2420.44
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) ▶	12723.98	171629.12

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES	61766.09	808835.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	250000.00
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	0.00	3805.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1293.20
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	5098.20
21. OTHER DISBURSEMENTS	14000.00	56553.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	75766.09	1120486.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	678752.21
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)	12723.98
25. SUBTOTAL (add Line 23 and Line 24)	691476.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	75766.09
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	615710.10

25020270452

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 5 / 56
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Denise Abrams
Mailing Address 1510 Henry Street
City: Berkeley State: CA Zip Code: 94709-2008
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 06 / 06 / 2005
Transaction ID: C163042
Amount of Each Receipt this Period: 500.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

B. Full Name (Last, First, Middle Initial)
Robert H. Aranow
Mailing Address 14 Butler Rd
City: Scarsdale State: NY Zip Code: 10583-1618
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 06 / 06 / 2005
Transaction ID: C163044
Amount of Each Receipt this Period: 1000.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

C. Full Name (Last, First, Middle Initial)
Joan Arnow
Mailing Address 14 Butler Rd
City: Scarsdale State: NY Zip Code: 10583-1618
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 06 / 15 / 2005
Transaction ID: C163050
Amount of Each Receipt this Period: 1000.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

SUBTOTAL of Receipts This Page (optional) ▶ 2500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 6 / 56
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Laura Lambe Bernstein
Mailing Address 809 B St
City: San Rafael State: CA Zip Code: 94901-3002
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 06 06 2005
Transaction ID: C163048
Amount of Each Receipt this Period: 250.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

B. Full Name (Last, First, Middle Initial)
Democratic State Central Committee of California
Mailing Address 1401 21st Street Suite 100
City: Sacramento State: CA Zip Code: 95814
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 750.00

Date of Receipt: 05 09 2005
Transaction ID: C163015
Amount of Each Receipt this Period: 750.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund of Registration Fees

C. Full Name (Last, First, Middle Initial)
Jay Joshua Elbaum
Mailing Address 1501 Thayer Avenue
City: Los Angeles State: CA Zip Code: 90024-6025
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 06 06 2005
Transaction ID: C163032
Amount of Each Receipt this Period: 250.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

SUBTOTAL of Receipts This Page (optional) ▶ 1250.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 56
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
EMILY's List
Mailing Address 1120 Connecticut Avenue NW
Suite 1100
City: Washington State: DC Zip Code: 20036
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1677.15

Date of Receipt: 06 / 06 / 2005
Transaction ID: C163017
Amount of Each Receipt this Period: 1677.15
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
List Rental

B. Full Name (Last, First, Middle Initial)
Matt Gepening
Mailing Address 1650 21st St
City: Santa Monica State: CA Zip Code: 90404-3915
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 06 / 2005
Transaction ID: C163033
Amount of Each Receipt this Period: 1000.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

C. Full Name (Last, First, Middle Initial)
Stephen Hendel
Mailing Address 10 Dundee Rd
City: Larchmont State: NY Zip Code: 10538-1446
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 05 / 10 / 2005
Transaction ID: C163028
Amount of Each Receipt this Period: 1000.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

SUBTOTAL of Receipts This Page (optional) ▶ 3677.15

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 8 / 56
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Melody Howe-Weintraub
Mailing Address 3903 Happy Valley Rd
City: Lafayette State: CA Zip Code: 94549-2437
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 06 / 2005
Transaction ID: C163039
Amount of Each Receipt this Period: 250.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

B. Full Name (Last, First, Middle Initial)
George W. Krumme
Mailing Address 2300 Riverside Dr Unit 16E
City: Tulsa State: OK Zip Code: 74114-2401
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 400.00

Date of Receipt: 06 / 06 / 2005
Transaction ID: C163034
Amount of Each Receipt this Period: 400.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

C. Full Name (Last, First, Middle Initial)
North Waterfront Corporation
Mailing Address 921 Front Street
City: San Francisco State: CA Zip Code: 94111
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 465.00

Date of Receipt: 04 / 18 / 2005
Transaction ID: C163013
Amount of Each Receipt this Period: 100.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund of Deposit

SUBTOTAL of Receipts This Page (optional) ▶ 750.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 56
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
North Waterfront Corporation
Mailing Address 921 Front Street
City: San Francisco State: CA Zip Code: 94111
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 465.00

Date of Receipt: 04 / 18 / 2005
Transaction ID: C163014
Amount of Each Receipt this Period: 365.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Refund of Deposit

B. Full Name (Last, First, Middle Initial)
Martin Jay Perel
Mailing Address 14 Oxford Road
City: New Rochelle State: NY Zip Code: 10804
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 06 / 2005
Transaction ID: C163035
Amount of Each Receipt this Period: 500.00
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Neg.- Rep. W/ Donation

C. Full Name (Last, First, Middle Initial)
Sorensons Resort
Mailing Address 14255 Highway 88
City: Hope Valley State: CA Zip Code: 96120
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 776.12

Date of Receipt: 06 / 21 / 2005
Transaction ID: C163051
Amount of Each Receipt this Period: 776.12
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Check Never Negotiated

SUBTOTAL of Receipts This Page (optional) ▶ 1641.12

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

25020270457

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 / 58

[ ] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [X] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
William L. Veen

