

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 STRICKLAND FOR CONGRESS

ADDRESS (number and street) PO BOX 630446 SIMI VALLEY CA 93063 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00543165 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT CA 25

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X 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 M M / D D / Y Y Y Y in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 2014

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 BRADLEY CRATE

Signature of Treasurer BRADLEY CRATE [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2014

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

Office Use Only table with 7 columns and 1 row. FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
STRICKLAND 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))....	330594.00	1554514.56
(b) Total Contribution Refunds (from Line 20(d))	0.00	400.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	330594.00	1554114.56
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	176914.51	1199956.68
(b) Total Offsets to Operating Expenditures (from Line 14).....	3466.48	9166.48
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	173448.03	1190790.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	391220.49	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

STRICKLAND 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).....	196725.00	1096733.56
(ii) Unitemized.....	4369.00	22081.00
(iii) TOTAL of contributions from individuals ▶	201094.00	1118814.56
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	129500.00	435700.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	330594.00	1554514.56
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	27896.13
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	3466.48	9166.48
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	334060.48	1591577.17

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	176914.51	1199956.68
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	400.00
(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	400.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	176914.51	1200356.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	234074.52
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	334060.48
25. SUBTOTAL (add Line 23 and Line 24).....	568135.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	176914.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	391220.49

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address **ONE ENTERPRISE**

City **ALISO VIEJO** State **CA** Zip Code **92692**

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

Name of Employer **MICROSEMI** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.7729

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
ROBERT D ARNOTT

Mailing Address **3991 MACARTHUR BLVD
STE 300**

City **NEWPORT BEACH** State **CA** Zip Code **92660**

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

Name of Employer **RESEARCH AFFILIATES** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 29 / 2014

Transaction ID : SA11AI.7666

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
SUSAN J ASH

Mailing Address **1351 KINGSBORO CT.**

City **WESTLAKE VILLAGE** State **CA** Zip Code **91362**

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

Name of Employer **HACIENDA INVESTMENTS** Occupation **INVESTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

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

Transaction ID : SA11AI.7751

Amount of Each Receipt this Period
1000.00

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

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

3900.00

**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 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DARIUS ASSEMI		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 1396 W. HERNDON #101		Transaction ID : SA11AI.7890
City FRESNO	State CA	
Zip Code 93711		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00
Name of Employer GRANVILLE HOMES, INC.	Occupation PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) B. JACQUELINE AUTRY		Date of Receipt M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 328 W. MOUNTAIN VIEW PLACE		Transaction ID : SA11AI.7764
City PALM SPRINGS	State CA	
Zip Code 92262		Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C. CHARLES G BAKALY Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 480 S. ORANGE GROVE BLVD. 18		Transaction ID : SA11AI.7857
City PASADENA	State CA	
Zip Code 91105		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer JAMS	Occupation VICE PRESIDENT AND MEDIATOR AND ARE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	6200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOM BARBER

Mailing Address 15186 TIERRA REJADA RD.

City MOORPARK State CA Zip Code 93021

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

Name of Employer TOM BARBER Occupation GOLF PRO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1200.00

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

Transaction ID : SA11AI.7818

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
FABIAN BATTAGLIA

Mailing Address 31425 E NINE DRIVE

City LAGUNA NIGUEL State CA Zip Code 92677

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

Name of Employer ONE ENTERPRISE Occupation VP SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.7662

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
THOMAS BEACH

Mailing Address 500 EAST ESPLANADE DRIVE

City OXNARD State CA Zip Code 93036

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

Name of Employer BEACH, COWDREY, OWEN, LLP Occupation ATTORNEY-PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7987

Amount of Each Receipt this Period
500.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DONNA BENDER

Mailing Address 4630 NOELINE AVENUE

City State Zip Code
ENCINO CA 91436

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7734

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SCOTT BESIEN

Mailing Address 5020 GLORIA AVE.

City State Zip Code
ENCINO CA 91436

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

Name of Employer Occupation
HOLIHAN LOKEY INVESTMENT BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7732

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DONALD A BEST

Mailing Address PO BOX 2344

City State Zip Code
CULVER CITY CA 90231

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

Name of Employer Occupation
SELF REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.7613

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HELEN R BLACKWELL

Mailing Address 3128 17TH STREET N

City	State	Zip Code
ARLINGTON	VA	22201

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

Name of Employer	Occupation
HOMEMAKER	HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11A1.7885

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MILTON C BLACKWELL

Mailing Address 3128 17TH STREET N

City	State	Zip Code
ARLINGTON	VA	22201

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

Name of Employer	Occupation
LEADERSHIP INSTITUTE	FOUNDATION PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11A1.7887

