

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. 12FE4M5 DAVID ALAMEEL FOR CONGRESS

ADDRESS (number and street) 5310 HARVEST HILL ROAD SUITE 202 DALLAS TX 75230 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00507483 3. IS THIS REPORT NEW (N) OR AMENDED (A) TX 33

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 MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 05/10/2012 through 06/30/2012

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 Nadya Alameel

Signature of Treasurer Nadya Alameel [Electronically Filed] Date MM/DD/YYYY 04/14/2012

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

Table with 7 columns and 1 row, containing Office Use Only and FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DAVID ALAMEEL 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))....	0.00	5940.59
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	5940.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	574352.97	3366215.98
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	574352.97	3366215.98
8. Cash on Hand at Close of Reporting Period (from Line 27).....	693232.39	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	4060349.71	

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

DAVID ALAMEEL FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	55.59
(ii) Unitemized.....	0.00	160.00
(iii) TOTAL of contributions from individuals ▶	0.00	215.59
(b) Political Party Committees.....	0.00	2600.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	3125.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	5940.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	915000.00	4060349.71
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	915000.00	4060349.71
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	13665.07	13665.07
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	928665.07	4079955.37

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	574352.97	3366215.98
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	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	5507.00	20507.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	579859.97	3386722.98

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	344427.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	928665.07
25. SUBTOTAL (add Line 23 and Line 24).....	1273092.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	579859.97
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	693232.39

**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 338
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. David Alameel

Mailing Address 5020 Tanbark Rd

City State Zip Code
Dallas TX 75229

FEC ID number of contributing federal political committee. **C H2TX06152**

Name of Employer Occupation
Self Dr.

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
3448530.30

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 14 / 2012

Transaction ID : SA13A.6799

Amount of Each Receipt this Period
300000.00

B. Full Name (Last, First, Middle Initial)
Dr. David Alameel

Mailing Address 5020 Tanbark Rd

City State Zip Code
Dallas TX 75229

FEC ID number of contributing federal political committee. **C H2TX06152**

Name of Employer Occupation
Self Dr.

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
3563530.30

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 21 / 2012

Transaction ID : SA13A.6801

Amount of Each Receipt this Period
115000.00

C. Full Name (Last, First, Middle Initial)
Dr. David Alameel

Mailing Address 5020 Tanbark Rd

City State Zip Code
Dallas TX 75229

FEC ID number of contributing federal political committee. **C H2TX06152**

Name of Employer Occupation
Self Dr.

Receipt For: Primary General Other (specify)

Election Cycle-to-Date
3813530.30

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 22 / 2012

Transaction ID : SA13A.6802

Amount of Each Receipt this Period
250000.00

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

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

665000.00

**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 338
	<input type="checkbox"/> 11a 12 <input checked="" 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)
DAVID ALAMEEL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Dr. David Alameel

Mailing Address 5020 Tanbark Rd

City Dallas State TX Zip Code 75229

FEC ID number of contributing federal political committee. **C** H2TX06152

Name of Employer Self Occupation Dr.

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date 4063530.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2012

Transaction ID : SA13A.6803

Amount of Each Receipt this Period
 250000.00

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).....

250000.00

915000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 338
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
Rindy Miller Media

Mailing Address 2401 E. 6th Street STE 1003

City Austin State TX Zip Code 78702

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
13665.07

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 31 / 2012

Transaction ID : SA15.6791

Amount of Each Receipt this Period
13665.07

Refund unspent media funds

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 M / D 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 M / D 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).....

13665.07

13665.07

**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 8 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ace Flyer Distribution		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 1200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5746
Category/Type 006		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DeJuan Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 520.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5935
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DeJuan Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 910.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6064
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2630.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DeJuan Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 598.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6415
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:		

Full Name (Last, First, Middle Initial) B. Nicole Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 208.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5937
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:		

Full Name (Last, First, Middle Initial) c. Nicole Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 208.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6065
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:		

SUBTOTAL of Disbursements This Page (optional).....	1014.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nicole Adams		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 520.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6416
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Diana Aguirre		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6355
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Diana Aguirre		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6619
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1040.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gary Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5954
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Gary Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6278
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Gary Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6552
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 338			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gary Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6704
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. James Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 297.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5963
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5875
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	559.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6074
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Michael Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6426
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shaquala Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5899
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	790.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shaquala Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6098
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Shaquala Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6457
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Velma Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6014
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 15 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Velma Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6345
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:		

Full Name (Last, First, Middle Initial) B. Velma Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6611
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:		

Full Name (Last, First, Middle Initial) c. Velma Alexander		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6763
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:		

SUBTOTAL of Disbursements This Page (optional).....	517.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gwendolyn Alford		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5957
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Gwendolyn Alford		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6280
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Gwendolyn Alford		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6554
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	759.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gwendolyn Alford		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6706
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:		

Full Name (Last, First, Middle Initial) B. Guadalupe Almuina		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5956
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:		

Full Name (Last, First, Middle Initial) C. Laura Alvarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6161
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:		

SUBTOTAL of Disbursements This Page (optional).....	414.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Laura Alvarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00 Transaction ID : SB17.6357
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Carmen Arajo		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00 Transaction ID : SB17.6260
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Carmen Arajo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00 Transaction ID : SB17.6536
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	887.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 19 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carmen Arajo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 9,999,999.99 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6687
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rodrigo Arellano		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 9,999,999.99 462.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6046
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Rodrigo Arellano		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 9,999,999.99 364.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6234
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	958.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rodrigo Arellano		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 247.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6510
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rodrigo Arellano		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 247.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6664
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Arlington Citizens Journal		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 2260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5722
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 004	

SUBTOTAL of Disbursements This Page (optional)	2754.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yuleydi Ascencio		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 319.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6059
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:		

Full Name (Last, First, Middle Initial) B. Yuleydi Ascencio		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6352
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:		

Full Name (Last, First, Middle Initial) c. Yuleydi Ascencio		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6505
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:		

SUBTOTAL of Disbursements This Page (optional).....	495.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yuleydi Ascencio		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6617
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Yuleydi Ascencio		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6769
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address PO BOX 5014		Amount of Each Disbursement this Period 754.01
City	State Zip Code	
Carol Stream IL 60197	Candidate Name	Transaction ID : SB17.5724
Purpose of Disbursement		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1051.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6305
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Maria Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6579
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Maria Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6731
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oscar Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5993
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Oscar Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6319
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Oscar Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6589
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	616.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oscar Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6743
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:		

Full Name (Last, First, Middle Initial) B. Rosa Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 407.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6000
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:		

Full Name (Last, First, Middle Initial) C. Rosa Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6327
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:		

SUBTOTAL of Disbursements This Page (optional).....	792.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rosa Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6597
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rosa Avila		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6751
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jairo Avina		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5829
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	426.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jairo Avina		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6134
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jairo Avina		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6469
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Paulette Azbill		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 288.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	628.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paulette Azbill		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 648.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6070
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Paulette Azbill		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 660.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6413
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Marisa Badillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5983
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1484.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marisa Badillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6311
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Marisa Badillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6581
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Marisa Badillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6733
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	407.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Victor Ballas		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address 4936 Radbrook Place		Amount of Each Disbursement this Period 2500.00
City Dallas	State TX Zip Code 75220	
Purpose of Disbursement RENT	Category/Type	Transaction ID : SB17.5735
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:		

Full Name (Last, First, Middle Initial) B. Balloons By Joel		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address 10251 Harry Hines Blvd #45		Amount of Each Disbursement this Period 600.00
City Dallas	State TX Zip Code 75220	
Purpose of Disbursement	Category/Type 007	Transaction ID : SB17.5745
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:		

Full Name (Last, First, Middle Initial) c. Linda Barb		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6135
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:		

SUBTOTAL of Disbursements This Page (optional).....	3300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eric Barrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 456.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5945
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Eric Barrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 552.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6236
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Eric Barrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 324.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6512
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1332.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eric Barrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6666
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Juliette Barrilleaux		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5830
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Juliette Barrilleaux		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6136
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	581.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yedin Bautista		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5831
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:		

Full Name (Last, First, Middle Initial) B. Michael Bell		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 440.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6314
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:		

Full Name (Last, First, Middle Initial) C. Michael Bell		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6738
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:		

SUBTOTAL of Disbursements This Page (optional).....	712.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Veronica Beltran		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 2080.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5767
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Veronica Beltran		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 2080.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6496
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Ife Bennet		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 70.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5832
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4230.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Roderick Bennett		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 70.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5833
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Gary Berryman		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 288.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5942
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Gary Berryman		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 648.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6068
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1006.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gary Berryman		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 732.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6411
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:		

Full Name (Last, First, Middle Initial) B. Shiela Bills		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6012
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:		

Full Name (Last, First, Middle Initial) C. Shiela Bills		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6335
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:		

SUBTOTAL of Disbursements This Page (optional).....	1260.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shiela Bills		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 66.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6604
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:		