Mailing Address 711 Van Ness Ave
Suite 220

City: San Francisco
State: CA
Zip Code: 94102

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation

Receipt For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Election Cycle-to-Date
279.87

Date of Receipt
06 06 2005

Transaction ID: C163037

Amount of Each Receipt this Period
279.87

[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Check Never Neg.- Rep. W/ Donation

SUBTOTAL of Receipts This Page (optional) ▶	279.87
TOTAL This Period (last page this line number only) ▶	10098.14

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 56
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Bank of Marin
Mailing Address Post Office Box L
City: Novato State: CA Zip Code: 94948
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1036.82

Date of Receipt: 04 / 29 / 2005
Transaction ID: C163023
Amount of Each Receipt this Period: 105.72
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

B.
Full Name (Last, First, Middle Initial)
Bank of Marin
Mailing Address Post Office Box L
City: Novato State: CA Zip Code: 94948
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1036.82

Date of Receipt: 05 / 31 / 2005
Transaction ID: C163022
Amount of Each Receipt this Period: 151.14
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

C.
Full Name (Last, First, Middle Initial)
Bank of Marin
Mailing Address Post Office Box L
City: Novato State: CA Zip Code: 94948
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 1036.82

Date of Receipt: 06 / 30 / 2005
Transaction ID: C163029
Amount of Each Receipt this Period: 156.47
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

SUBTOTAL of Receipts This Page (optional) ▶ 413.33

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 58
(check only one)
☐ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 1325 Franklin Avenue
City: Garden City State: NY Zip Code: 11530
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 643.98

Date of Receipt: 04 29 2005
Transaction ID: C163020
Amount of Each Receipt this Period: 88.42
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

B.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 1325 Franklin Avenue
City: Garden City State: NY Zip Code: 11530
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 643.98

Date of Receipt: 05 31 2005
Transaction ID: C163021
Amount of Each Receipt this Period: 104.72
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

C.
Full Name (Last, First, Middle Initial)
Merrill Lynch
Mailing Address 1325 Franklin Avenue
City: Garden City State: NY Zip Code: 11530
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010
☒ Primary ☐ General
☐ Other (specify)
Election Cycle-to-Date: 643.98

Date of Receipt: 06 30 2005
Transaction ID: C163031
Amount of Each Receipt this Period: 103.07
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

SUBTOTAL of Receipts This Page (optional) ▶ 296.21

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

25020270460

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one) PAGE 13 / 56
[ ] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [X] 15

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Salomon Smith Barney
Mailing Address 555 California Street, Suite 3900
City: San Francisco State: CA Zip Code: 94104
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 725.29

Date of Receipt: 04 / 08 / 2005
Transaction ID: C163058
Amount of Each Receipt this Period: 85.96
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

B.
Full Name (Last, First, Middle Initial)
Salomon Smith Barney
Mailing Address 555 California Street, Suite 3900
City: San Francisco State: CA Zip Code: 94104
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 725.29

Date of Receipt: 05 / 13 / 2005
Transaction ID: C163059
Amount of Each Receipt this Period: 116.15
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

C.
Full Name (Last, First, Middle Initial)
Salomon Smith Barney
Mailing Address 555 California Street, Suite 3900
City: San Francisco State: CA Zip Code: 94104
FEC ID number of contributing federal political committee: C
Name of Employer
Occupation
Receipt For: 2010 [X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 725.29

Date of Receipt: 06 / 10 / 2005
Transaction ID: C163054
Amount of Each Receipt this Period: 98.73
[ ] Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Interest

SUBTOTAL of Receipts This Page (optional) ▶ 300.84

TOTAL This Period (last page this line number only) ▶ 1010.38

25020270461

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Accurate Word LLC

Mailing Address P.O. Box 1165
White Plains Lane

City: White Plains | State: MD | Zip Code: 20695

Purpose of Disbursement: Printing Services

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9314
Date of Disbursement: 04 / 21 / 2005

Amount of Each Disbursement this Period: 526.80

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
American All Risk Insurance Services

Mailing Address PO Box 1310

City: Suisun City | State: CA | Zip Code: 94585-4310

Purpose of Disbursement: Insurance Premium

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9521
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 22787.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 1270

City: Newark | State: NJ | Zip Code: 07101

Purpose of Disbursement: Merchant Fees

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9316
Date of Disbursement: 05 / 02 / 2005

Amount of Each Disbursement this Period: 4.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 23318.30

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

25020270462

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Ashcraft Music Services

Mailing Address 11202 Raging Brook Drive

City: Bowie State: MD Zip Code: 20720

Purpose of Disbursement
Campaign Event Expenses

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: D9526
Date of Disbursement: 06 / 25 / 2005

Amount of Each Disbursement this Period: 450.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Blazer Communications

Mailing Address 15050 Ventura Blvd. Suite 210

City: Sherman Oaks State: CA Zip Code: 91403

Purpose of Disbursement
Advertisement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: D9325
Date of Disbursement: 04 / 13 / 2005

Amount of Each Disbursement this Period: 224.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
B'nai B'rith Today

Mailing Address Department 224

City: Washington State: DC Zip Code: 20055

Purpose of Disbursement
Advertisement

Candidate Name

Category/ Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: D9326
Date of Disbursement: 04 / 06 / 2005