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
DAVID S BLATT

Mailing Address 101 NORTH WESTLAKE BLVD.
SUITE 201

City	State	Zip Code
WESTLAKE VILLAGE	CA	91362

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

Name of Employer	Occupation
D.S.B. PROPERTIES, INC.	PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11A1.8020

Amount of Each Receipt this Period
500.00

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

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

5700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. LOIS FELDMAN BLOOM

Mailing Address **9777 WILSHIRE BLVD.**

City **BEVERLY HILLS** State **CA** Zip Code **90212**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11Al.7615

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. RONALD H BLOOM

Mailing Address **9777 WILSHIRE BLVD.**

City **BEVERLY HILLS** State **CA** Zip Code **90212**

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

Name of Employer **CROWN ASSOCIATES REALTY, INC.** Occupation **INDUSTRIAL REAL ESTATE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11Al.7614

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
ALEX BOGGS

Mailing Address **4159 DOVER ROAD**

City **LA CANADA** State **CA** Zip Code **91011**

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

Name of Employer **TOWER COMMUNITIES LLC** Occupation **REAL ESTATES**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11Al.8002

Amount of Each Receipt this Period
250.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SANDRA BRESLOW		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address PO BOX 197		Transaction ID : SA11AI.7780	
City WOODLAND HILLS	State CA	Zip Code 91365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SMB INVESTMENTS, FLP.	Occupation GENERAL PARTNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. SANDRA BRESLOW		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address PO BOX 197		Transaction ID : SA11AI.8021	
City WOODLAND HILLS	State CA	Zip Code 91365	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SMB INVESTMENTS, FLP.	Occupation GENERAL PARTNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250.00		

Full Name (Last, First, Middle Initial) C. LYNETTE BROWN		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014	
Mailing Address 5265 GENESTA AVENUE		Transaction ID : SA11AI.7736	
City ENCINO	State CA	Zip Code 91316	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 2164 HIGHGATE ROAD

City WESTLAKE VILLAGE State CA Zip Code 91361

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

Name of Employer THE COMDYN GROUP Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2035.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2014

Transaction ID : SA11AI.7866

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
THOMAS M BROWN

Mailing Address 333 SOUTH HOPE STREET, 40TH FLOOR

City LOS ANGELES State CA Zip Code 90071

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

Name of Employer BROWN, WHITE & NEWHOUSE LLP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7760

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DAVID R CARPENTER

Mailing Address PO BOX 50318

City SANTA BARBARA State CA Zip Code 93150

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

Name of Employer UNIHEALTH FOUNDATION Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7603

Amount of Each Receipt this Period
1000.00

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

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

1535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GARY E CONDIE

Mailing Address 28490 WESTINGHOUSE PLACE
SUITE 140

City VALENCIA State CA Zip Code 91355

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

Name of Employer: CONDIE & WOOD, C.P.A.'S Occupation: CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **600.00**

Date of Receipt: 09 / 04 / 2014

Transaction ID : SA11AI.7590

Amount of Each Receipt this Period: **250.00**

B. Full Name (Last, First, Middle Initial)
JOEL CORWIN

Mailing Address 3085 LOMA VISTA

City VENTURA State CA Zip Code 93003

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

Name of Employer: SELF Occupation: PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: 09 / 08 / 2014

Transaction ID : SA11AI.7750

Amount of Each Receipt this Period: **250.00**

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

Mailing Address 21255 PLACERITA CANYON RD.

City NEWHALL State CA Zip Code 91321

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

Name of Employer: MICROSEMI Occupation: VP BUSINESS DEVELOPMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: **2200.00**

Date of Receipt: 09 / 30 / 2014

Transaction ID : SA11AI.7594

Amount of Each Receipt this Period: **200.00**

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) DAVID CROCKER		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2014	
Mailing Address 4415 PASEO SANTA ROSA		Transaction ID : SA11AI.7933	
City NEWBURY PARK	State CA	Zip Code 91320	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer TRANSQUEST, INC.	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) MARDIROS DAKESSIAN		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2014	
Mailing Address 463 RICHMOND ROAD		Transaction ID : SA11AI.7817	
City LA CANADA	State CA	Zip Code 91011	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer REED SMITH LLP	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) WILLIAM DAVIS		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 1640 E. MOUNTAIN DRIVE		Transaction ID : SA11AI.7971	
City SANTA BARBARA	State CA	Zip Code 93108	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer SELF	Occupation INVESTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00		

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHILIP DE TOLEDO

Mailing Address 3611 LONGRIDGE AVENUE

City State Zip Code
SHERMAN OAKS CA 91423

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CAPITAL GROUP COMPANIES MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7737