Full Name (Last, First, Middle Initial) B. Shiela Bills		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6757
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:		

Full Name (Last, First, Middle Initial) C. Patrick Black		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5887
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:		

SUBTOTAL of Disbursements This Page (optional).....	328.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Patrick Black		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6086
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Patrick Black		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6427
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Chiquita Blackwell		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6358
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	760.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chiquita Blackwell		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 145.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6620
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:		

Full Name (Last, First, Middle Initial) B. Anthony Booker		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5900
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:		

Full Name (Last, First, Middle Initial) c. Anthony Booker		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6099
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:		

SUBTOTAL of Disbursements This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Anthony Booker		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6421
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:		

Full Name (Last, First, Middle Initial) B. Booker Industries		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 5415 Maple Avenue STE 230		Amount of Each Disbursement this Period 18349.13
City	State Zip Code	
Dallas TX 75235		Transaction ID : SB17.5725
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:		

Full Name (Last, First, Middle Initial) c. Booker Industries		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address 5415 Maple Avenue STE 230		Amount of Each Disbursement this Period 28762.51
City	State Zip Code	
Dallas TX 75235		Transaction ID : SB17.5744
Purpose of Disbursement	Category/ Type	
Candidate Name	006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	47171.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Keshief Boone-Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5923
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Keshief Boone-Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6122
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Keshief Boone-Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00 Transaction ID : SB17.6458
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	590.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wilma Bracken		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6054
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Wilma Bracken		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6350
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Wilma Bracken		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6615
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	792.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wilma Bracken		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6767
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lekitha Brown		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5801
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lekitha Brown		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 400.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6163
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	852.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lekitha Brown		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 325.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6360
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lekitha Brown		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6621
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shebra Brown		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 3767.84
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5757
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional)	4297.84
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 338		
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Buena Suerte		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 13500 Midway Rd., #408		Amount of Each Disbursement this Period 6000.00
City Farmers Branch State TX Zip Code 75244	Purpose of Disbursement 004 Category/Type	
Candidate Name DAVID ALAMEEL FOR CONGRESS		Transaction ID : SB17.5703
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 33	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Tiffany Bush		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		Transaction ID : SB17.6341
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Tiffany Bush		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		Transaction ID : SB17.6608
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional)	6616.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tiffany Bush		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6760
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Manuel Caban		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5888
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Manuel Caban		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6087
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	572.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Manuel Caban		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6436
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:		

Full Name (Last, First, Middle Initial) B. Joe Cabrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5836
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:		

Full Name (Last, First, Middle Initial) c. Joe Cabrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6206
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:		

SUBTOTAL of Disbursements This Page (optional).....	840.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Joe Cabrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6470
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Vernado Cage		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6164
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Vernado Cage		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 405.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6361
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1435.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Vernado Cage		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 870.00 Transaction ID : SB17.6622
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:		

Full Name (Last, First, Middle Initial) B. Lucy Cain		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.6165
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:		

Full Name (Last, First, Middle Initial) c. Lucy Cain		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 395.00 Transaction ID : SB17.6362
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:		

SUBTOTAL of Disbursements This Page (optional).....	870.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 50 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lucy Cain		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6623
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kelton Carpenter		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 288.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5938
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Kelton Carpenter		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6067
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	734.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Carter		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17.6166
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Robert Carter		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.6363
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Robert Carter		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 175.00 Transaction ID : SB17.6624
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	895.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cory Cedillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6265
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Cory Cedillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6540
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Cory Cedillo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6692
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	572.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tina Chambers		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 340.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5806
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:		

Full Name (Last, First, Middle Initial) B. Tina Chambers		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 400.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6167
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:		

Full Name (Last, First, Middle Initial) c. Tina Chambers		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 460.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6364
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:		

SUBTOTAL of Disbursements This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tina Chambers		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 267.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6625
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jeffrey Childs		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6073
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jeffrey Childs		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 120.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6420
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	747.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arleth Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6253
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Arleth Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6528
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Arleth Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6681
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	528.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Irving Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 429.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5958
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Irving Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6281
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Irving Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 396.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6555
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1045.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Irving Cisneros		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6707
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:		

Full Name (Last, First, Middle Initial) B. City Bank of Texas		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 7800 PRESTON RD STE 201		Amount of Each Disbursement this Period 4218.50
City	State Zip Code PLANO TX 75024	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6805
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:		

Full Name (Last, First, Middle Initial) c. City Bank of Texas		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2012
Mailing Address 7800 PRESTON RD STE 201		Amount of Each Disbursement this Period 855.50
City	State Zip Code PLANO TX 75024	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6806
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:		

SUBTOTAL of Disbursements This Page (optional).....	5195.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Becky Clegg		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6168
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Becky Clegg		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6365
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Becky Clegg		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6626
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Aminah Colbert		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5901
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:		

Full Name (Last, First, Middle Initial) B. Aminah Colbert		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6100
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:		

Full Name (Last, First, Middle Initial) c. Nanette Colbert		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5902
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:		

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nanette Colbert		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6101
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Nanette Colbert		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6422
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Cynthia Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6268
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	564.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cynthia Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 286.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6543
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Cynthia Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6695
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jearlean S Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5837
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	558.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jearlean S Coleman		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 270.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6471
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:		

Full Name (Last, First, Middle Initial) B. Robbin Compton		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5807
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:		

Full Name (Last, First, Middle Initial) c. Robbin Compton		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6170
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:		

SUBTOTAL of Disbursements This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robbin Compton		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6366
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Robbin Compton		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6627
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Angelo Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 552.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6235
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1187.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Angelo Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 324.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6511
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Angelo Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6665
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 588.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6045
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1248.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 715.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6232
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 871.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6508
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 468.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6662
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2054.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 130.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6772
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 78.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 135.00
City	State Zip Code	
Purpose of Disbursement REIMBURSEMENTS	Candidate Name	Transaction ID : SB17.6781
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	343.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 78.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6782
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:		

Full Name (Last, First, Middle Initial) B. Connie F. Contreras		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2012
Mailing Address		Amount of Each Disbursement this Period 130.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6783
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:		

Full Name (Last, First, Middle Initial) c. Danille Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6238
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:		

SUBTOTAL of Disbursements This Page (optional)	544.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Danille Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 672.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6514
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Danille Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6668
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Paul Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 352.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5996
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1240.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paul Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6322
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Paul Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 242.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6592
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Paul Contreras		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6746
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	770.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jesus Cordero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6286
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jesus Cordero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6561
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jesus Cordero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6712
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Socorro Cordova		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6008
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:		

Full Name (Last, First, Middle Initial) B. Socorro Cordova		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6336
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:		

Full Name (Last, First, Middle Initial) c. Wendy Craig		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 374.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6057
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:		

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wendy Craig		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6349
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:		

Full Name (Last, First, Middle Initial) B. Wendy Craig		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 297.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6614
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:		

Full Name (Last, First, Middle Initial) c. Wendy Craig		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6766
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:		

SUBTOTAL of Disbursements This Page (optional).....	451.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alexander Cruz		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6208
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Alexander Cruz		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 650.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6472
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jose Cruz		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5924
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1340.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jose Cruz		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6123
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jose Cruz		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6447
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Dallas Examiner		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 7100.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5717
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 004	

SUBTOTAL of Disbursements This Page (optional)	7550.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dallas Post Tribune		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 5040.00
City	State Zip Code	
Purpose of Disbursement	Category/Type 004	Transaction ID : SB17.5706
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:		

Full Name (Last, First, Middle Initial) B. Dallas Voice		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 1512.00
City	State Zip Code	
Purpose of Disbursement	Category/Type 004	Transaction ID : SB17.5727
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:		

Full Name (Last, First, Middle Initial) C. Dallas Weekly		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 4746.88
City	State Zip Code	
Purpose of Disbursement	Category/Type 004	Transaction ID : SB17.5711
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:		

SUBTOTAL of Disbursements This Page (optional).....	11298.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bruce Datcher		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 8000.00
City	State Zip Code	
Purpose of Disbursement FW OFFICE STAFF AND EXPENSES	Category/Type 001	Transaction ID : SB17.5749
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:		

Full Name (Last, First, Middle Initial) B. Clarissa Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6262
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:		

Full Name (Last, First, Middle Initial) c. Clarissa Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 209.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6538
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:		

SUBTOTAL of Disbursements This Page (optional)	8429.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Clarissa Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6689
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jackee Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5961
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jackee Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5962
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	605.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jackee Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6284
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jackee Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 286.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6559
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jackee Davis		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6710
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	759.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen DeGrate		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5903
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:		

Full Name (Last, First, Middle Initial) B. Stephen DeGrate		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6102
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:		

Full Name (Last, First, Middle Initial) c. Sable Dickens		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5911
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:		

SUBTOTAL of Disbursements This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sable Dickens		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6110
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sable Dickens		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6459
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Keisha Dillard		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5925
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	680.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Keisha Dillard		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6124
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:		

Full Name (Last, First, Middle Initial) B. Keisha Dillard		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6428
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:		

