

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines.   
Dr. Raul Ruiz for Congress

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** ▼  CITY ▲ STATE ▲ ZIP CODE ▲  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE ▼ DISTRICT

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   /  through   /

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 John Pinkney

Signature of Treasurer John Pinkney [Electronically Filed] Date   /

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

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Dr. Raul Ruiz for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	48703.55	49128.67
(b) Total Contribution Refunds (from Line 20(d)) .....	6.92	6.92
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	48696.63	49121.75
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	69880.64	102524.40
(b) Total Offsets to Operating Expenditures (from Line 14).....	275.00	275.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	69605.64	102249.40
8. Cash on Hand at Close of Reporting Period (from Line 27).....	43689.07	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	65137.39	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Dr. Raul Ruiz for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1500.00	1500.00
(ii) Unitemized.....	701.15	1126.27
(iii) TOTAL of contributions from individuals ▶	2201.15	2626.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	46502.40	46502.40
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	48703.55	49128.67
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	275.00	275.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	48978.55	49403.67

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	69880.64	102524.40
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	6.92	6.92
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	6.92	6.92
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	69887.56	102531.32

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	64598.08
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	48978.55
25. SUBTOTAL (add Line 23 and Line 24).....	113576.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	69887.56
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	43689.07

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 44
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Marshall Gelfand**

Mailing Address 12123 Troon Circle

City Rancho Mirage State CA Zip Code 92270

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2012

**Transaction ID : C8683544**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Hossain Sahlolbei**

Mailing Address 326 W. Hobsonway

City Blythe State CA Zip Code 92225

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C8687275**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Information Requested Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1500.00

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Air Line Pilots Association PAC**

Mailing Address 1625 Massachusetts Ave NW

City Washington State DC Zip Code 20036-2212

FEC ID number of contributing federal political committee. **C C00035451**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C8687270**

Amount of Each Receipt this Period  
2500.00

2012 Debt Retirement

**B.** Full Name (Last, First, Middle Initial)  
**Al Franken for Senate 2014**

Mailing Address PO Box 583144

City Minneapolis State MN Zip Code 55458-3144

FEC ID number of contributing federal political committee. **C C00480384**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2.40

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C8687274**

Amount of Each Receipt this Period  
2.40

**C.** Full Name (Last, First, Middle Initial)  
**American Association of Orthopaedic Surgeons PAC**

Mailing Address 317 Massachusetts Ave NE  
FI 1

City Washington State DC Zip Code 20002-5769

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012

**Transaction ID : C8687269**

Amount of Each Receipt this Period  
5000.00

2012 Debt Retirement

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

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

7502.40

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Osteopathic Information Association PAC**

Mailing Address 1090 Vermont Ave NW  
Ste 500

City Washington State DC Zip Code 20005-4905

FEC ID number of contributing federal political committee. **C C00113803**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683637**

Amount of Each Receipt this Period  
5000.00

2012 General Debt

**B.** Full Name (Last, First, Middle Initial)  
**American Psychiatric Association PAC (APA)**

Mailing Address 1000 Wilson Blvd  
Ste 1825

City Arlington State VA Zip Code 22209-3924

FEC ID number of contributing federal political committee. **C C00373696**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : C8687272**

Amount of Each Receipt this Period  
500.00

2012 General Debt

**C.** Full Name (Last, First, Middle Initial)  
**American Society of anesthesiologists PAC**

Mailing Address 520 N Northwest Hwy

City Park Ridge State IL Zip Code 60068-2538

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683638**

Amount of Each Receipt this Period  
5000.00

2012 General Debt

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

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

10500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERIPAC**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C C00271338**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683640**

Amount of Each Receipt this Period  
5000.00

2012 General Debt

**B.** Full Name (Last, First, Middle Initial)  
**Committee For Leadership And Progress**

Mailing Address PO Box 31107

City Bethesda State MD Zip Code 20824-1107

FEC ID number of contributing federal political committee. **C C00366666**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683639**

Amount of Each Receipt this Period  
3000.00

2012 General Debt

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

Mailing Address 8456 Grand Ave

City Elmhurst State NY Zip Code 11373-4352

FEC ID number of contributing federal political committee. **C C00338954**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683645**

Amount of Each Receipt this Period  
1500.00

2012 General Debt

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

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

9500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A. Debbie Wasserman Schultz for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1071 Twin Branch Ln  
 City Weston State FL Zip Code 33326-2828  
 FEC ID number of contributing federal political committee. **C C00385773**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012  
**Transaction ID : C8683646**  
 Amount of Each Receipt this Period  
 2000.00  
 2012 General Debt