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
GREGGORY DEVORE

Mailing Address 625 S. FAIR OAKS AVENUE
SUITE 220

City State Zip Code
PASADENA CA 91105

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7789

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
GREGGORY DEVORE

Mailing Address 625 S. FAIR OAKS AVENUE
SUITE 220

City State Zip Code
PASADENA CA 91105

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7790

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NONA DILLON		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 16172 SWEETAIRE AVE		Transaction ID : SA11AI.7910	
City LANCASTER	State CA	Zip Code 93535	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) B. RICHARD DINGER		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 3156 FOOTHILL BLVD.		Transaction ID : SA11AI.7652	
City LA CRESCENTA	State CA	Zip Code 91214	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CRESCENTA VALLEY INSURANCE	Occupation INSURANCE AGENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. MATTHEW G DONALDSON		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 25515 HARDY PL.		Transaction ID : SA11AI.7909	
City STEVENSON RANCH	State CA	Zip Code 91381	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer CRATER INDUSTRIES, LLC	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		

SUBTOTAL of Receipts This Page (optional).....	2600.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) KEVIN DRETZKA		Date of Receipt M M / D D / Y Y Y Y 08 / 26 / 2014	
Mailing Address 6632 KENTWOOD BLUFFS DRIVE		Transaction ID : SA11AI.7950	
City LOS ANGELES	State CA	Zip Code 90045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer GLICKMAN CAPITAL	Occupation PRIVATE EQUITY INVESTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2750.00		

Full Name (Last, First, Middle Initial) KEVIN DRETZKA		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 6632 KENTWOOD BLUFFS DRIVE		Transaction ID : SA11AI.7655	
City LOS ANGELES	State CA	Zip Code 90045	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer GLICKMAN CAPITAL	Occupation PRIVATE EQUITY INVESTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		

Full Name (Last, First, Middle Initial) MICHAEL DUNN		Date of Receipt M M / D D / Y Y Y Y 08 / 11 / 2014	
Mailing Address 1014 ANTELOPE PLACE		Transaction ID : SA11AI.7718	
City NEWBURY PARK	State CA	Zip Code 91320	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer CVUSD	Occupation TRUSTEE, CONEJO VAL UNIF. SCHOOL DIS		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ESAM ELASHMAWI

Mailing Address 4743 HILL TOP VIEW PLACE

City SAN JOSE State CA Zip Code 95138

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

Name of Employer MICROSEMI Occupation VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7596

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
CHIP ENGLANDER

Mailing Address 1830 GLENN SPRING CT.

City OCONOMOWOC State WI Zip Code 53066

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

Name of Employer CITIZENS FOR RAUNER Occupation CAMPAIGN MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.7912

Amount of Each Receipt this Period
 500.00

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

Mailing Address 311 S. BROADWAY, UNIT B

City REDONDO BEACH State CA Zip Code 90277

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

Name of Employer DAVID ENGLANDER, M.D. INC. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7650

Amount of Each Receipt this Period
 100.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAIG M ENGLE

Mailing Address 1717 K STREET NW

City WASHINGTON State DC Zip Code 20036

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

Name of Employer ARENT FOX LLP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7963

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MIKE A FALTYS

Mailing Address 26536 OAK TERRACE PL.

City VALENCIA State CA Zip Code 91381

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

Name of Employer SETPOINT MEDICAL Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.7930

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
EMIL FISH

Mailing Address 905 SOUTH FAIR OAKS AVENUE

City PASADENA State CA Zip Code 91105

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

Name of Employer FISH CONSTRUCTION Occupation DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

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

Transaction ID : SA11AI.7636

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVEN FISHMAN

Mailing Address 16830 VENTURA BLVD.

City ENCINO State CA Zip Code 91436

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

Name of Employer FISHMAN, BLOCK AND DIAMOND Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7739

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WILLIAM O FLEISCHMAN

Mailing Address 1900 AVENUE OF THE STARS SUITE 2410

City LOS ANGELES State CA Zip Code 90067

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

Name of Employer W/F INVESTMENT CORP Occupation PRESIDENT/CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

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

Transaction ID : SA11AI.7607

Amount of Each Receipt this Period
1000.00

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

Mailing Address 714 NORTH FOOTHILL ROAD

City BEVERLY HILLS State CA Zip Code 90210

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

Name of Employer COMMUNITY ASSET MANAGEMENT Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.7781

Amount of Each Receipt this Period
1000.00

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

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

3000.00

**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 21 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 714 NORTH FOOTHILL ROAD

City State Zip Code
BEVERLY HILLS CA 90210

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

Name of Employer Occupation
COMMUNITY ASSET MANAGEMENT CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11AI.7988

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DANIEL FLORES

Mailing Address 17107 SUMMIT HILLS DR.