Full Name (Last, First, Middle Initial) C. Theresa R. Dixon		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5889
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:		

SUBTOTAL of Disbursements This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Theresa R. Dixon		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6088
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:		

Full Name (Last, First, Middle Initial) B. Theresa R. Dixon		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6429
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:		

Full Name (Last, First, Middle Initial) c. Rhonda Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 341.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5999
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:		

SUBTOTAL of Disbursements This Page (optional).....	831.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rhonda Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6324
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rhonda Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6594
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Rhonda Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6748
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	627.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stanley Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 374.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6009
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Stanley Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6337
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Stanley Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6605
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	913.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stanley Dreyer		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6758
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:		

Full Name (Last, First, Middle Initial) B. David Drude		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 288.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5940
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:		

Full Name (Last, First, Middle Initial) c. David Drude		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6069
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:		

SUBTOTAL of Disbursements This Page (optional).....	756.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Drude		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 72.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6412
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Teresa Duarte		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6338
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Teresa Duarte		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6607
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	501.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Teresa Duarte		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6759
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Alicia Duncan		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6171
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Alicia Duncan		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6367
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	772.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Manuel Duran		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 352.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6302
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Manuel Duran		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6577
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Manuel Duran		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6729
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	616.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Linda Easley		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6297
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:		

Full Name (Last, First, Middle Initial) B. Terrell Edwards		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5890
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:		

Full Name (Last, First, Middle Initial) C. Terrell Edwards		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6089
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:		

SUBTOTAL of Disbursements This Page (optional).....	524.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Terrell Edwards		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6437
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. El Extra		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 2898.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5713
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. El Heraldo		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 2952.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5715
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	6050.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. El Lider USA		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 3538.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5729
Category/Type 004		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Angel Enriquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6249
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Angel Enriquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6524
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4055.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Angel Enriquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6677
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:		

Full Name (Last, First, Middle Initial) B. Matthew B. Epps		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5926
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:		

Full Name (Last, First, Middle Initial) c. Matthew B. Epps		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6125
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:		

SUBTOTAL of Disbursements This Page (optional).....	572.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Matthew B. Epps		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6460
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:		

Full Name (Last, First, Middle Initial) B. Adiryah Esaw		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5839
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:		

Full Name (Last, First, Middle Initial) c. Adiryah Esaw		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6137
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:		

SUBTOTAL of Disbursements This Page (optional).....	530.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jaime Estrada		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City State Zip Code		
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5927
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:		

Full Name (Last, First, Middle Initial) B. Jaime Estrada		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City State Zip Code		
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6126
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:		

Full Name (Last, First, Middle Initial) C. Jaime Estrada		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City State Zip Code		
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6430
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:		

SUBTOTAL of Disbursements This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 95 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny Eubanks		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 341.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5966
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Johnny Eubanks		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6288
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Johnny Eubanks		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6563
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	737.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny Eubanks		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6714
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Barbara Farrow		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6255
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Barbara Farrow		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6530
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	561.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 97 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Barbara Farrow		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6683
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Letric Ferrell		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5904
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Letric Ferrell		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6103
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	262.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lydia Flores		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5840
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lydia Flores		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6219
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Lydia Flores		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6473
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fort Worth Water Department		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address		Amount of Each Disbursement this Period 213.38
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6778
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Zierry Franklin		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6353
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Zierry Franklin		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6618
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	587.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Zierry Franklin		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6770
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:		

Full Name (Last, First, Middle Initial) B. Gregorio Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 156.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6673
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:		

Full Name (Last, First, Middle Initial) c. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address		Amount of Each Disbursement this Period 130.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5772
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:		

SUBTOTAL of Disbursements This Page (optional).....	363.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address		Amount of Each Disbursement this Period 130.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5773
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 750.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6053
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 850.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6231
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 850.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6507
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:		

Full Name (Last, First, Middle Initial) B. Judy Gallegos		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address		Amount of Each Disbursement this Period 850.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6775
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:		

Full Name (Last, First, Middle Initial) C. Daniel Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6269
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:		

SUBTOTAL of Disbursements This Page (optional).....	1876.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Daniel Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6544
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Daniel Garcia		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6696
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Isa Garza		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 407.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5959
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 104 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Isa Garza		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6282
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:		

Full Name (Last, First, Middle Initial) B. Isa Garza		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6556
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:		

Full Name (Last, First, Middle Initial) C. Isa Garza		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6708
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:		

SUBTOTAL of Disbursements This Page (optional).....	506.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alfredo Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6248
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Alfredo Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6523
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Alfredo Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6676
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	506.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 106 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Angelica Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6250
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Angelica Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6525
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Angelica Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6678
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	418.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 338			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ruby Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ruby Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6330
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Ruby Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6600
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	506.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ruby Gaytan		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6754
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Crystal Gayton		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6267
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Crystal Gayton		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6542
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	418.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 109 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Crystal Gayton		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6694
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:		

Full Name (Last, First, Middle Initial) B. Diana Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5808
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:		

Full Name (Last, First, Middle Initial) c. Diana Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6173
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:		

SUBTOTAL of Disbursements This Page (optional).....	800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Diana Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6368
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Diana Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6628
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Suhaylee Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5809
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	885.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Suhaylee Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Suhaylee Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6369
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Suhaylee Glenn		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 95.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6629
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	725.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Agustin Gomez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5842
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:		

Full Name (Last, First, Middle Initial) B. Agustin Gomez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6138
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:		

Full Name (Last, First, Middle Initial) c. Johnny Gomez Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5810
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:		

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny Gomez Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 230.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6175
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Johnny Gomez Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6222
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Johnny Gomez Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 505.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6370
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1095.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 114 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Johnny Gomez Sr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6630
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Jonathan Gomez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00 Transaction ID : SB17.5811
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Jonathan Gomez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 290.00 Transaction ID : SB17.6176
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	860.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jonathan Gomez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6221
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jonathan Gomez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 347.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6371
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jonathan Gomez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6631
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	912.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria Gonzales		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5980
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Maria Gonzales		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6307
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Maria Gonzales		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6580
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	418.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria Gonzales		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00 Transaction ID : SB17.6732
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:		

Full Name (Last, First, Middle Initial) B. Edgar Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00 Transaction ID : SB17.5948
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:		

Full Name (Last, First, Middle Initial) c. Edgar Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.6273
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:		

SUBTOTAL of Disbursements This Page (optional).....	528.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Edgar Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 618.00 Transaction ID : SB17.6547
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:		

Full Name (Last, First, Middle Initial) B. Edgar Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00 Transaction ID : SB17.6699
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:		

Full Name (Last, First, Middle Initial) c. Michael Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 288.00 Transaction ID : SB17.5941
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:		

SUBTOTAL of Disbursements This Page (optional).....	618.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6071
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Michael Gonzalez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6414
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Michael Grace		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 2080.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5754
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional)	2752.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Grace		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 2080.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6499
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:		

Full Name (Last, First, Middle Initial) B. Tirrell Grace		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5905
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:		

Full Name (Last, First, Middle Initial) c. Tirrell Grace		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6104
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:		

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tirrell Grace		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6438
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ashlea Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 317.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6372
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Ashlea Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6632
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	782.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Billy Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5843
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Destiny Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 317.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6374
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Destiny Gray		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6633
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	662.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Akeem Griffin		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5928
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Akeem Griffin		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6127
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Akeem Griffin		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6448
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gaylord Grisby		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 270.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6223
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Andy Guerara		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5844
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Andy Guerara		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6139
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	515.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 338			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kiyana Hall		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 319.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5969
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kiyana Hall		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6292
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Kiyana Hall		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6567
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	737.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kiyana Hall		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6718
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Blanca Harot		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6256
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Joe Harper		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5929
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	603.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Joe Harper		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6128
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Joe Harper		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6449
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Cindy Harris		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6376
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	770.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cindy Harris		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00 Transaction ID : SB17.6634
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:		

Full Name (Last, First, Middle Initial) B. Chassidi Harvis		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5930
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:		

Full Name (Last, First, Middle Initial) c. Chassidi Harvis		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6129
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:		

SUBTOTAL of Disbursements This Page (optional).....	645.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chassidi Harvis		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6461
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:		

Full Name (Last, First, Middle Initial) B. Fredrick Hattley		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5891
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:		

Full Name (Last, First, Middle Initial) C. Fredrick Hattley		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6090
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:		

SUBTOTAL of Disbursements This Page (optional).....	640.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 130 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fredrick Hattley		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6439
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:		

Full Name (Last, First, Middle Initial) B. Marvin Heath		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00 Transaction ID : SB17.6072
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:		

Full Name (Last, First, Middle Initial) C. Marvin Heath		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.6419
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:		

SUBTOTAL of Disbursements This Page (optional).....	680.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Adam Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6177
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:		

Full Name (Last, First, Middle Initial) B. Adam Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6378
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:		

Full Name (Last, First, Middle Initial) C. Adam Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6635
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:		