Amount of Each Disbursement this Period: 325.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 999.00

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

25020270463

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Brendan McCarthy
Mailing Address 708 Imperial Drive
City: Pacifica State: CA Zip Code: 94044
Purpose of Disbursement: Reimbursement of Office Supplies
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9532
Date of Disbursement: 06 / 17 / 2005
Amount of Each Disbursement this Period: 24.28
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Cablevision
Mailing Address PO Box 9202
City: Uniondale State: NY Zip Code: 11555-9202
Purpose of Disbursement: Internet Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9328
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 7.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Cablevision
Mailing Address PO Box 9202
City: Uniondale State: NY Zip Code: 11555-9202
Purpose of Disbursement: Internet Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9327
Date of Disbursement: 05 / 26 / 2005
Amount of Each Disbursement this Period: 9.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 42.26

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

25020270464

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Cablevision
Mailing Address PO Box 9202
City Uniondale State NY Zip Code 11555-9202
Purpose of Disbursement
Internet Services
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9533
Date of Disbursement 06 / 25 / 2005
Amount of Each Disbursement this Period 8.99
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City Los Angeles State CA Zip Code 90071
Purpose of Disbursement
Merchant Fees
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9336
Date of Disbursement 04 / 04 / 2005
Amount of Each Disbursement this Period 10.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City Los Angeles State CA Zip Code 90071
Purpose of Disbursement
Merchant Fees
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9332
Date of Disbursement 04 / 07 / 2005
Amount of Each Disbursement this Period 16.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 34.99

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

25020270465

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant Fees
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9337
Date of Disbursement: 04 / 11 / 2005
Amount of Each Disbursement this Period: 35.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Bank Charges
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9331
Date of Disbursement: 05 / 03 / 2005
Amount of Each Disbursement this Period: 10.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Bank Charges
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9338
Date of Disbursement: 05 / 05 / 2005
Amount of Each Disbursement this Period: 3.53
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 48.53

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial): California Bank & Trust
Mailing Address: 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9329
Date of Disbursement: 05 / 09 / 2005
Amount of Each Disbursement this Period: 16.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): California Bank & Trust
Mailing Address: 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant Fees
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9339
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 35.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): California Bank & Trust
Mailing Address: 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Bank Charges
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9538
Date of Disbursement: 06 / 02 / 2005
Amount of Each Disbursement this Period: 10.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 61.40

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

25020270467

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant fees
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9534
Date of Disbursement: 06 / 07 / 2005
Amount of Each Disbursement this Period: 16.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant fees
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9535
Date of Disbursement: 06 / 10 / 2005
Amount of Each Disbursement this Period: 35.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Merchant Fees
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9537
Date of Disbursement: 06 / 22 / 2005
Amount of Each Disbursement this Period: 34.93
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 86.93

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

25020270468

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
California Pacific

Mailing Address 428 Monterey Road

City: Pacifica State: CA Zip Code: 94044

Purpose of Disbursement: Transportation

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9340
Date of Disbursement: 05 / 26 / 2005

Amount of Each Disbursement this Period: 228.85

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
California Pacific

Mailing Address 428 Monterey Road

City: Pacifica State: CA Zip Code: 94044

Purpose of Disbursement: Transportation

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9539
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 536.95

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Douglas Boxer & Associates

Mailing Address 300 Frank Ogawa Plaza, Suite 500

City: Oakland State: CA Zip Code: 94612

Purpose of Disbursement: Political Consulting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9346
Date of Disbursement: 04 / 01 / 2005

Amount of Each Disbursement this Period: 2000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2765.80

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

25020270469

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Douglas Boxer & Associates

Mailing Address 300 Frank Ogawa Plaza, Suite 500

City: Oakland State: CA Zip Code: 94612

Purpose of Disbursement: Political Consulting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9345
Date of Disbursement: 05 / 01 / 2005

Amount of Each Disbursement this Period: 2000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Douglas Boxer & Associates

Mailing Address 300 Frank Ogawa Plaza, Suite 500

City: Oakland State: CA Zip Code: 94612

Purpose of Disbursement: Political Consulting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9544
Date of Disbursement: 06 / 01 / 2005

Amount of Each Disbursement this Period: 2000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Emerge

Mailing Address 182 Second Street Suite 400

City: San Francisco State: CA Zip Code: 94105

Purpose of Disbursement: Charitable Donation

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9347
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 1000.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 5000.00

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

25020270470

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: Overnight Delivery

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9348
Date of Disbursement: 04 / 21 / 2005

Amount of Each Disbursement this Period: 16.48

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: Overnight Delivery

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9349
Date of Disbursement: 04 / 21 / 2005

Amount of Each Disbursement this Period: 20.76

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: Overnight Delivery

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D6545
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 87.88

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 125.12

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: Overnight Delivery

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9547
Date of Disbursement: 06 / 21 / 2005

Amount of Each Disbursement this Period: 91.83

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address PO Box 1140

City: Memphis State: TN Zip Code: 38101

Purpose of Disbursement: Overnight Delivery

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9546
Date of Disbursement: 06 / 25 / 2005

Amount of Each Disbursement this Period: 58.62

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Inland Empire Community Newspapers