City State Zip Code
CANYON COUNTRY CA 91387

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2014

Transaction ID : SA11AI.7982

Amount of Each Receipt this Period
1000.00

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

Mailing Address 25502 MORNING MIST DR.

City State Zip Code
STEVENSON RANCH CA 91381

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

Name of Employer Occupation
FORTNER ENGINEERING & MFG., INC. BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2014

Transaction ID : SA11AI.7914

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) GERALD M FRIEDMAN		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 261 W. BEACH AVE.		Transaction ID : SA11AI.7637
City INGLEWOOD	State CA	
Zip Code 90302		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00
Name of Employer MARVIN ENGINEERING COMPANY, INC.	Occupation CEO	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) EDWARD GASTALDO		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address PO BOX 30610		Transaction ID : SA11AI.7862
City SANTA BARBARA	State CA	
Zip Code 93130		Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 1500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) PETER D GIBBONS		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 333 CONTINENTAL BLVD.		Transaction ID : SA11AI.7616
City EL SEGUNDO	State CA	
Zip Code 90245		Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 900.00
Name of Employer MATTELL, INC.	Occupation EVP	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 10250 CONSTELLATION BOULEVARD
19TH FLOOR

City State Zip Code
LOS ANGELES CA 90067

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

Name of Employer Occupation
GLASER WEIL FINK JACOBS HOWARD AVCH ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.7683

Amount of Each Receipt this Period
1000.00

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

Mailing Address 10250 CONSTELLATION BOULEVARD
19TH FLOOR

City State Zip Code
LOS ANGELES CA 90067

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

Name of Employer Occupation
GLASER WEIL FINK JACOBS HOWARD AVCH ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.7940

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DONALD G GLOISTEN Sr

Mailing Address 21 S CALIFORNIA ST, STE 208

City State Zip Code
VENTURA CA 93001

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

Name of Employer Occupation
GBS FINANCIAL OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7700

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GARY GOLDEN		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 15039 DICKENS STREET		Transaction ID : SA11AI.7822
City SHERMAN OAKS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) B. STANLEY GOLDHAMMER		Date of Receipt M M / D D / Y Y Y Y 09 / 12 / 2014
Mailing Address 6149 HERITAGE DRIVE		Transaction ID : SA11AI.7824
City AGOURA HILLS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GOLDHAMMER INSURANCE SERVICES, INC.	Occupation INSURANCE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. MR. FRANK GOOCH		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1210 HOMEWOOD LANE		Transaction ID : SA11AI.7763
City LA CANADA	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer GILCHRIST & RUTTER	Occupation PARTNER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SIDNEY M GREATHOUSE		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 30360 EAGLEBROOK DRIVE		Transaction ID : SA11AI.7609	
City AGOURA HILLS	State CA	Zip Code 91301	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer THE CHEESECAKE FACTORY	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. CELESTE GREIG		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 9124 CREBS AVE.		Transaction ID : SA11AI.7996	
City NORTHRIDGE	State CA	Zip Code 91324	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer SELF EMPLOYED	Occupation BUSINESS MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00		

Full Name (Last, First, Middle Initial) C. JOHN M GRETHER		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 4049 WALNUT AVE. 5420 AGGEN ROAD		Transaction ID : SA11AI.7966	
City SOMIS	State CA	Zip Code 93066	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer GRETHER FARMING CO., INC.	Occupation FARMER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY GUMP-MELANCON

Mailing Address 26954 RUETHER AVENUE

City State Zip Code
SANTA CLARITA CA 91351

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

Name of Employer Occupation
ANDY GUMP VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 23 / 2014

Transaction ID : SA11AI.7645

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEFF HACKER

Mailing Address 26650 THE OLD RD.
SUITE 201

City State Zip Code
VALENCIA CA 91381

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

Name of Employer Occupation
HACKER LAW GROUP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7597

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ELIAS W HADDAD

Mailing Address 3812 BRAEBURN DRIVE

City State Zip Code
BAKERSFIELD CA 93306

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

Name of Employer Occupation
HADDAD DODGE OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2014

Transaction ID : SA11AI.7782

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DON RUFUS HANKEY		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2014	
Mailing Address 2553 SUMMIT RIDGE DRIVE		Transaction ID : SA11AI.7864	
City BEVERLY HILLS	State CA	Zip Code 90210	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer NOWCOM	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600.00		

Full Name (Last, First, Middle Initial) B. RUSSEL L HANLIN		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 119 E. UNION ST. SUITE C		Transaction ID : SA11AI.7754	
City PASADENA	State CA	Zip Code 91103	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) C. MARTIN A HARMON		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address 4020 SIERRA COLLEGE BLVD		Transaction ID : SA11AI.7638	
City ROCKLIN	State CA	Zip Code 95677	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer AUBURN MANOR HOLDING COPORATION	Occupation PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

SUBTOTAL of Receipts This Page (optional).....	3800.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RONALD L HAVNER JR.