SUBTOTAL of Disbursements This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Diego Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5947
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Diego Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 492.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6243
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Diego Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 192.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6518
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	992.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Diego Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 24.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6672
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:		

Full Name (Last, First, Middle Initial) B. Marilda Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5845
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:		

Full Name (Last, First, Middle Initial) c. Marilda Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6140
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:		

SUBTOTAL of Disbursements This Page (optional).....	304.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Obdulia Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Obdulia Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6220
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Obdulia Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6474
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Veronica Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6063
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:		

Full Name (Last, First, Middle Initial) B. Veronica Hernandez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6346
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:		

Full Name (Last, First, Middle Initial) C. A. Mira Herrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6247
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:		

SUBTOTAL of Disbursements This Page (optional).....	495.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 136 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mira Herrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6521
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) A. Mira Herrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 165.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6675
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Melissa Herrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5847
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	481.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Melissa Herrera		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 620.00 Transaction ID : SB17.6141
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:		

Full Name (Last, First, Middle Initial) B. Kevin Holman		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5906
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:		

Full Name (Last, First, Middle Initial) C. Kevin Holman		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6105
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:		

SUBTOTAL of Disbursements This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Thomas Holmes		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5812
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Thomas Holmes		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6179
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Thomas Holmes		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6381
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1020.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Thomas Holmes		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6637
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:		

Full Name (Last, First, Middle Initial) B. Chelouis Hootsell		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00 Transaction ID : SB17.5912
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:		

Full Name (Last, First, Middle Initial) c. Chelouis Hootsell		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6111
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:		

SUBTOTAL of Disbursements This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chelouis Hootsell		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6431
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:		

Full Name (Last, First, Middle Initial) B. Tony Hopkin		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6048
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:		

Full Name (Last, First, Middle Initial) c. Tony Hopkin		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6343
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:		

SUBTOTAL of Disbursements This Page (optional).....	525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hyatt Regency Hotel		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 5292.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type 007	Transaction ID : SB17.5742
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:		

Full Name (Last, First, Middle Initial) B. Irving Rambler		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 3389.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type 004	Transaction ID : SB17.5731
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:		

Full Name (Last, First, Middle Initial) c. Stephen Ivory		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6382
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:		

SUBTOTAL of Disbursements This Page (optional).....	9001.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephen Ivory		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6638
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:		

Full Name (Last, First, Middle Initial) B. Cleo Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.5848
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:		

Full Name (Last, First, Middle Initial) c. Cleo Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.6142
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:		

SUBTOTAL of Disbursements This Page (optional).....	632.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 143 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lonnie Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lonnie Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6112
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lonnie Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6440
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	790.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kenneth Jacobs		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5849
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:		

Full Name (Last, First, Middle Initial) B. Kenneth Jacobs		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6209
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:		

Full Name (Last, First, Middle Initial) C. Kenneth Jacobs		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6475
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:		

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 145 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eloy Jaimez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Eloy Jaimez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6228
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Eloy Jaimez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6476
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dewayne D. Jenkins		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5892
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Dewayne D. Jenkins		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6091
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Dewayne D. Jenkins		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.6432
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	740.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hector Jimenez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5851
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:		

Full Name (Last, First, Middle Initial) B. Eric R. Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5914
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:		

Full Name (Last, First, Middle Initial) C. Eric R. Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6113
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:		

SUBTOTAL of Disbursements This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 148 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eric R. Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6462
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ernest R. Johnson Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5915
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Ernest R. Johnson Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6114
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ernest R. Johnson Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6463
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Larry Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5893
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Larry Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6092
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Larry Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6441
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:		

Full Name (Last, First, Middle Initial) B. Raymond Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5854
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:		

Full Name (Last, First, Middle Initial) C. Raymond Johnson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 3264.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6477
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:		

SUBTOTAL of Disbursements This Page (optional).....	3740.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chasity Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6379
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Chasity Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 95.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6636
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. David Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5931
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	655.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6130
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. David Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00 Transaction ID : SB17.6442
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Eddie Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00 Transaction ID : SB17.6275
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	774.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Eddie Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 297.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6549
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Eddie Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6701
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Michael Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	669.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 154 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6106
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Michael Jones		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 598.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6417
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. JW LEGGETT CO.		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 1000.00
City	State Zip Code	
Purpose of Disbursement RENT	Candidate Name	Transaction ID : SB17.5741
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	1918.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 155 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Denisha Kelly		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6271
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:		

Full Name (Last, First, Middle Initial) B. Jeremy Kitchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 374.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5964
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:		

Full Name (Last, First, Middle Initial) C. Jeremy Kitchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6285
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:		

SUBTOTAL of Disbursements This Page (optional).....	770.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jeremy Kitchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 242.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6560
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jeremy Kitchen		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6711
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Ebone Knox		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5776
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	514.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 157 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ebone Knox		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6143
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:		

Full Name (Last, First, Middle Initial) B. Wanda Lacour		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5813
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:		

Full Name (Last, First, Middle Initial) c. Wanda Lacour		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 400.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6180
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:		

SUBTOTAL of Disbursements This Page (optional).....	815.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Wanda Lacour		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 380.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6384
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Wanda Lacour		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 197.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6639
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Alberto Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5872
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	897.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 159 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Alberto Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6181
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Alberto Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6385
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Alberto Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6640
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	770.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Marcelino Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5777
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:		

Full Name (Last, First, Middle Initial) B. Marcelino Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6218
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:		

Full Name (Last, First, Middle Initial) C. Marcelino Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6478
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:		

SUBTOTAL of Disbursements This Page (optional).....	1300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sandra Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 8102.00 Transaction ID : SB17.5778
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:		

Full Name (Last, First, Middle Initial) B. Sandra Lara		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.6144
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:		

Full Name (Last, First, Middle Initial) c. La Vida News		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 8382.00 Transaction ID : SB17.5719
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:		

SUBTOTAL of Disbursements This Page (optional).....	8382.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. La Vida News		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 740.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5740
Category/Type 004		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Lisa Ledesma		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5975
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Lisa Ledesma		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6299
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1092.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lisa Ledesma		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6574
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lisa Ledesma		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6725
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Oberian Lee		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5916
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	691.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oberian Lee		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6115
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Oberian Lee		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6450
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Paola Leon		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5995
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	666.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paola Leon		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6321
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:		

Full Name (Last, First, Middle Initial) B. Paola Leon		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6591
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:		

Full Name (Last, First, Middle Initial) C. Paola Leon		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6745
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:		

SUBTOTAL of Disbursements This Page (optional).....	440.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 166 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Trystan Lewis		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5876
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:		

Full Name (Last, First, Middle Initial) B. Trystan Lewis		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6075
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:		

Full Name (Last, First, Middle Initial) c. Toni Lohdi		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6010
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:		

SUBTOTAL of Disbursements This Page (optional).....	700.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 338			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Toni Lohdi		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Toni Lohdi		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6342
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Toni Lohdi		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 66.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6609
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	286.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 168 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Toni Lohdi		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6761
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:		

Full Name (Last, First, Middle Initial) B. Ricco Loya		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5932
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:		

Full Name (Last, First, Middle Initial) c. Ricco Loya		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6131
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:		

SUBTOTAL of Disbursements This Page (optional).....	502.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ricco Loya		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6451
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Nicolas Lucero		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5992
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Nicolas Lucero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6318
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	778.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nicolas Lucero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6588
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:		

Full Name (Last, First, Middle Initial) B. Nicolas Lucero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6742
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:		

Full Name (Last, First, Middle Initial) C. Jerrol Lyons		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5814
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:		

SUBTOTAL of Disbursements This Page (optional).....	504.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 171 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jerrol Lyons		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 325.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6182
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jerrol Lyons		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 380.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6386
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jerrol Lyons		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 185.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6641
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	890.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mail Logic		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 2675.56
City	State Zip Code	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.5739
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:		

Full Name (Last, First, Middle Initial) B. Mail Logic		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 4221.42
City	State Zip Code	
Purpose of Disbursement	Category/Type 001	Transaction ID : SB17.5753
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:		

Full Name (Last, First, Middle Initial) c. Pierre M. Majors		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5894
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:		

SUBTOTAL of Disbursements This Page (optional).....	7136.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pierre M. Majors		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6093
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Pierre M. Majors		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6443
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jeronimo Marquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5779
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 174 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jennifer Martin		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 370.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5815
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jennifer Martin		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6183
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jennifer Martin		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 230.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6387
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	960.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jennifer Martin		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 87.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6642
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Clara Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5933
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Clara Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6132
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	567.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Clara Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6452
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:		

Full Name (Last, First, Middle Initial) B. Fortonato Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 407.00 Transaction ID : SB17.5953
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:		

Full Name (Last, First, Middle Initial) C. Fortonato Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00 Transaction ID : SB17.6277
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:		