**B. Hoyer for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 700 13th St NW Ste 600  
 City Washington State DC Zip Code 20005-3960  
 FEC ID number of contributing federal political committee. **C C00140715**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012  
**Transaction ID : C8683648**  
 Amount of Each Receipt this Period  
 2000.00  
 2012 General Debt

**C. MAINSTREAM PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 E San Carlos St C/O CONTRIBUTION SOLUTIONS, LLC  
 City San Jose State CA Zip Code 95112-3680  
 FEC ID number of contributing federal political committee. **C C00343574**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012  
**Transaction ID : C8683642**  
 Amount of Each Receipt this Period  
 2000.00  
 2012 General Debt

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 44
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A. Mike Honda for Congress**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 123 E San Carlos St # 531  
 City San Jose State CA Zip Code 95112-3680  
 FEC ID number of contributing federal political committee. **C C00351379**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012  
**Transaction ID : C8683647**  
 Amount of Each Receipt this Period  
 1000.00  
 2012 General Debt

**B. National Air Traffic Controllers Association PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 Massachusetts Ave NW  
 City Washington State DC Zip Code 20005-4171  
 FEC ID number of contributing federal political committee. **C C00238725**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2012  
**Transaction ID : C8687271**  
 Amount of Each Receipt this Period  
 2500.00  
 2012 General Debt

**C. National Emergency Medicine PAC NEMPAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1125 Executive Cir  
 City Irving State TX Zip Code 75038-2522  
 FEC ID number of contributing federal political committee. **C C00140061**  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2012  
**Transaction ID : C8683547**  
 Amount of Each Receipt this Period  
 5000.00  
 2012 General Debt

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

8500.00

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

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

FOR LINE NUMBER: PAGE 11 OF 44  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial)  
PACE OF CALIFORNIA SCHOOL EMPLOYEES ASSOCIATION - LOCAL, STATE, FEDERAL CANDIDATES

**A.** Mailing Address 555 Capitol Mall  
Ste 1425

City Sacramento State CA Zip Code 95814-4602

FEC ID number of contributing federal political committee. **C** C00480830

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683641**

Amount of Each Receipt this Period  
1500.00

2012 General Debt

Full Name (Last, First, Middle Initial)  
**Victory In November Election (VINEPAC)**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C** C00378695

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 05 / 2012

**Transaction ID : C8683643**

Amount of Each Receipt this Period  
2000.00

2012 General Debt

Full Name (Last, First, Middle Initial)  
**Comcast Corporation & NBC Universal**

Mailing Address 1701 John F Kennedy Blvd  
Fl 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 04 / 2012

**Transaction ID : C8687273A**

Amount of Each Receipt this Period  
1000.00

\* Earmarked Contribution: See Below  
2012 General Debt

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 12 OF 44  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**AMERIPAC**

Mailing Address 700 13th St NW  
Ste 600

City Washington State DC Zip Code 20005-3960

FEC ID number of contributing federal political committee. **C** C00271338

Name of Employer Occupation  
Conduit total listed in Agg. field

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2012

**Transaction ID : C8687273AB**

Amount of Each Receipt this Period  
1000.00

**[MEMO ITEM]**  
Note: Above Contribution earmarked through this organization.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

46502.40

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

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

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Desert Recreation District**

Mailing Address 45871 Clinton St

City Indio State CA Zip Code 92201-3870

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2012

**Transaction ID : C8682817**

Amount of Each Receipt this Period  
275.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