Mailing Address PO Box 6247

City: San Bernardino State: CA Zip Code: 94212

Purpose of Disbursement: Advertisement

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9360
Date of Disbursement: 05 / 12 / 2005

Amount of Each Disbursement this Period: 275.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 425.45

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

25020270472

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Inland Empire Community Newspapers

Mailing Address PO Box 6247

City: San Bernardino State: CA Zip Code: 94212

Purpose of Disbursement: Advertisement

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9550
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 285.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
J- The Jewish News Weekly of Northern CA

Mailing Address 225 Bush Street
Suite 1480

City: San Francisco State: CA Zip Code: 94104-4215

Purpose of Disbursement: Advertisement

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9362
Date of Disbursement: 05 / 12 / 2005

Amount of Each Disbursement this Period: 396.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Legal Community Against Violence

Mailing Address 268 Bush Street #555

City: San Francisco State: CA Zip Code: 94104

Purpose of Disbursement: Charitable Donation

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9552
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 500.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1181.00

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

25020270473

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Gloria Littman
Mailing Address 109 Croyden Ct
City: Albertson State: NY Zip Code: 11507-2207
Purpose of Disbursement: Administrative/Financial Consulting
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9357
Date of Disbursement: 04 / 05 / 2005
Amount of Each Disbursement this Period: 1725.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Gloria Littman
Mailing Address 109 Croyden Ct
City: Albertson State: NY Zip Code: 11507-2207
Purpose of Disbursement: Administrative/Financial Consulting
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9358
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 2250.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Gloria Littman
Mailing Address 109 Croyden Ct
City: Albertson State: NY Zip Code: 11507-2207
Purpose of Disbursement: Administrative/Financial Consulting
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9549
Date of Disbursement: 06 / 06 / 2005
Amount of Each Disbursement this Period: 1650.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 5625.00

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Mitchell Sediva Publishing Co., Inc.

Mailing Address 1001 East 8th Street

City: Los Angeles State: CA Zip Code: 90021

Purpose of Disbursement: Printing Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9366
Date of Disbursement: 05 / 04 / 2005

Amount of Each Disbursement this Period: 1433.41

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Mitchell Sediva Publishing Co., Inc.

Mailing Address 1001 East 8th Street

City: Los Angeles State: CA Zip Code: 90021

Purpose of Disbursement: Printing Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9554
Date of Disbursement: 06 / 21 / 2005

Amount of Each Disbursement this Period: 765.53

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Oberstein, Stock & Friedenthal LLP

Mailing Address 14724 Ventura Blvd., Ste. 800

City: Sherman Oaks State: CA Zip Code: 91403

Purpose of Disbursement: Accounting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9368
Date of Disbursement: 04 / 08 / 2005

Amount of Each Disbursement this Period: 850.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3048.94

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

25020270475

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Office Depot

Mailing Address PO Box 9020

City: Des Moines State: IA Zip Code: 50368

Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9555
Date of Disbursement: 06 / 06 / 2005
Amount of Each Disbursement this Period: 34.41
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Palms Self Storage

Mailing Address 8829 National Boulevard

City: Culver City State: CA Zip Code: 90232

Purpose of Disbursement: Storage Rent
Candidate Name:
Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9370
Date of Disbursement: 04 / 01 / 2005
Amount of Each Disbursement this Period: 145.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Palms Self Storage

Mailing Address 8829 National Boulevard

City: Culver City State: CA Zip Code: 90232

Purpose of Disbursement: Storage Rent
Candidate Name:
Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9371
Date of Disbursement: 05 / 01 / 2005
Amount of Each Disbursement this Period: 145.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 324.41

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

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Palms Self Storage

Mailing Address 8629 National Boulevard

City: Culver City State: CA Zip Code: 90232

Purpose of Disbursement: Storage Rent

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9557
Date of Disbursement: 06 / 01 / 2005

Amount of Each Disbursement this Period: 145.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
San Diego Jewish Journal

Mailing Address 5665 Oberlin Drive, Suite 204

City: San Diego State: CA Zip Code: 92121

Purpose of Disbursement: Advertisement

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9374
Date of Disbursement: 04 / 13 / 2005

Amount of Each Disbursement this Period: 580.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
SBC

Mailing Address Payment Center

City: Sacramento State: CA Zip Code: 95887-0001

Purpose of Disbursement: Telephone Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9378
Date of Disbursement: 04 / 13 / 2005

Amount of Each Disbursement this Period: 64.46

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 769.46

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

25020270477

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial): SBC
Mailing Address: Payment Center
City: Sacramento State: CA Zip Code: 95887-0001
Purpose of Disbursement: Telephone Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9377
Date of Disbursement: 04 / 13 / 2005
Amount of Each Disbursement this Period: 48.02
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial): SBC
Mailing Address: Payment Center
City: Sacramento State: CA Zip Code: 95887-0001
Purpose of Disbursement: Telephone Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9376
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 7.09
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial): SBC
Mailing Address: Payment Center
City: Sacramento State: CA Zip Code: 95887-0001
Purpose of Disbursement: Telephone Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9375
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 12.92
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 68.03

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

25020270478

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
SBC

Mailing Address Payment Center

City: Sacramento State: CA Zip Code: 95887-0001

Purpose of Disbursement: Telephone Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9559
Date of Disbursement: 06 06 2005