Mailing Address 2275 CHAUCER RD.

City SAN MARINO State CA Zip Code 91108

FEC ID number of contributing federal political committee.

Name of Employer PUBLIC STORAGE Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7755

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
CYNTHIA L HAWSE

Mailing Address 13792 PACIFIC BREEZE DR.

City SANTA ROSA VALLEY State CA Zip Code 93012-8954

FEC ID number of contributing federal political committee.

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8026

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAMESS H HAWSE

Mailing Address 13792 PACIFIC BREEZE DR.

City SANTA ROSA VALLEY State CA Zip Code 93012-8954

FEC ID number of contributing federal political committee.

Name of Employer SIERRA TOYOTA Occupation AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7660

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JILL HERMATZ-SANDERS

Mailing Address 9527 HUNT CLUB LANE

City State Zip Code
CHATSWORTH CA 91311

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

Name of Employer Occupation
BLUE SHIELD OF CALIFORNIA PROVIDER CONTRACTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7826

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAVIER C HERNANDEZ Jr

Mailing Address 23164 W. VALENCIA BLVD.

City State Zip Code
VALENCIA CA 91355

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

Name of Employer Occupation
VALENCIA NEWS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7892

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
LISA HESS

Mailing Address 17330 MARGATE STREET

City State Zip Code
ENCINO CA 91316

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

Name of Employer Occupation
SELF ACCOUNTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7828

Amount of Each Receipt this Period
500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 26515 OAK TERRACE PLACE

City VALENCIA State CA Zip Code 91381

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

Name of Employer HEYS PLUMBING Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7741

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
LANCE HOLT

Mailing Address 507 OAK HAMPTON STREET

City THOUSAND OAKS State CA Zip Code 91361

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

Name of Employer LAST BUCK RANCH Occupation RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.7922

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ANDREW HOROWITZ

Mailing Address 25602 MELVILLE COURT

City STEVENSON RANCH State CA Zip Code 91381

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

Name of Employer MORGAN STANELY Occupation FINANCIAL ADVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.7919

Amount of Each Receipt this Period
250.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEO HOWARD

Mailing Address 4326 BERGAMO DRIVE

City State Zip Code
ENCINO CA 91436

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

Name of Employer Occupation
HOWARD AND HOWARD CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 12 / 2014

Transaction ID : SA11AI.7830

Amount of Each Receipt this Period
500.00

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

Mailing Address 5152 LOS CABALLEROS WAY

City State Zip Code
LOS ANGELES CA 90027

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

Name of Employer Occupation
MONSTER ENERGY CO. VICE PRESIDENT AND MANAGING LEGAL C

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

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

Transaction ID : SA11AI.7639

Amount of Each Receipt this Period
500.00

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

Mailing Address 2786 DIAMOND DRIVE

City State Zip Code
CAMARILLO CA 93010

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

Name of Employer Occupation
SURETY GROUP, INC. REAL ESTATE MANAGEMENT & INVESTMEI

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.7967

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EDWARD HULAC		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2014	
Mailing Address 2786 DIAMOND DRIVE		Transaction ID : SA11AI.7686	
City CAMARILLO	State CA	Zip Code 93010	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer SURETY GROUP, INC.	Occupation REAL ESTATE MANAGEMENT & INVESTMEI		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) B. WILLIAM H HURT		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 333 S HOPE STREET FL 54		Transaction ID : SA11AI.7783	
City LOS ANGELES	State CA	Zip Code 90071	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer CAPITAL GUARDIAN	Occupation CHAIRMAN OF THE BOARD		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) C. NANCY L IREDALE		Date of Receipt M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 515 SOUTH FLOWER STREET		Transaction ID : SA11AI.7939	
City LOS ANGELES	State CA	Zip Code 90071	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer PAUL HASTINGS, LLP	Occupation TAX ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2100.00		

SUBTOTAL of Receipts This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 279 GARDEN DRIVE

City THOUSAND OAKS State CA Zip Code 91361

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

Name of Employer J AND J INSURANCE INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.7952

Amount of Each Receipt this Period
1000.00

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

Mailing Address P.O. BOX 3528

City CAMARILLO State CA Zip Code 93011

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

Name of Employer FOX INSURANCE Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.7727

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CALVIN JOHNSTON

Mailing Address 972 VISTA RIDGE LANE

City THOUSAND OAKS State CA Zip Code 91362

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

Name of Employer THE JOHNSTON GROUP Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7985

Amount of Each Receipt this Period
500.00

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JENNY JONES

Mailing Address 12012 WILSHIRE BLVD.