275.00

275.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 14.27 <b>Transaction ID : D476704</b>
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 4.94 <b>Transaction ID : D476705</b>
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.72 <b>Transaction ID : D476706</b>
City Cambridge	State MA	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 003
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19.93
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 0.45 <b>Transaction ID : D476708</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. ActBlue Technical Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 3.78 <b>Transaction ID : D477684</b>
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit Card Processing Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D477289</b>
City Dallas	State TX	
Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	54.23
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D475898</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D475899</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D475900</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	150.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D475901</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475902</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475903</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475904</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475906</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475907</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475908</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475909</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475910</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>A. AT&amp;T</b>		M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period
City Dallas State TX Zip Code 75202-4209		10.00
Purpose of Disbursement Cell Phone Service		<b>Transaction ID : D475911</b>
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. AT&amp;T</b>		M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period
City Dallas State TX Zip Code 75202-4209		50.00
Purpose of Disbursement Cell Phone Service		<b>Transaction ID : D472935</b>
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. AT&amp;T</b>		M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period
City Dallas State TX Zip Code 75202-4209		50.00
Purpose of Disbursement Cell Phone Service		<b>Transaction ID : D472936</b>
Candidate Name		Category/Type
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	110.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D472937</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475918</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475919</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	70.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475920</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475921</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475922</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475923</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475924</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475925</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475926</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475927</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475928</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475929</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475930</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475931</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475932</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 208 S Akard St Ste 110		Amount of Each Disbursement this Period 10.00 <b>Transaction ID : D475933</b>
City Dallas State TX Zip Code 75202-4209	Purpose of Disbursement Cell Phone Service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Behr Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 528 Arizona Ave Ste 217		Amount of Each Disbursement this Period 9975.00 <b>Transaction ID : D473226</b>
City Santa Monica State CA Zip Code 90401-1463	Purpose of Disbursement Consultant - Communication	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9995.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Behr Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2012
Mailing Address 528 Arizona Ave Ste 217		Amount of Each Disbursement this Period 0.70
City Santa Monica	State CA Zip Code 90401-1463	
Purpose of Disbursement Consultant - Communications	Category/Type	<b>Transaction ID : D479794</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 46.84
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel Insurance	Category/Type 002	<b>Transaction ID : D477889</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 390.40
City Atlanta	State GA Zip Code 30320-6001	
Purpose of Disbursement Travel	Category/Type 002	<b>Transaction ID : D477282</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	437.94
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 390.40
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	<b>Transaction ID : D477283</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 39.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	<b>Transaction ID : D477284</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706		Amount of Each Disbursement this Period 39.00
City Atlanta	State GA	
Zip Code 30320-6001	Purpose of Disbursement Travel	<b>Transaction ID : D477285</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	468.40
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706			Amount of Each Disbursement this Period 29.00 <b>Transaction ID : D477286</b>
City Atlanta	State GA	Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012
Mailing Address PO Box 20706			Amount of Each Disbursement this Period 29.00 <b>Transaction ID : D477287</b>
City Atlanta	State GA	Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Delta Airlines</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address PO Box 20706			Amount of Each Disbursement this Period 160.60 <b>Transaction ID : D475916</b>
City Atlanta	State GA	Zip Code 30320-6001	
Purpose of Disbursement Travel	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	218.60
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Bradley Elkins</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012	
Mailing Address 1050 17th St NW Ste 375			Amount of Each Disbursement this Period 624.75	
City Washington	State DC	Zip Code 20036-5594	Transaction ID : <b>D476723</b>	
Purpose of Disbursement Mileage Reimbursement		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. First Data</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012	
Mailing Address 5565 Glenridge Connector NE Ste 2000			Amount of Each Disbursement this Period 4358.09	
City Atlanta	State GA	Zip Code 30342-4799	Transaction ID : <b>D475896</b>	
Purpose of Disbursement Credit Card Processing Fees		Category/Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Kyle Layman</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012	
Mailing Address 3010 Tanbark Ct			Amount of Each Disbursement this Period 2191.27	
City Burlington	State NC	Zip Code 27215-4654	Transaction ID : <b>D479797</b>	
Purpose of Disbursement Win Bonus		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7174.11
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kyle Layman</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012		
Mailing Address 3010 Tanbark Ct			Amount of Each Disbursement this Period 5413.40		
City Burlington	State NC	Zip Code 27215-4654	Transaction ID : <b>D478845</b>		
Purpose of Disbursement Win Bonus		Category/ Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2012		
Mailing Address 911 Panorama Trail Street			Amount of Each Disbursement this Period 115.35		
City Rochester	State NY	Zip Code 14625-0397	Transaction ID : <b>D476487</b>		
Purpose of Disbursement Payroll - Invoice		Category/ Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012		
Mailing Address 911 Panorama Trail Street			Amount of Each Disbursement this Period 4932.69		
City Rochester	State NY	Zip Code 14625-0397	Transaction ID : <b>D476455</b>		
Purpose of Disbursement Payroll - Taxes		Category/ Type 001			
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10461.44
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 44		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 911 Panorama Trail Street		Amount of Each Disbursement this Period 74.11 <b>Transaction ID : D476456</b>
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Worker's Compensation Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 911 Panorama Trail Street		Amount of Each Disbursement this Period 2083.83 <b>Transaction ID : D477279</b>
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll - Taxes Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 911 Panorama Trail Street		Amount of Each Disbursement this Period 58.62 <b>Transaction ID : D477280</b>
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Worker's Compensation Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2216.56
<b>TOTAL</b> This Period (last page this line number only).....	