SUBTOTAL of Disbursements This Page (optional).....	924.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 177 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fortonato Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6551
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Fortonato Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6703
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Hiram Estrada Martinez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5780
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	426.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 178 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Hiram Estrada Martinez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6229
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Hiram Estrada Martinez Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6479
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Jose Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5781
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jose Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6145
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Mary Ann Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6312
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Mary Ann Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 66.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6583
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mary Ann Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6736
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Nathaniel Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5991
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Nathaniel Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	484.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 181 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Nathaniel Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6587
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:		

Full Name (Last, First, Middle Initial) B. Nathaniel Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6741
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:		

Full Name (Last, First, Middle Initial) c. Phillip Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5816
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:		

SUBTOTAL of Disbursements This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Phillip Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6184
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Phillip Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6388
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Raphael Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5997
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	970.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raphael Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 55.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5998
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:		

Full Name (Last, First, Middle Initial) B. Raphael Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6323
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:		

Full Name (Last, First, Middle Initial) C. Raphael Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6593
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:		

SUBTOTAL of Disbursements This Page (optional).....	473.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raphael Martinez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6747
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. John Anthony Matthews		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5965
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. John Anthony Matthews		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6287
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	528.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 185 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John Anthony Matthews		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6562
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. John Anthony Matthews		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6713
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Breana Mayfield		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5877
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	493.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 186 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Breana Mayfield		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6076
City	State Zip Code	
Purpose of Disbursement	Candidate Name	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:		

Full Name (Last, First, Middle Initial) B. Rakia R. McDougle		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5895
City	State Zip Code	
Purpose of Disbursement	Candidate Name	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:		

Full Name (Last, First, Middle Initial) C. Rakia R. McDougle		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6094
City	State Zip Code	
Purpose of Disbursement	Candidate Name	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:		

SUBTOTAL of Disbursements This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 187 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rakia R. McDougle		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00 Transaction ID : SB17.6444
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:		

Full Name (Last, First, Middle Initial) B. Yolanda McGowan		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5934
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:		

Full Name (Last, First, Middle Initial) C. Yolanda McGowan		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6133
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:		

SUBTOTAL of Disbursements This Page (optional).....	790.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 188 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yolanda McGowan		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6464
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:		

Full Name (Last, First, Middle Initial) B. Sheldon Melton		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.5817
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:		

Full Name (Last, First, Middle Initial) C. Sheldon Melton		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.6185
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:		

SUBTOTAL of Disbursements This Page (optional).....	910.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 189 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sheldon Melton		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6389
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:		

Full Name (Last, First, Middle Initial) B. Sheldon Melton		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6643
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:		

Full Name (Last, First, Middle Initial) c. Candy Mendez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5782
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:		

SUBTOTAL of Disbursements This Page (optional).....	730.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 190 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Candy Mendez		Date of Disbursement MM / DD / YYYY 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period \$ 140.00 Transaction ID : SB17.6146
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:		

Full Name (Last, First, Middle Initial) B. Gloria Mills		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period \$ 240.00 Transaction ID : SB17.5878
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:		

Full Name (Last, First, Middle Initial) c. Gloria Mills		Date of Disbursement MM / DD / YYYY 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period \$ 240.00 Transaction ID : SB17.6077
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:		

SUBTOTAL of Disbursements This Page (optional)	\$ 620.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gloria Mills		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6433
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Brenda Mitchell		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 435.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6186
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Brenda Mitchell		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 465.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6390
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1150.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 192 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brenda Mitchell		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6644
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:		

Full Name (Last, First, Middle Initial) B. Harold T. Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.5896
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:		

Full Name (Last, First, Middle Initial) C. Harold T. Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00 Transaction ID : SB17.6095
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:		

SUBTOTAL of Disbursements This Page (optional).....	680.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Harold T. Moland		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6453
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:		

Full Name (Last, First, Middle Initial) B. Dixie Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5818
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:		

Full Name (Last, First, Middle Initial) C. Dixie Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6188
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:		

SUBTOTAL of Disbursements This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 194 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dixie Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 290.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6391
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dixie Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 150.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6645
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Judy Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6291
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Judy Moore		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6717
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:		

Full Name (Last, First, Middle Initial) B. Antonio Morales		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5917
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:		

Full Name (Last, First, Middle Initial) C. Antonio Morales		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6116
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:		

SUBTOTAL of Disbursements This Page (optional).....	502.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 196 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Antonio Morales		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.6454
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:		

Full Name (Last, First, Middle Initial) B. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00 Transaction ID : SB17.5982
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:		

Full Name (Last, First, Middle Initial) C. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00 Transaction ID : SB17.6304
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:		

SUBTOTAL of Disbursements This Page (optional).....	679.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6578
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:		

Full Name (Last, First, Middle Initial) B. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6730
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:		

Full Name (Last, First, Middle Initial) C. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6771
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:		

SUBTOTAL of Disbursements This Page (optional).....	418.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 198 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maribel Moreno		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6780
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Alesia Muniz		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6480
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Alicia Muniz		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6205
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1248.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 199 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. North Dallas Gazette		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 3579.88
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5704
Category/Type 004		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Josh Odom		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5819
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Josh Odom		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6189
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4259.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 200 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Josh Odom		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 340.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6392
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:		

Full Name (Last, First, Middle Initial) B. Josh Odom		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6646
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:		

Full Name (Last, First, Middle Initial) C. Rosa Orosco		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 407.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6001
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:		

SUBTOTAL of Disbursements This Page (optional).....	947.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rosa Orosco		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6328
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rosa Orosco		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6598
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Rosa Orosco		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6752
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 202 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cristina Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.5785
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:		

Full Name (Last, First, Middle Initial) B. Cristina Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.6214
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:		

Full Name (Last, First, Middle Initial) C. Cristina Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 999.99 Transaction ID : SB17.6481
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:		

SUBTOTAL of Disbursements This Page (optional).....	990.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 203 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ivette Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 209.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5960
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:		

Full Name (Last, First, Middle Initial) B. Ivette Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6283
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:		

Full Name (Last, First, Middle Initial) C. Ivette Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6558
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:		

SUBTOTAL of Disbursements This Page (optional).....	341.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ivette Orozco		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6709
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Michael Ortega		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 330.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5987
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Michael Ortega		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5988
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	374.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 205 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Michael Ortega		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6315
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:		

Full Name (Last, First, Middle Initial) B. Michael Ortega		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6584
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:		

Full Name (Last, First, Middle Initial) c. Michael Ortega		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6739
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:		

SUBTOTAL of Disbursements This Page (optional).....	539.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 206 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Natalie Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5989
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Natalie Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5990
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Natalie Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6316
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	308.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 207 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Natalie Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6586
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Natalie Ortiz		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 66.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6740
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Rosemary Palacios		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	418.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 208 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rosemary Palacios		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6329
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:		

Full Name (Last, First, Middle Initial) B. Rosemary Palacios		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6599
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:		

Full Name (Last, First, Middle Initial) c. Rosemary Palacios		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6753
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:		

SUBTOTAL of Disbursements This Page (optional).....	561.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 209 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Linda Palmoris		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6298
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Linda Palmoris		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6573
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Linda Palmoris		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6724
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	451.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 210 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Pan Rama		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 1594.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5708
Category/Type 004		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Clifford Parks		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5879
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Clifford Parks		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6078
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2074.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 211 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Clifford Parks		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6423
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:		

Full Name (Last, First, Middle Initial) B. Angelica Parra		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6251
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:		

Full Name (Last, First, Middle Initial) c. Angelica Parra		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 154.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6526
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:		

SUBTOTAL of Disbursements This Page (optional).....	434.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Angelica Parra		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 110.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6679
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:		

Full Name (Last, First, Middle Initial) B. Dennis Pearson		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5787
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:		

Full Name (Last, First, Middle Initial) c. Dennis Pearson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6148
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:		

SUBTOTAL of Disbursements This Page (optional).....	355.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 213 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Raul Pedraza Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5788
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kristi Pena		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 550.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5750
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) C. Albert Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5789
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	795.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Albert Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6149
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Albert Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 620.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6482
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Brenda Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6257
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1035.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 215 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brenda Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6534
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Brenda Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6685
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Gilbert Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5790
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	459.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 216 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Gilbert Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6150
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jesse Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6211
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Melissa Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5792
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	695.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Melissa Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6212
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Melissa Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 490.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6483
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Victor Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6062
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1116.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 218 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Victor Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6347
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Victor Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6612
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Victor Perez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6764
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	286.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 219 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Brittney Person		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5820
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Brittney Person		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6190
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Brittney Person		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 410.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6393
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1090.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 220 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Britney Person		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 202.50 Transaction ID : SB17.6647
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:		

Full Name (Last, First, Middle Initial) B. Jelani Pollard		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.5793
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:		

Full Name (Last, First, Middle Initial) c. Jelani Pollard		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.6151
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:		

SUBTOTAL of Disbursements This Page (optional).....	482.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 221 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jelani Pollard		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 440.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6484
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Price Photography		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address PO BOX 1923		Amount of Each Disbursement this Period 1515.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5755
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Patrick Puckett		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 330.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5821
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	2285.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 222 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Patrick Puckett		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 285.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6191
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Patrick Puckett		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 290.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6394
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Patrick Puckett		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 97.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6648
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	672.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 223 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amelia Puente		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5871
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Amelia Puente		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 405.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Amelia Puente		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6395
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1155.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 224 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Amelia Puente		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 225.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6649
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:		