City LOS ANGELES State CA Zip Code 90025

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

Name of Employer ELKINS JONES Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.7928

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
MATT KAHN

Mailing Address 15819 ROSEHAVEN LANE

City CANYON COUNTRY State CA Zip Code 91387

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

Name of Employer EMPLOYMENT SERVICES Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 20 / 2014

Transaction ID : SA11AI.7865

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
DONALD KELLY

Mailing Address P.O. BOX 460048

City HOUSTON State TX Zip Code 77056

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

Name of Employer KELPETRO Occupation OIL AND GAS OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : SA11AI.7877

Amount of Each Receipt this Period
 2550.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MATY KEITA KELLY		Date of Receipt M M / D D / Y Y Y Y 09 / 04 / 2014	
Mailing Address PO BOX 460048		Transaction ID : SA11AI.7641	
City HOUSTON	State TX	Zip Code 77056	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) B. CHARLES R KESLER		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 730 HUNTINGTON CIRCLE		Transaction ID : SA11AI.7722	
City PASADENA	State CA	Zip Code 91006	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer CLAREMONT MCKENNA COLLEGE	Occupation PROFESSOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) C. JAMIE KIRK		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2014	
Mailing Address 5250 PORTOLA RD.		Transaction ID : SA11AI.7748	
City ATASCADERO	State CA	Zip Code 93422	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00	
Name of Employer KIRK CONSULTING	Occupation LAND USE PLANNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

SUBTOTAL of Receipts This Page (optional).....	3350.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VICTOR KOHN

Mailing Address 16135 VALLEY MEADOW PLACE

City State Zip Code
ENCINO CA 91436

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

Name of Employer Occupation
CAPITAL GROUP, INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11A1.7610

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
DEAN R KOONTZ

Mailing Address PO BOX 9529

City State Zip Code
NEWPORT BEACH CA 92658

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

Name of Employer Occupation
DEAN KOONTZ WRITER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11A1.7811

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
GERDA A KOONTZ

Mailing Address PO BOX 9529

City State Zip Code
NEWPORT BEACH CA 92658-9529

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11A1.7812

Amount of Each Receipt this Period
2600.00

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

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

7800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRED KREGER

Mailing Address 26636 SHAKESPEARE LANE

City State Zip Code
STEVENSON RANCH CA 91381

FEC ID number of contributing federal political committee.

Name of Employer Occupation
AMERICAN FAMILY FUNDING CORP. BRANCH MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7598

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
CARLA KURACHI

Mailing Address 2157 BIGELOW AVE

City State Zip Code
SIMI VALLEY CA 93065

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SIMI VALLEY SCHOOL DISTRICT SCHOOL PSYCHOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8006

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MARK A LARINTO

Mailing Address 28538 CURTIS ALAN PLACE

City State Zip Code
SAUGUS CA 91350

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SCENIC EXPRESSIONSM, INC. BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7795

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 101 STRAND ST.
APT. A

City State Zip Code
SANTA MONICA CA 90405

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

Name of Employer Occupation
CITY NATIONAL BANK INVESTMENT CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : SA11AI.7820

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ALLEN LAWRENCE

Mailing Address 7033 OWENSMOUTH AVENUE

City State Zip Code
CANOGA PARK CA 91303

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

Name of Employer Occupation
ALLEN LAWRENCE & ASSOCIATES, INC. CHAIRMAN & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2014

Transaction ID : SA11AI.8001

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
NORMAN F LENT III

Mailing Address 3529 MALVERN CT.

City State Zip Code
ALEXANDRIA VA 22304

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

Name of Employer Occupation
ARENT FOX GOVERNMENT RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.7897

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LESLIE G LEVY

Mailing Address 23501 CINEMA DRIVE, SUITE 209

City VALENCIA State CA Zip Code 91355

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

Name of Employer VALENCIA PODIATRY Occupation PODIATRIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7599

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
KAREN L LINDSEY

Mailing Address 12416 WILLOW HILL DRIVE

City MOORPARK State CA Zip Code 93021

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

Name of Employer KAREN LINDSEY REAL ESTATE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 08 / 2014

Transaction ID : SA11AI.7772

Amount of Each Receipt this Period
250.00

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

Mailing Address 11777 SAN VINCENTE BLVD
SUITE 900

City LOS ANGELES State CA Zip Code 90049-6615

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

Name of Employer LOWE ENTERPRISES Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.7813

Amount of Each Receipt this Period
2600.00

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

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

3350.00

**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 40 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARC MAGID