Amount of Each Disbursement this Period: 12.92

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
SBC

Mailing Address Payment Center

City: Sacramento State: CA Zip Code: 95887-0001

Purpose of Disbursement: Telephone Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9558
Date of Disbursement: 06 06 2005

Amount of Each Disbursement this Period: 5.79

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Sheri Bohigian

Mailing Address 4817 N. Harrison Ave

City: Fresno State: CA Zip Code: 93704-2912

Purpose of Disbursement: Reimbursement campaign expenses

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9560
Date of Disbursement: 06 06 2005

Amount of Each Disbursement this Period: 288.08

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 306.79

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

25020270479

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Super Shuttle Los Angeles

Mailing Address 14500 N. Northsight Blvd. Suite 329

City: Scottsdale State: AZ Zip Code: 85260

Purpose of Disbursement: Transportation

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9561
Date of Disbursement: 06 / 06 / 2005

Amount of Each Disbursement this Period: 311.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
T-Mobile

Mailing Address PO Box 742596

City: Cincinnati State: OH Zip Code: 45274-2596

Purpose of Disbursement: Cellular Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9387
Date of Disbursement: 04 / 05 / 2005

Amount of Each Disbursement this Period: 1869.28

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 200 S. Barrington Avenue

City: Los Angeles State: CA Zip Code: 90049

Purpose of Disbursement: Postage

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9393
Date of Disbursement: 05 / 12 / 2005

Amount of Each Disbursement this Period: 740.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2920.28

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

25020270480

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
United States Postal Service

Mailing Address 200 S. Barrington Avenue

City: Los Angeles State: CA Zip Code: 90049

Purpose of Disbursement: Postage

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9573
Date of Disbursement: 06 / 06 / 2005

Amount of Each Disbursement this Period: 1998.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant

Mailing Address 1st & C Streets, N.E.

City: Washington State: DC Zip Code: 20510

Purpose of Disbursement: Refreshments

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9571
Date of Disbursement: 06 / 06 / 2005

Amount of Each Disbursement this Period: 85.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant

Mailing Address 1st & C Streets, N.E.

City: Washington State: DC Zip Code: 20510

Purpose of Disbursement: Refreshments

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9570
Date of Disbursement: 06 / 06 / 2005

Amount of Each Disbursement this Period: 43.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2126.70

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

25020270481

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant
Mailing Address 1st & C Streets, N.E.
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Refreshments
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9568
Date of Disbursement: 06 / 25 / 2005
Amount of Each Disbursement this Period: 86.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant
Mailing Address 1st & C Streets, N.E.
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Refreshments
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9569
Date of Disbursement: 06 / 25 / 2005
Amount of Each Disbursement this Period: 123.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant
Mailing Address 1st & C Streets, N.E.
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Refreshments
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9572
Date of Disbursement: 06 / 25 / 2005
Amount of Each Disbursement this Period: 169.20
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 378.60

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

25020270482

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant
Mailing Address 1st & C Streets, N.E.
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Refreshments
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9567
Date of Disbursement: 06 / 25 / 2005
Amount of Each Disbursement this Period: 72.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
United States Senate Restaurant
Mailing Address 1st & C Streets, N.E.
City: Washington State: DC Zip Code: 20510
Purpose of Disbursement: Refreshments
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9568
Date of Disbursement: 06 / 25 / 2005
Amount of Each Disbursement this Period: 84.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Verizon Wireless
Mailing Address PO Box 2167
City: Folsom State: CA Zip Code: 95763-2167
Purpose of Disbursement: Cellular Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9401
Date of Disbursement: 04 / 13 / 2005
Amount of Each Disbursement this Period: 6.69
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 162.69

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

25020270483

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D8394
Date of Disbursement 04 / 06 / 2005
Amount of Each Disbursement this Period 194.53
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9395
Date of Disbursement 04 / 13 / 2005
Amount of Each Disbursement this Period 22.25
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/ Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9399
Date of Disbursement 05 / 10 / 2005
Amount of Each Disbursement this Period 38.25
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 255.03

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

25020270484

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9400
Date of Disbursement 05 / 10 / 2005
Amount of Each Disbursement this Period 5.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9396
Date of Disbursement 05 / 12 / 2005
Amount of Each Disbursement this Period 4.54
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Verizon
Mailing Address Payment Processing Center
City Inglewood State CA Zip Code 90313
Purpose of Disbursement
Telephone Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9398
Date of Disbursement 05 / 31 / 2005
Amount of Each Disbursement this Period 39.85
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 50.29

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

25020270485

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address: Payment Processing Center

City: Inglewood | State: CA | Zip Code: 90313

Purpose of Disbursement: Telephone Services

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9397
Date of Disbursement: 05 / 31 / 2005

Amount of Each Disbursement this Period: 5.37

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Verizon

Mailing Address: Payment Processing Center

City: Inglewood | State: CA | Zip Code: 90313

Purpose of Disbursement: Telephone Services

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D8574
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 4.53

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Andrew Wender

Mailing Address: 2258 Wellesley Avenue

City: Los Angeles | State: CA | Zip Code: 90064

Purpose of Disbursement: Administrative Consulting Services

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9319
Date of Disbursement: 04 / 13 / 2005