Full Name (Last, First, Middle Initial) B. Paloma Pulido		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5994
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:		

Full Name (Last, First, Middle Initial) C. Paloma Pulido		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6320
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:		

SUBTOTAL of Disbursements This Page (optional)	720.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 225 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Paloma Pulido		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6590
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:		

Full Name (Last, First, Middle Initial) B. Paloma Pulido		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6744
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:		

Full Name (Last, First, Middle Initial) C. Arnulfo Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6254
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:		

SUBTOTAL of Disbursements This Page (optional).....	539.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 226 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arnulfo Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00 Transaction ID : SB17.6529
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Arnulfo Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00 Transaction ID : SB17.6682
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Celeste Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00 Transaction ID : SB17.6261
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	517.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 227 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Celeste Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 297.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6537
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:		

Full Name (Last, First, Middle Initial) B. Celeste Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6688
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:		

Full Name (Last, First, Middle Initial) C. Graciela Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 374.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5955
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:		

SUBTOTAL of Disbursements This Page (optional).....	803.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 228 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Graciela Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6279
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:		

Full Name (Last, First, Middle Initial) B. Graciela Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6553
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:		

Full Name (Last, First, Middle Initial) C. Graciela Ramirez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6705
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:		

SUBTOTAL of Disbursements This Page (optional).....	594.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. La'Shundrea Reed		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 319.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5970
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. La'Shundrea Reed		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6293
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. La'Shundrea Reed		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6568
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	726.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. La'Shundra Reed		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6719
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. REEL TO REEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 290.72
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5733
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. REEL TO REEL		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 342.73
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	765.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 231 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rickey Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5822
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rickey Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 325.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6193
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Rickey Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 80.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6194
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	725.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 232 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rickey Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 405.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6396
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Rickey Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 195.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6650
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Sharita Rhodes		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6333
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	732.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 233 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jorgio Richardson		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 396.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5967
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jorgio Richardson		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6289
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Jorgio Richardson		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6564
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	913.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 234 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jorgio Richardson		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6715
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:		

Full Name (Last, First, Middle Initial) B. Benjamin F. Riley Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5880
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:		

Full Name (Last, First, Middle Initial) c. Benjamin F. Riley Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6079
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:		

SUBTOTAL of Disbursements This Page (optional).....	568.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 235 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Benjamin F. Riley Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6424
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:		

Full Name (Last, First, Middle Initial) B. Danny Rios		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5908
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:		

Full Name (Last, First, Middle Initial) c. Danny Rios		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6107
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:		

SUBTOTAL of Disbursements This Page (optional).....	480.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 236 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Scharlene Roberts		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6005
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Scharlene Roberts		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6332
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Scharlene Roberts		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 385.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6602
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	869.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 237 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Scharlene Roberts		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6755
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Michael Robertson		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5794
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Arleasha Robinson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Arleasha Robinson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6117
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Arleasha Robinson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6455
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address		Amount of Each Disbursement this Period 50.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5771
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 239 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.5774
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2012
Mailing Address		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.5775
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17.6052
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 240 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 800.00 Transaction ID : SB17.6796
City	State Zip Code	
Purpose of Disbursement REIMBURSEMENTS: GAS, WATER, ETC.	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:		

Full Name (Last, First, Middle Initial) B. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.6797
City	State Zip Code	
Purpose of Disbursement FW OFFICE EXPENSES	Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) C. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6230
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:		

SUBTOTAL of Disbursements This Page (optional).....	6800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 241 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6506
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2012
Mailing Address		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.6774
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Armando Robles		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.6793
City	State Zip Code	
Purpose of Disbursement REIMBURSEMENTS	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 242 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lauren Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5971
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lauren Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6294
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lauren Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6569
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	495.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 243 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lauren Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6720
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Mario Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 252.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5944
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Mario Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 120.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6240
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	449.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mario Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 96.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6501
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Mario Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 300.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6516
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Mario Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6670
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	528.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sabino Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 269.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6050
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sabino Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6246
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Sabino Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 336.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6520
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	785.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 246 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Sabino Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 96.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6674
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Yessenia Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 319.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6056
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Yessenia Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6351
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	591.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 247 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Yessenia Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6616
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Yessenia Robles		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6768
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Essence Roddy		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	537.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Essence Roddy		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6118
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Essence Roddy		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6445
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Chris Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5795
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	690.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 249 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Chris Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6152
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:		

Full Name (Last, First, Middle Initial) B. Jerrica Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5909
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:		

Full Name (Last, First, Middle Initial) C. Jerrica Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6108
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:		

SUBTOTAL of Disbursements This Page (optional).....	560.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 250 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jerrica Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6465
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Leticia Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5972
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Leticia Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6295
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	558.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 251 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Leticia Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 5,000.00 154.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6570
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Leticia Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 5,000.00 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6721
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Maria R. Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 5,000.00 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5981
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	517.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 252 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria R. Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6310
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Maria R. Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6734
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Stephanie Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5796
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	426.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 253 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephanie Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6153
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Stephanie Rodriguez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6485
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lillian Rojas		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5973
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	654.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lillian Rojas		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6296
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lillian Rojas		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6572
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lillian Rojas		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6723
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	660.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 255 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Veronica Rojo		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5873
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:		

Full Name (Last, First, Middle Initial) B. Veronica Rojo		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6195
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:		

Full Name (Last, First, Middle Initial) c. Veronica Rojo		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6397
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:		

SUBTOTAL of Disbursements This Page (optional).....	920.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Endy Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5949
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Endy Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6274
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Endy Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6548
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	572.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 257 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Endy Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6700
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Juan L. Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 319.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5968
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Juan L. Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6290
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	583.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Juan L. Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6502
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Juan L. Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 275.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6565
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Juan L. Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6716
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	451.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 259 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Magda Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5978
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Magda Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6301
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Magda Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 286.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6576
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	462.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 260 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Magda Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6728
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Maria Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 324.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6047
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Maria Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 221.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6233
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	677.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 261 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 325.00 Transaction ID : SB17.6509
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Maria Romero		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 195.00 Transaction ID : SB17.6663
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Fernando Salazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 209.00 Transaction ID : SB17.5951
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	729.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 338			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fernando Salazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5952
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Fernando Salazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 308.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6276
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Fernando Salazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6550
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	627.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 263 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fernando Salazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6702
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:		

Full Name (Last, First, Middle Initial) B. Viviana Saldana		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 242.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6055
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:		

Full Name (Last, First, Middle Initial) c. Viviana Saldana		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6348
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:		

SUBTOTAL of Disbursements This Page (optional).....	627.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Viviana Saldana		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6613
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:		

Full Name (Last, First, Middle Initial) B. Viviana Saldana		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6765
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:		

Full Name (Last, First, Middle Initial) c. Oyarvide Salvador		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5786
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:		

SUBTOTAL of Disbursements This Page (optional).....	369.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oyarvide Salvador		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6147
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:		

Full Name (Last, First, Middle Initial) B. Tajuanna Samuels		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5920
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:		

Full Name (Last, First, Middle Initial) c. Tajuanna Samuels		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6119
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:		

SUBTOTAL of Disbursements This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 266 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tajuanna Samuels		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6466
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:		

Full Name (Last, First, Middle Initial) B. Leticia Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.6398
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:		

Full Name (Last, First, Middle Initial) c. Leticia Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 192.50 Transaction ID : SB17.6651
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:		

SUBTOTAL of Disbursements This Page (optional).....	782.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 267 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ricardo Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6051
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ricardo Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6325
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Ricardo Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6503
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	352.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ricardo Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6595
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ricardo Sanchez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6749
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Kathryn Sanders		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5823
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	573.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 269 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kathryn Sanders		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6196
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kathryn Sanders		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 410.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6401
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Kathryn Sanders		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 85.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6652
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	885.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 270 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dianna Santos		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6272
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dianna Santos		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 253.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6546
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Dianna Santos		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6698
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	495.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kimber Scarlett		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6004
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kimber Scarlett		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6331
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Kimber Scarlett		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6601
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	220.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 272 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carlos Sepulveda		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6258
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Carlos Sepulveda		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6535
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Carlos Sepulveda		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6686
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	407.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 273 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Fabian Serrano		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 528.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6241
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Fabian Serrano		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 156.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6517
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Fabian Serrano		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 204.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6671
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	888.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Shaw		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6402
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Robert Shaw		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 175.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6653
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Billy Shetter		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5797
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	625.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 275 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Billy Shetter		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6154
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:		

Full Name (Last, First, Middle Initial) B. Oscar Silva		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5798
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:		

Full Name (Last, First, Middle Initial) c. Oscar Silva		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6155
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:		

SUBTOTAL of Disbursements This Page (optional)	420.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Oscar Silva		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17.6486
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:		