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2012
Mailing Address 911 Panorama Trail Street		Amount of Each Disbursement this Period 50.35 <b>Transaction ID : D477281</b>
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll - Invoice Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Promotivators, LTD</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 3674 E Bogert Trl		Amount of Each Disbursement this Period 15461.98 <b>Transaction ID : D476486</b>
City Palm Springs State CA Zip Code 92264-9646	Purpose of Disbursement Printing of Campaign Materials Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Promotivators, LTD</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 3674 E Bogert Trl		Amount of Each Disbursement this Period 336.50 <b>Transaction ID : D476722</b>
City Palm Springs State CA Zip Code 92264-9646	Purpose of Disbursement Printing of Campaign Materials Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15848.83
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 44		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Southern California Edison</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address PO Box 800		Amount of Each Disbursement this Period 412.81 <b>Transaction ID : D475914</b>
City Rosemead	State CA	
Zip Code 91770-0800	Purpose of Disbursement Electric Bill	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Uribe Printing, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2012
Mailing Address 2900 Adams St # A20		Amount of Each Disbursement this Period 2363.89 <b>Transaction ID : D477275</b>
City Riverside	State CA	
Zip Code 92504	Purpose of Disbursement Printing of Campaign Materials	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2012
Mailing Address 42335 Washington St		Amount of Each Disbursement this Period 495.00 <b>Transaction ID : D475913</b>
City Palm Desert	State CA	
Zip Code 92211-8004	Purpose of Disbursement Stamps	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3271.70
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 44			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 78995 Highway 111		Amount of Each Disbursement this Period 163.36 <b>Transaction ID : D472938</b>
City La Quinta	State CA	
Purpose of Disbursement Cell Phone Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address 78995 Highway 111		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : D475936</b>
City La Quinta	State CA	
Purpose of Disbursement Cell Phone Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012
Mailing Address 78995 Highway 111		Amount of Each Disbursement this Period 163.83 <b>Transaction ID : D477288</b>
City La Quinta	State CA	
Purpose of Disbursement Cell Phone Service	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	377.19
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 44			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Yegsigian Investment Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2012
Mailing Address 25411 Cabot Rd Ste 211		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D477277</b>
City Laguna Hills State CA Zip Code 92653-5525	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Yegsigian Investment Properties</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2012
Mailing Address 25411 Cabot Rd Ste 211		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : D476761</b>
City Laguna Hills State CA Zip Code 92653-5525	Purpose of Disbursement Office Rent	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 911 Panorama Trail Street		Amount of Each Disbursement this Period 8792.69 <b>Transaction ID : D476454</b>
City Rochester State NY Zip Code 14625-0397	Purpose of Disbursement Payroll	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10792.69
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Vivek Kembaiyan</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 11 Cherry Blossom Pl		Amount of Each Disbursement this Period 2434.40
City The Woodlands	State TX	
Zip Code 77381-6245	Purpose of Disbursement Payroll	Transaction ID : <b>D478840</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Liz Kratzer</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 141 Ridge Ct		Amount of Each Disbursement this Period 1511.40
City Saylorsburg	State PA	
Zip Code 18353-8048	Purpose of Disbursement Payroll	Transaction ID : <b>D478841</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Kyle Layman</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012
Mailing Address 3010 Tanbark Ct		Amount of Each Disbursement this Period 3817.30
City Burlington	State NC	
Zip Code 27215-4654	Purpose of Disbursement Payroll	Transaction ID : <b>D478842</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 44	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Dr. Raul Ruiz for Congress**

Full Name (Last, First, Middle Initial) <b>A. Khoa Nguyen</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 07 / 2012	
Mailing Address 31800 Avenida Ximino			Amount of Each Disbursement this Period 1029.59	
City Cathedral City	State CA	Zip Code 92234	Transaction ID : <b>D478843</b>	
Purpose of Disbursement Payroll		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 24 / 2012	
Mailing Address 911 Panorama Trail Street			Amount of Each Disbursement this Period 7604.67	
City Rochester	State NY	Zip Code 14625-0397	Transaction ID : <b>D477278</b>	
Purpose of Disbursement Payroll		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address			Amount of Each Disbursement this Period	
City	State	Zip Code		
Purpose of Disbursement		Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7604.67
<b>TOTAL</b> This Period (last page this line number only).....	69521.29

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Behr Communications**

Mailing Address 528 Arizona Ave  
 Ste 217

City State Zip Code  
 Santa Monica CA 90401-1463

Nature of Debt (Purpose):  
 Win Bonus

Outstanding Balance Beginning This Period **Transaction ID : D475804**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Behr Communications**