Amount of Each Disbursement this Period: 350.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 359.90

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

25020270486

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Andrew Wender

Mailing Address 2258 Wellesley Avenue

City: Los Angeles State: CA Zip Code: 90064

Purpose of Disbursement
Administrative Consulting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9318
Date of Disbursement: 05 / 04 / 2005

Amount of Each Disbursement this Period: 595.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Andrew Wender

Mailing Address 2258 Wellesley Avenue

City: Los Angeles State: CA Zip Code: 90064

Purpose of Disbursement
Administrative Consulting Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9523
Date of Disbursement: 06 / 07 / 2005

Amount of Each Disbursement this Period: 280.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
American Express

Mailing Address PO Box 1270

City: Newark State: NJ Zip Code: 07101

Purpose of Disbursement
Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9315
Date of Disbursement: 05 / 12 / 2005

Amount of Each Disbursement this Period: 50.15

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 925.15

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

25020270487

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial): AOL
Mailing Address: 75 Rockefeller Plaza
City: New York State: NY Zip Code: 10019
Purpose of Disbursement: Internet Services
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9323
Date of Disbursement: 05 / 12 / 2005
Amount of Each Disbursement this Period: 3.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): Staples
Mailing Address: 160 W. Sunrise Highway
City: Freeport State: NY Zip Code: 11520
Purpose of Disbursement: Office Supplies
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9383
Date of Disbursement: 05 / 12 / 2005
Amount of Each Disbursement this Period: 21.74
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): American Express
Mailing Address: PO Box 1270
City: Newark State: NJ Zip Code: 07101
Purpose of Disbursement: Credit Card Payment
Candidate Name:
Category/Type:
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9317
Date of Disbursement: 04 / 05 / 2005
Amount of Each Disbursement this Period: 27.67
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 27.67

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

25020270488

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
AOL
Mailing Address 75 Rockefeller Plaza
City: New York State: NY Zip Code: 10019
Purpose of Disbursement: Internet Services
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9322
Date of Disbursement: 04 / 05 / 2005
Amount of Each Disbursement this Period: 8.50
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Office Depot
Mailing Address PO Box 9020
City: Des Moines State: IA Zip Code: 50368
Purpose of Disbursement: Office Supplies
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9369
Date of Disbursement: 04 / 05 / 2005
Amount of Each Disbursement this Period: 19.17
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
Bank of Marin
Mailing Address Post Office Box L
City: Novato State: CA Zip Code: 94948
Purpose of Disbursement: Credit Card Payment
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9324
Date of Disbursement: 05 / 26 / 2005
Amount of Each Disbursement this Period: 1123.68
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1123.68

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

25020270489

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
The Lodge

Mailing Address 1325 Broadway

City: Sonoma State: CA Zip Code: 95476

Purpose of Disbursement: Hotel Accomodations

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9384
Date of Disbursement: 05 / 26 / 2005

Amount of Each Disbursement this Period: 1224.80

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 South Hope Street, Suite 100

City: Los Angeles State: CA Zip Code: 90071

Purpose of Disbursement: Credit Card Payments

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9330
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 2235.39

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
AOL

Mailing Address 75 Rockefeller Plaza

City: New York State: NY Zip Code: 10019

Purpose of Disbursement: Internet Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9320
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 32.29

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 2235.39

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

25020270490

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Hilton Hotels

Mailing Address 9876 Wilshire Blvd.

City: Beverly Hills State: CA Zip Code: 90210

Purpose of Disbursement: Hotel Accomodations

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9359
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 1562.97

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JetBlue Air

Mailing Address PO Box 17435

City: Salt Lake City State: UT Zip Code: 84117

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9361
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 219.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Senate Gift Shop

Mailing Address United States Senate

City: Washington State: DC Zip Code: 20510

Purpose of Disbursement: Constituent Gifts

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9379
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 32.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25020270491

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
United Air

Mailing Address PO Box 66100

City: Chicago State: IL Zip Code: 60666

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9392
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 200.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 South Hope Street, Suite 100

City: Los Angeles State: CA Zip Code: 90071

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9333
Date of Disbursement: 04 / 06 / 2005

Amount of Each Disbursement this Period: 527.82

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
AOL

Mailing Address 75 Rockefeller Plaza

City: New York State: NY Zip Code: 10019

Purpose of Disbursement: Internet Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9321
Date of Disbursement: 04 / 08 / 2005

Amount of Each Disbursement this Period: 81.15

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 527.82

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

25020270492

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Marty's Restaurant Inc.
Mailing Address 527 8th Street SE
City Washington State DC Zip Code 20003
Purpose of Disbursement
Food/Beverages
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9364
Date of Disbursement 04 / 06 / 2005
Amount of Each Disbursement this Period 112.10
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Public Restaurant
Mailing Address 210 Elizabeth Street
City New York State NY Zip Code 10012
Purpose of Disbursement
Food/Beverages
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9372
Date of Disbursement 04 / 06 / 2005
Amount of Each Disbursement this Period 223.37
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
Southwest Air
Mailing Address 5600 West Century Blvd.
City Los Angeles State CA Zip Code 90045
Purpose of Disbursement
Airfare
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9380
Date of Disbursement 04 / 06 / 2005
Amount of Each Disbursement this Period 111.20
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