Full Name (Last, First, Middle Initial) B. Bernard Silvas		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.5799
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:		

Full Name (Last, First, Middle Initial) c. Bernard Silvas		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.6204
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:		

SUBTOTAL of Disbursements This Page (optional).....	790.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Bernard Silvas		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5748
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Bernard Silvas		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6500
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Jannette Simmons		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address		Amount of Each Disbursement this Period 105.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5800
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1525.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 278 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jannette Simmons		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00 Transaction ID : SB17.6207
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Jannette Simmons		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00 Transaction ID : SB17.6487
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Shealee Sjoquist		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00 Transaction ID : SB17.6006
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1204.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shealee Sjoquist		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6334
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Shealee Sjoquist		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 242.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6603
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shealee Sjoquist		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 77.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6756
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	539.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 280 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cody Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6263
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:		

Full Name (Last, First, Middle Initial) B. Cody Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 209.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6539
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:		

Full Name (Last, First, Middle Initial) C. Cody Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6690
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:		

SUBTOTAL of Disbursements This Page (optional).....	561.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 281 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Courtney Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00 Transaction ID : SB17.6266
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Courtney Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00 Transaction ID : SB17.6541
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Courtney Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00 Transaction ID : SB17.6693
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	616.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 282 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Natalia Smith		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.5824
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Natalia Smith		Date of Disbursement MM / DD / YYYY 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 390.00 Transaction ID : SB17.6197
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) c. Natalia Smith		Date of Disbursement MM / DD / YYYY 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 345.00 Transaction ID : SB17.6404
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1055.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 283 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Natalia Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6656
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Robert Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5897
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Robert Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6096
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 284 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Smith		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00 Transaction ID : SB17.6434
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:		

Full Name (Last, First, Middle Initial) B. Adolfo Soria		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 144.00 Transaction ID : SB17.6239
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:		

Full Name (Last, First, Middle Initial) c. Adolfo Soria		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00 Transaction ID : SB17.6515
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:		

SUBTOTAL of Disbursements This Page (optional).....	634.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Adolfo Soria		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 168.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6669
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:		

Full Name (Last, First, Middle Initial) B. Melissa Soto		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 143.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6313
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:		

Full Name (Last, First, Middle Initial) c. Melissa Soto		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6737
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:		

SUBTOTAL of Disbursements This Page (optional).....	443.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 286 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Southwest Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 4545 S. Westmoreland		Amount of Each Disbursement this Period 43756.37
City Dallas State TX Zip Code 75237	Purpose of Disbursement 006 Category/Type	
Candidate Name		Transaction ID : SB17.5734
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Southwest Printing		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address 4545 S. Westmoreland		Amount of Each Disbursement this Period 20280.00
City Dallas State TX Zip Code 75237	Purpose of Disbursement 006 Category/Type	
Candidate Name		Transaction ID : SB17.5737
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Cynthia Sowels		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name		Transaction ID : SB17.5921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	64276.37
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 287 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cynthia Sowels		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6120
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Cynthia Sowels		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6456
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Todderick Spivey		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6227
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	950.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 288 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Todderick Spivey		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 600.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5758
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Todderick Spivey		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 600.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6498
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. LaTosha Stallings		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5881
Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	1440.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 289 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LaTosha Stallings		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6080
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. LaTosha Stallings		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6425
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Andre Stevenson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5898
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Andre Stevenson		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6097
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Andre Stevenson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6446
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Dona Stewart		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5882
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	740.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 291 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dona Stewart		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6081
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dona Stewart		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 250.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6435
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Francisco Suarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5855
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	630.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Francisco Suarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6213
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:		

Full Name (Last, First, Middle Initial) B. Francisco Suarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 600.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6488
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:		

Full Name (Last, First, Middle Initial) c. Hillary Suarez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5856
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:		

SUBTOTAL of Disbursements This Page (optional).....	1190.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 293 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Isa Tames		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 450.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6217
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:		

Full Name (Last, First, Middle Initial) B. Isa Tames		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6489
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:		

Full Name (Last, First, Middle Initial) C. Rickey Tanksley		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5825
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:		

SUBTOTAL of Disbursements This Page (optional).....	1480.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rickey Tanksley		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 365.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6198
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:		

Full Name (Last, First, Middle Initial) B. Rickey Tanksley		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 345.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6405
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:		

Full Name (Last, First, Middle Initial) C. Rickey Tanksley		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 185.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6657
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:		

SUBTOTAL of Disbursements This Page (optional).....	895.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 295 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Cornelius Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6264
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Cornelius Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 22.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6691
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Semekia Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5883
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	290.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Semekia Thomas		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6082
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Markee Thompson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5858
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Blanca Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6684
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 297 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Frank Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.5859
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:		

Full Name (Last, First, Middle Initial) B. Frank Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.6156
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:		

Full Name (Last, First, Middle Initial) c. Melody Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00 Transaction ID : SB17.5986
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:		

SUBTOTAL of Disbursements This Page (optional).....	456.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 298 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Melody Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6354
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Melody Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6582
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Melody Tovar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 99.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6735
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	451.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 299 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Damon Townsend		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5884
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:		

Full Name (Last, First, Middle Initial) B. Damon Townsend		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6083
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:		

Full Name (Last, First, Middle Initial) c. Carol Trahan		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5885
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:		

SUBTOTAL of Disbursements This Page (optional).....	720.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 300 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carol Trahan		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6084
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:		

Full Name (Last, First, Middle Initial) B. Lucia Trejo		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 187.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5976
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:		

Full Name (Last, First, Middle Initial) c. Lucia Trejo		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6300
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:		

SUBTOTAL of Disbursements This Page (optional).....	499.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 301 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lucia Trejo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6575
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lucia Trejo		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6726
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5826
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	592.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 302 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 48.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5943
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6199
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 64.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6203
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	432.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 310.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6406
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 62.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6410
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6658
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	572.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 304 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Lorena Treto		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 40.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6727
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:		

Full Name (Last, First, Middle Initial) B. Brandon Turner		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5860
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:		

Full Name (Last, First, Middle Initial) c. Tyron Tyler		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5861
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:		

SUBTOTAL of Disbursements This Page (optional).....	320.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 305 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Carmen Urias		Date of Disbursement MM / DD / YYYY 05 / 17 / 2012
Mailing Address 106 East Second		Amount of Each Disbursement this Period 1890.00 Transaction ID : SB17.5726
City Irving State TX Zip Code 75060	Purpose of Disbursement IRVING RENT Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. US POSTMASTER		Date of Disbursement MM / DD / YYYY 05 / 15 / 2012
Mailing Address		Amount of Each Disbursement this Period 34260.15 Transaction ID : SB17.5721
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Teresa Varona		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00 Transaction ID : SB17.5874
City State Zip Code	Purpose of Disbursement Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	36470.15
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 306 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Teresa Varona		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6200
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Teresa Varona		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6407
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Teresa Varona		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 112.50
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6659
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	862.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 307 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Aracely Vasquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6252
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:		

Full Name (Last, First, Middle Initial) B. Aracely Vasquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 99.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6527
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:		

Full Name (Last, First, Middle Initial) c. Aracely Vasquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6680
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:		

SUBTOTAL of Disbursements This Page (optional).....	495.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 308 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Maria G. Vasquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5979
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Maria G. Vasquez		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6306
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Tony Vela		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 231.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6058
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 309 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Tony Vela		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6344
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Tony Vela		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 242.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6610
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Tony Vela		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 198.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6762
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	704.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Juan Velez		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5862
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:		

Full Name (Last, First, Middle Initial) B. Juan Velez		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6157
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:		

Full Name (Last, First, Middle Initial) C. Ruth Washington		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 230.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5827
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:		

SUBTOTAL of Disbursements This Page (optional).....	510.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 311 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Ruth Washington		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 330.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6201
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Ruth Washington		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 335.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6408
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Ruth Washington		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6660
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	885.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 312 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. John Webber		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5922
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:		

Full Name (Last, First, Middle Initial) B. John Webber		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6121
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:		

Full Name (Last, First, Middle Initial) c. John Webber		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 200.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6467
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:		

SUBTOTAL of Disbursements This Page (optional).....	680.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 313 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kerry Weston		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5863
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Kerry Weston		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Kerry Weston		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 710.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6490
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	1210.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 314 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Robert Weston		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6225
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Robert Weston		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 690.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6491
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Shane White		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5864
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1010.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 315 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Shane White		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 360.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6226
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:		

Full Name (Last, First, Middle Initial) B. Shane White		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 490.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6492
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:		

Full Name (Last, First, Middle Initial) C. Dorthy Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 320.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5828
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:		

SUBTOTAL of Disbursements This Page (optional).....	1170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 316 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Dorthy Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 375.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6202
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Dorthy Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2012
Mailing Address		Amount of Each Disbursement this Period 430.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6409
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Dorthy Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 205.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6661
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	1010.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 317 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Iesha Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5910
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:		