Mailing Address 528 Arizona Ave  
 Ste 217

City State Zip Code  
 Santa Monica CA 90401-1463

Nature of Debt (Purpose):  
 Consultant - Communications

Outstanding Balance Beginning This Period **Transaction ID : D475805**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Bradley Elkins**

Mailing Address 1050 17th St NW  
 Ste 375

City State Zip Code  
 Washington DC 20036-5594

Nature of Debt (Purpose):  
 Mileage Reimbursement

Outstanding Balance Beginning This Period **Transaction ID : D475808**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="10000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Vivek Kembaiyan</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 11 Cherry Blossom Pl		
City State	Zip Code	
The Woodlands TX	77381-6245	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475812</b>	
<input type="text" value="3413.24"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="3413.24"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Liz Kratzer</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 141 Ridge Ct		
City State	Zip Code	
Saylorsburg PA	18353-8048	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475817</b>	
<input type="text" value="3772.96"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="3772.96"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Lake Research Partners Inc.</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 1726 M St NW Ste 1100		
City State	Zip Code	
Washington DC	20036-4528	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475802</b>	
<input type="text" value="10000.00"/>	Amount Incurred This Period	Payment This Period
	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
		Outstanding Balance at Close of This Period
		<input type="text" value="10000.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="17186.20"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Kyle Layman**

Mailing Address 3010 Tanbark Ct

City State Zip Code  
Burlington NC 27215-4654

Nature of Debt (Purpose):  
Win Bonus

Outstanding Balance Beginning This Period **5413.40** Transaction ID : **D475816**

Amount Incurred This Period **0.00** Payment This Period **5413.40** Outstanding Balance at Close of This Period **0.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ann Muller**

Mailing Address 1333 S Belardo Rd Apt 504

City State Zip Code  
Palm Springs CA 92264-8312

Nature of Debt (Purpose):  
Reimbursement

Outstanding Balance Beginning This Period **238.55** Transaction ID : **D475810**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **238.55**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Ann Muller**

Mailing Address 1333 S Belardo Rd Apt 504

City State Zip Code  
Palm Springs CA 92264-8312

Nature of Debt (Purpose):  
Win Bonus

Outstanding Balance Beginning This Period **2530.75** Transaction ID : **D475815**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **2530.75**

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>2769.30</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>NGP VAN, Inc.</b>		Nature of Debt (Purpose): Software
Mailing Address 1101 15th St NW Ste 500		
City State	Zip Code	
Washington DC	20005-5006	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475807</b>	
<input type="text" value="2700.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2700.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Khoa Nguyen</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 31800 Avenida Ximino		
City State	Zip Code	
Cathedral City CA	92234	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475813</b>	
<input type="text" value="2575.58"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="2575.58"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Paychex</b>		Nature of Debt (Purpose): Payroll Tax on Win Bonuses
Mailing Address 911 Panorama Trail Street		
City State	Zip Code	
Rochester NY	14625-0397	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475811</b>	
<input type="text" value="14530.20"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="4275.10"/>	<input type="text" value="10255.10"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="15530.68"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 43 OF 44
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Promotivators, LTD</b>	Nature of Debt (Purpose): Printing of Campaign Materials
Mailing Address 3674 E Bogert Trl	
City State Zip Code Palm Springs CA 92264-9646	

Outstanding Balance Beginning This Period 15461.98	<b>Transaction ID : D475801</b>	
Amount Incurred This Period 0.00	Payment This Period 15461.98	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Greg Lucas Rodriguez</b>	Nature of Debt (Purpose): Reimbursement
Mailing Address 233 Camino Sur	
City State Zip Code Palm Springs CA 92262-4302	

Outstanding Balance Beginning This Period 545.76	<b>Transaction ID : D475809</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 545.76

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>John Rodriguez</b>	Nature of Debt (Purpose): Win Bonus
Mailing Address 9639 Spyglass Ave	
City State Zip Code Desert Hot Springs CA 92240-1274	

Outstanding Balance Beginning This Period 4105.45	<b>Transaction ID : D475818</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4105.45

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	4651.21
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

NAME OF COMMITTEE (In Full)

**Dr. Raul Ruiz for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Baughman Company</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 122 C St NW Ste 240		
City State	Zip Code	
Washington	DC 20001-2109	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475803</b>	
<input type="text" value="15000.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="15000.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Uribe Printing, Inc.</b>		Nature of Debt (Purpose): Printing of Campaign Materials
Mailing Address 2900 Adams St # A20		
City State	Zip Code	
Riverside	CA 92504	

Outstanding Balance Beginning This Period	<b>Transaction ID : D475806</b>	
<input type="text" value="2363.89"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2363.89"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="15000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="65137.39"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="65137.39"/>