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

25020270493

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Credit Card Payment
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9334
Date of Disbursement: 04 / 06 / 2005
Amount of Each Disbursement this Period: 20.90
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
California Bank & Trust
Mailing Address 550 South Hope Street, Suite 100
City: Los Angeles State: CA Zip Code: 90071
Purpose of Disbursement: Bank Charges
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9335
Date of Disbursement: 04 / 06 / 2005
Amount of Each Disbursement this Period: 1.00
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
(MEMO ITEM)

C.
Full Name (Last, First, Middle Initial)
First USA Bank, NA
Mailing Address PO Box 5939
City: Carol Stream State: IL Zip Code: 60197
Purpose of Disbursement: Credit Card Payment
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9350
Date of Disbursement: 05 / 17 / 2005
Amount of Each Disbursement this Period: 144.34
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 165.24

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

25020270494

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
First USA Bank, NA

Mailing Address PO Box 5939

City: Carol Stream State: IL Zip Code: 60197

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9351
Date of Disbursement: 05 / 21 / 2005

Amount of Each Disbursement this Period: 241.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
U.S. Airways

Mailing Address 2345 Crystal Drive

City: Arlington State: VA Zip Code: 22227

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9389
Date of Disbursement: 05 / 21 / 2005

Amount of Each Disbursement this Period: 241.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
First USA Bank, NA

Mailing Address PO Box 5939

City: Carol Stream State: IL Zip Code: 60197

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9352
Date of Disbursement: 04 / 06 / 2005

Amount of Each Disbursement this Period: 1051.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 1293.40

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

25020270495

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)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Southwest Air

Mailing Address 5600 West Century Blvd.

City: Los Angeles State: CA Zip Code: 90045

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9381
Date of Disbursement: 04 / 06 / 2005

Amount of Each Disbursement this Period: 185.60

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
United Air

Mailing Address PO Box 66100

City: Chicago State: IL Zip Code: 60666

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9390
Date of Disbursement: 04 / 06 / 2005

Amount of Each Disbursement this Period: 866.10

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
First USA Bank, NA

Mailing Address PO Box 5939

City: Carol Stream State: IL Zip Code: 60197

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9353
Date of Disbursement: 05 / 10 / 2005

Amount of Each Disbursement this Period: 807.80

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 807.80

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

25020270496

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Southwest Air
Mailing Address 5800 West Century Blvd.
City: Los Angeles State: CA Zip Code: 90045
Purpose of Disbursement: Airfare
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9382
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 313.60
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
United Air
Mailing Address PO Box 66100
City: Chicago State: IL Zip Code: 60666
Purpose of Disbursement: Airfare
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9391
Date of Disbursement: 05 / 10 / 2005
Amount of Each Disbursement this Period: 494.20
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial)
American Express
Mailing Address PO Box 1270
City: Newark State: NJ Zip Code: 07101
Purpose of Disbursement: Credit Card Payment
Candidate Name
Category/Type
Office Sought: [ ] House [ ] Senate [ ] President
State: District:
Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)
Transaction ID: D9522
Date of Disbursement: 06 / 07 / 2005
Amount of Each Disbursement this Period: 3.40
[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 3.40

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

25020270497

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)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
AOL

Mailing Address 75 Rockefeller Plaza

City: New York | State: NY | Zip Code: 10019

Purpose of Disbursement: Internet Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9525
Date of Disbursement: 06 / 07 / 2005

Amount of Each Disbursement this Period: 3.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial)
Bank of Marin

Mailing Address Post Office Box L

City: Novato | State: CA | Zip Code: 94948

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9528
Date of Disbursement: 06 / 25 / 2005

Amount of Each Disbursement this Period: 933.57

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
Marty's Restaurant Inc.

Mailing Address 527 8th Street SE

City: Washington | State: DC | Zip Code: 20003

Purpose of Disbursement: Food/Beverages

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9553
Date of Disbursement: 06 / 25 / 2005

Amount of Each Disbursement this Period: 162.50

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 933.57

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

25020270498

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
The Regency

Mailing Address 540 Park Avenue

City: New York | State: NY | Zip Code: 10021

Purpose of Disbursement: Hotel Accomodations

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9562
Date of Disbursement: 06 / 25 / 2005

Amount of Each Disbursement this Period: 771.07

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
California Bank & Trust

Mailing Address 550 South Hope Street, Suite 100

City: Los Angeles | State: CA | Zip Code: 90071

Purpose of Disbursement: Credit Card Payment

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9536
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 625.04

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Alaska Air

Mailing Address PO Box 68900

City: Seattle | State: WA | Zip Code: 98168

Purpose of Disbursement: Airfare

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9519
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 539.20

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 625.04

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

25020270499

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
AOL

Mailing Address 75 Rockefeller Plaza

City: New York | State: NY | Zip Code: 10019

Purpose of Disbursement: Internet Services

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9524
Date of Disbursement: 06 / 14 / 2005

Amount of Each Disbursement this Period: 85.84

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Chase

Mailing Address PO Box 15650

City: Wilmington | State: DE | Zip Code: 19886-5650

Purpose of Disbursement: Credit Card Payment

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9543
Date of Disbursement: 06 / 17 / 2005