Mailing Address 337 HILLCREST STREET

City State Zip Code
EL SEGUNDO CA 90245

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

Name of Employer Occupation
SELF REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7832

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
BOB MAJORINO

Mailing Address 2860 EAST THOUSAND OAKS BOULEVARD

City State Zip Code
THOUSAND OAKS CA 91362

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

Name of Employer Occupation
PRUDENTIAL CALIFORNIA REALTY CEO AND OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7730

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD L MARTIN

Mailing Address 411 NORTH CENTRAL AVENUE

City State Zip Code
GLENDALE CA 91203

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

Name of Employer Occupation
SELF OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7869

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEVE MARTINI

Mailing Address 29587 FOUNTAINWOOD STREET

City	State	Zip Code
AGOURA HILLS	CA	91301

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

Name of Employer	Occupation
MARTINI, IOSUE AND AKPORI, CPAS	CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7834

Amount of Each Receipt this Period
500.00

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

Mailing Address 1738 PAXTON ST

City	State	Zip Code
LAKE SHERWOOD	CA	91361

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

Name of Employer	Occupation
MATT CONSTRUCTION	EXECUTIVE VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.7617

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
LAWRENCE MATTSON

Mailing Address 114 N. MAPLE DDR.

City	State	Zip Code
BEVERLY HILLS	CA	90210

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 25 / 2014

Transaction ID : SA11AI.7623

Amount of Each Receipt this Period
500.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAROLE MCNEIL		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address P.O. BOX 801827		Transaction ID : SA11A1.7685	
City DALLAS	State TX	Zip Code 75380	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SELF	Occupation REAL ESTATE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) B. ROBERT N MERETTE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 317 S BRAND BLVD.		Transaction ID : SA11A1.7657	
City GLENDALE	State CA	Zip Code 91204	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer CONTINENTAL COMMERCIAL GROUP	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. JOHN D MILNE		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 409 GEORGE STREET SE		Transaction ID : SA11A1.7899	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer N. CAPITAL MANAGEMENT	Occupation SR. VICE PRESIDENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 2000.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) RICHARD T. MINNICH		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 554 LONE OAK DRIVE		Transaction ID : SA11AI.7883
City THOUSAND OAKS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) RICHARD T. MINNICH		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 554 LONE OAK DRIVE		Transaction ID : SA11AI.7680
City THOUSAND OAKS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) FRANK MOLL		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 10301 MOOR PARK STREET		Transaction ID : SA11AI.7668
City TOLUCA LAKE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer EFM FINANCIAL CENTER	Occupation CHAIRMAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 44 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MORONGO BAND OF MISSION INDIANS

Mailing Address 12700 PUMARRA ROAD

City State Zip Code
BANNING CA 92220

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11AI.7671

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
MAJIDA M MOURAD

Mailing Address 4201 CATHEDRAL AVENUE NW
APT. 507W

City State Zip Code
WASHINGTON DC 20016

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

Name of Employer Occupation
THE ABRAHAM GROUP PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11AI.7900

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CURT NEWNES

Mailing Address 3116 E. 4TH STREET

City State Zip Code
LONG BEACH CA 90814

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

Name of Employer Occupation
CENTENNIAL PROPERTIES PROPERTY MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 30 2014

Transaction ID : SA11AI.7658

Amount of Each Receipt this Period
 250.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT C OBRIEN JR

Mailing Address 524 DARTMOUTH PLACE

City LA CANADA State CA Zip Code 91011

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

Name of Employer ARENT FOX LLP Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.7951

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ERIC OLOFSON

Mailing Address 10433 BAINBRIDGE AVENUE

City LOS ANGELES State CA Zip Code 90024

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

Name of Employer CUSHMAN & WAKEFIELD Occupation COMMERCIAL REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.7944

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GERARD J OROZCO

Mailing Address 5120 HIGHLAND VIEW AVE.

City LOS ANGELES State CA Zip Code 90041

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

Name of Employer CH2MHILL Occupation SVP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.8000

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID OWENS

Mailing Address 3371 E. AVENUE H14

City State Zip Code
LANCASTER CA 93535-2440

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

Name of Employer Occupation
FARMERS INSURANCE INSURANCE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
856.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7687

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
SCOTT PALMER

Mailing Address 515 SOUTH FLOWER STREET

City State Zip Code
LOS ANGELES CA 90071

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

Name of Employer Occupation
PALMER, LOMBARDI & DONAHUE LLP ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7612

Amount of Each Receipt this Period
1100.00

C. Full Name (Last, First, Middle Initial)
CHARLES J PANASEWICZ

Mailing Address 18 URBINO

City State Zip Code
IRVINE CA 92620

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

Name of Employer Occupation
MEGGITT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.7785