Full Name (Last, First, Middle Initial) B. Iesha Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 60.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.6109
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:		

Full Name (Last, First, Middle Initial) C. Jereld Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00
City State Zip Code		
Purpose of Disbursement	Category/Type	Transaction ID : SB17.5865
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:		

SUBTOTAL of Disbursements This Page (optional).....	516.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Jereld Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6158
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Jereld Williams		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 3264.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6493
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) c. Jerry Wilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 500.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6494
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	3980.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 319 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rodrick Wilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.5866
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) B. Rodrick Wilson		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 3264.00 Transaction ID : SB17.6495
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) C. Franklin De'Leon Wines Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.5867
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

SUBTOTAL of Disbursements This Page (optional)	3620.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Franklin De'Leon Wines Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6159
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:		

Full Name (Last, First, Middle Initial) B. David Winsett		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 352.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6270
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:		

Full Name (Last, First, Middle Initial) C. David Winsett		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 286.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6545
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:		

SUBTOTAL of Disbursements This Page (optional).....	778.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 321 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. David Winsett		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 176.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6697
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Sherry Woodard		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 88.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. Kenneth Woodberry		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 240.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5886
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	504.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 322 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Kenneth Woodberry		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 180.00 Transaction ID : SB17.6085
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:		

Full Name (Last, First, Middle Initial) B. Kenneth Woodberry		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 260.00 Transaction ID : SB17.6468
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:		

Full Name (Last, First, Middle Initial) c. YD Associates		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 5787 S. Hampton Rd. STE 445		Amount of Each Disbursement this Period 15000.00 Transaction ID : SB17.5768
City	State Zip Code	
Dallas TX 75232		
Purpose of Disbursement CONSULTANT	Category/Type 001	
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:		

SUBTOTAL of Disbursements This Page (optional).....	15440.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 338			
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. YD Associates		Date of Disbursement MM / DD / YYYY 05 / 30 / 2012
Mailing Address 5787 S. Hampton Rd. STE 445		Amount of Each Disbursement this Period 50000.00 Transaction ID : SB17.5769
City Dallas State TX Zip Code 75232	Purpose of Disbursement STAFF & EXPENSES Category/Type 001	
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:		

Full Name (Last, First, Middle Initial) B. YD Associates		Date of Disbursement MM / DD / YYYY 05 / 30 / 2012
Mailing Address 5787 S. Hampton Rd. STE 445		Amount of Each Disbursement this Period 18363.73 Transaction ID : SB17.5770
City Dallas State TX Zip Code 75232	Purpose of Disbursement ELECTION EXPENSES Category/Type 007	
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:		

Full Name (Last, First, Middle Initial) c. Krystina Youngblood		Date of Disbursement MM / DD / YYYY 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00 Transaction ID : SB17.5868
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:		

SUBTOTAL of Disbursements This Page (optional).....	68503.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 324 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Krystina Youngblood		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 140.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6160
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Krystina Youngblood		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 160.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.5752
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) c. Krystina Youngblood		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address		Amount of Each Disbursement this Period 160.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6497
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	460.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 325 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rodolfo Zalazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 132.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6326
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:		

Full Name (Last, First, Middle Initial) B. Rodolfo Zalazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 44.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6504
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:		

Full Name (Last, First, Middle Initial) c. Rodolfo Zalazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 220.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6596
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:		

SUBTOTAL of Disbursements This Page (optional).....	396.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 326 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Rodolfo Zalazar		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 121.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6750
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:		

Full Name (Last, First, Middle Initial) B. Salvador Zapata Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address		Amount of Each Disbursement this Period 432.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.5946
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:		

Full Name (Last, First, Middle Initial) c. Salvador Zapata Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address		Amount of Each Disbursement this Period 312.00
City	State Zip Code	
Purpose of Disbursement	Category/ Type	Transaction ID : SB17.6237
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:		

SUBTOTAL of Disbursements This Page (optional).....	865.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 327 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Salvador Zapata Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 216.00 Transaction ID : SB17.6513
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:		

Full Name (Last, First, Middle Initial) B. Salvador Zapata Jr.		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address		Amount of Each Disbursement this Period 168.00 Transaction ID : SB17.6667
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:		

Full Name (Last, First, Middle Initial) c. Stephanie Zepeda		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address		Amount of Each Disbursement this Period 520.00 Transaction ID : SB17.5936
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:		

SUBTOTAL of Disbursements This Page (optional).....	904.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 328 OF 338	
	<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)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Stephanie Zepeda		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2012
Mailing Address		Amount of Each Disbursement this Period 910.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6066
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. Stephanie Zepeda		Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2012
Mailing Address		Amount of Each Disbursement this Period 598.00
City	State Zip Code	
Purpose of Disbursement	Candidate Name	Transaction ID : SB17.6418
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type	

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

SUBTOTAL of Disbursements This Page (optional).....	1508.00
TOTAL This Period (last page this line number only).....	570580.81

**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 329 OF 338			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DAVID ALAMEEL FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Martha Alameel		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2012
Mailing Address		Amount of Each Disbursement this Period 3007.00
City	State Zip Code	
Purpose of Disbursement REIMBURSEMENT- FW OFFICE RENT & ELECTRICITY	Category/ Type 001	Transaction ID : SB21.6787
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:		

Full Name (Last, First, Middle Initial) B. Texas Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 505 W. 12th Street STE 200		Amount of Each Disbursement this Period 2500.00
City	State Zip Code Austin TX 78701	
Purpose of Disbursement	Category/ Type 011	Transaction ID : SB21.6786
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:		

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

SUBTOTAL of Disbursements This Page (optional).....	5507.00
TOTAL This Period (last page this line number only).....	5507.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4102

DAVID ALAMEEL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Dr. David Alameel

Primary

General

Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
245349.71	0.00	245349.71

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 12 M /

D 15 D /

Y 2011 Y

M M /

D D /

Y 1/30/2013 Y

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 245349.71

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)
LOANS**

NAME OF COMMITTEE (In Full) **DAVID ALAMEEL FOR CONGRESS** Transaction ID : **SC/10.4171**

LOAN SOURCE Full Name (Last, First, Middle Initial) *[PERSONAL FUNDS]* Election: 2012
Dr. David Alameel Primary
 Mailing Address 5020 Tanbark Rd General
 Other (specify) ▼

City State ZIP Code
 Dallas TX 75229

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000000.00	0.00	1000000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 03 / D 12 / Y 2012	M M / D D / Y 1/30/2013	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	1000000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4172

DAVID ALAMEEL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2012

Dr. David Alameel

Primary

General

Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
1000000.00 0.00 1000000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 21 / 2012

1/30/2013

0.00 % (apr)

Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 1000000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6798

DAVID ALAMEEL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. David Alameel

Election:

Primary
 General
 Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
500000.00 0.00 500000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 01 / Y 2012 M M / D D / Y Y Y Y % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 500000.00

TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DAVID ALAMEEL FOR CONGRESS** Transaction ID : **SC/10.4330**

LOAN SOURCE Full Name (Last, First, Middle Initial) **Dr. David Alameel** *[PERSONAL FUNDS]* Election: 2012
 Primary
 General
 Other (specify) ▼

Mailing Address 5020 Tanbark Rd
 City Dallas State TX ZIP Code 75229

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
400000.00	0.00	400000.00

TERMS Date Incurred / / Date Due / / Interest Rate % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional).....
TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6799

DAVID ALAMEEL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. David Alameel

Election:

Primary
 General
 Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
300000.00 0.00 300000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 05 / D 14 / Y 2012 M M / D D / Y Y Y Y % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 300000.00

TOTALS This Period (last page in this line only).....

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DAVID ALAMEEL FOR CONGRESS** Transaction ID : **SC/10.6801**

LOAN SOURCE Full Name (Last, First, Middle Initial) Dr. David Alameel	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 5020 Tanbark Rd	

City	State	ZIP Code
Dallas	TX	75229

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
115000.00	0.00	115000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 05 / D 21 / Y 2012	M M / D D / Y Y Y Y	% (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	115000.00
TOTALS This Period (last page in this line only).....	▶	[]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **DAVID ALAMEEL FOR CONGRESS** Transaction ID : **SC/10.6802**

LOAN SOURCE Full Name (Last, First, Middle Initial)
Dr. David Alameel

Election:
 Primary
 General
 Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
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TERMS

Date Incurred: M 05 / D 22 / Y 2012
Date Due: M / D / Y
Interest Rate: % (apr)
Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ 250000.00

TOTALS This Period (last page in this line only)..... ▶ []

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.6803

DAVID ALAMEEL FOR CONGRESS

LOAN SOURCE Full Name (Last, First, Middle Initial)

Dr. David Alameel

Election:

Primary
 General
 Other (specify) ▼

Mailing Address
5020 Tanbark Rd

City State ZIP Code
Dallas TX 75229

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
250000.00 0.00 250000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... 250000.00
TOTALS This Period (last page in this line only)..... 4060349.71

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.