Amount of Each Disbursement this Period: 2372.40

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
American Airlines

Mailing Address PO Box 619612

City: Dallas | State: TX | Zip Code: 75261

Purpose of Disbursement: Airfare

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9520
Date of Disbursement: 06 / 17 / 2005

Amount of Each Disbursement this Period: 1000.80

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 2372.40

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

25020270500

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
U.S. Airways

Mailing Address 2345 Crystal Drive

City: Arlington State: VA Zip Code: 22227

Purpose of Disbursement: Airfare

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9564
Date of Disbursement: 06 / 17 / 2005

Amount of Each Disbursement this Period: 246.70

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
United Air

Mailing Address PO Box 66100

City: Chicago State: IL Zip Code: 60666

Purpose of Disbursement: Airfare

Candidate Name:

Category/Type:

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010 [X] Primary [ ] General [ ] Other (specify)

Transaction ID: D9565
Date of Disbursement: 06 / 17 / 2005

Amount of Each Disbursement this Period: 1124.80

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶ 0.00

TOTAL This Period (last page this line number only) ▶ 61524.46

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)
[ ] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [X] 21

PAGE 54 / 56

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A.
Full Name (Last, First, Middle Initial)
Bob Casey for Pennsylvania

Mailing Address P.O. Box 1177

City Harrisburg State PA Zip Code 17108-1177

Purpose of Disbursement
Contribution

Candidate Name
Bob Casey

Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: PA District:

Disbursement For: 2006
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: D9530
Date of Disbursement 06 / 30 / 2005

Amount of Each Disbursement this Period
2100.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.
Full Name (Last, First, Middle Initial)
Bob Casey for Pennsylvania

Mailing Address P.O. Box 1177

City Harrisburg State PA Zip Code 17108-1177

Purpose of Disbursement
Contribution

Candidate Name
Bob Casey

Category/Type

Office Sought: [ ] House [X] Senate [ ] President
State: PA District:

Disbursement For: 2006
[ ] Primary [X] General
[ ] Other (specify)

Transaction ID: D9581
Date of Disbursement 06 / 30 / 2005

Amount of Each Disbursement this Period
$ 1900.00

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.
Full Name (Last, First, Middle Initial)
EMILY's List

Mailing Address 1120 Connecticut Avenue NW
Suite 1100

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution/List Rental

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2010
[X] Primary [ ] General
[ ] Other (specify)

Transaction ID: D9583
Date of Disbursement 05 / 01 / 2005

Amount of Each Disbursement this Period
1337.10

[ ] Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]
In Kind Made

SUBTOTAL of Disbursements This Page (optional) ▶ 4000.00

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

25020270502

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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
First Star

Mailing Address 1666 K Street NW Suite 700

City: Washington State: DC Zip Code: 20006

Purpose of Disbursement: Charitable Donation

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President State: District:

Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D9548
Date of Disbursement: 06 / 06 / 2005

Amount of Each Disbursement this Period: 5000.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Wellstone Action Fund

Mailing Address 821 Raymond Avenue Suite 280

City: Saint Paul State: MN Zip Code: 55114

Purpose of Disbursement: Charitable donation

Candidate Name

Category/Type

Office Sought: ☐ House ☐ Senate ☐ President State: District:

Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify)

Transaction ID: D9575
Date of Disbursement: 06 / 15 / 2005

Amount of Each Disbursement this Period: 1000.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Woolsey for Congress

Mailing Address P.O. Box 750176

City: Petaluma State: CA Zip Code: 94975

Purpose of Disbursement: Contribution

Candidate Name: Lynn Woolsey

Category/Type

Office Sought: ☒ House ☐ Senate ☐ President State: CA District: 6

Disbursement For: 2006 ☐ Primary ☒ General ☐ Other (specify)

Transaction ID: D9582
Date of Disbursement: 06 / 30 / 2005

Amount of Each Disbursement this Period: 1900.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 7900.00

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)
☐ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)
Friends of Barbara Boxer

A. Full Name (Last, First, Middle Initial)
Woolsey for Congress

Mailing Address P.O. Box 750176

City: Petaluma
State: CA
Zip Code: 94975

Purpose of Disbursement: Contribution

Candidate Name: Lynn Woolsey

Office Sought: ☒ House ☐ Senate ☐ President
State: CA District: 6

Disbursement For: 2006
☒ Primary ☐ General
☐ Other (specify)

Transaction ID: D9576
Date of Disbursement: 08 30 2005

Amount of Each Disbursement this Period: 2100.00

☐ Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶ 2100.00

TOTAL This Period (last page this line number only) ▶ 14000.00

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Julie Diep
Kaufman Downing ELP
777 S. Figueroa Street, Suite 4050

Los Angeles, CA 90017

FedEx Express

Ship Date: 14JUL05
Actual Wgt: 2 LB
System#: 5352691/INET2200
Account#: S ********

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Delivery Address Bar Code

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232 Hart Senate Office Building

Washington, DC 20510

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SECRETARY

PAMELA B. GAMIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
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United States Senate

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Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
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UPS		☐
DHL		☐
AIRBORNE EXPRESS		☐

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Date of Receipt

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FAX _____
Date of Receipt

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Date of Receipt or Postmark

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25020270506
25020270506