Amount of Each Receipt this Period
500.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAY PATEL

Mailing Address 160 EAST ARROW HIGHWAY

City SAN DIMAS State CA Zip Code 91773

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

Name of Employer KHO & PATEL CPAS Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7984

Amount of Each Receipt this Period
 2600.00

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

Mailing Address 14265 GREENLEAF STREEET

City SHERMAN OAKS State CA Zip Code 91423

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

Name of Employer GIBSON, DUNN & CRUTCHER Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7968

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
JAMES J PETERSON

Mailing Address 32221 COOK LANE

City SAN JUAN CAPISTRANO State CA Zip Code 92675

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

Name of Employer MICROSEMI Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7871

Amount of Each Receipt this Period
 2600.00

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

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

6200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAIG PFEFFERMAN

Mailing Address 319 LOIRE VALLEY DRIVE

City State Zip Code
SIMI VALLEY CA 93065

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF SELF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7852

Amount of Each Receipt this Period

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

Mailing Address 25350 MAGIC MOUNTAIN PARKWAY
2ND FLOOR

City State Zip Code
SANTA CLARITA CA 91355

FEC ID number of contributing federal political committee.

Name of Employer Occupation
POOLE & SHAFFERY, L.L.P. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7606

Amount of Each Receipt this Period

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

Mailing Address 8149 SANTA MONICA BOULEVARD

City State Zip Code
LOS ANGELES CA 90046

FEC ID number of contributing federal political committee.

Name of Employer Occupation
POST INVESTMENT GROUP REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7943

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 149	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) LAWRENCE POST		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 28 / 2014
Mailing Address 1160 TOWER ROAD		Transaction ID : SA11AI.7624
City BEVERLY HILLS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 1250.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) LAWRENCE POST		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 19 / 2014
Mailing Address 1160 TOWER ROAD		Transaction ID : SA11AI.7972
City BEVERLY HILLS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RETIRED	Occupation RETIRED	Election Cycle-to-Date 1750.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) EDWIN JOSEPH POULIN		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 22056 BREI COURT		Transaction ID : SA11AI.7872
City NEWHALL	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer REMAX	Occupation REAL ESTATE BROKER	Election Cycle-to-Date 500.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN W PROUGH

Mailing Address 527 HAZEL DRIVE

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CIG FINANCIAL PRESIDENT AND CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7878

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
SCOTT W REED

Mailing Address 5822 LAKEHURST AVENUE

City State Zip Code
DALLAS TX 75230

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CHESAPEAKE ENTERPRISES CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7956

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
VICTOR I REICHMAN

Mailing Address PO BOX 1835

City State Zip Code
LANCASTER CA 93539

FEC ID number of contributing federal political committee.

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7688

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 51 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROLAND REYNOLDS

Mailing Address 537 N. JUNE ST.

City State Zip Code
LOS ANGELES CA 90004

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

Name of Employer Occupation
PALMER, LOMBARDI, AND DONAHUE PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7704

Amount of Each Receipt this Period
500.00

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

Mailing Address 8837 BAINBRIDGE PLACE #4

City State Zip Code
STOCKTON CA 95209

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

Name of Employer Occupation
SELF-EMPLOYED REALTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.7618

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RICHARD ROEDER

Mailing Address 11150 SANTA MONICA BLVD. #750

City State Zip Code
LOS ANGELES CA 90025

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

Name of Employer Occupation
VANCE STREET CAPITAL LLC BUSINESSMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.7949

Amount of Each Receipt this Period
2600.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JESSE RUFF		Date of Receipt M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 20525 NORDHOFF ST SUITE 210		Transaction ID : SA11AI.7993	
City CHATSWORTH State CA Zip Code 91311	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Name of Employer LUMBER CITY CORP. Occupation CEO		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) B. CARLA SANDS		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 11611 SAN VICENTE BLVD. SUITE 1000		Transaction ID : SA11AI.7916	
City LOS ANGELES State CA Zip Code 90049	Amount of Each Receipt this Period 2600.00		
FEC ID number of contributing federal political committee. C	Name of Employer RETIRED Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) C. FRED SANDS		Date of Receipt M M / D D / Y Y Y Y 09 / 16 / 2014	
Mailing Address 11611 SAN VICENTE BLVD. SUITE 1000		Transaction ID : SA11AI.7915	
City LOS ANGELES State CA Zip Code 90049	Amount of Each Receipt this Period 2100.00		
FEC ID number of contributing federal political committee. C	Name of Employer VINTAGE CAPITAL GROUP Occupation CHAIRMAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

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

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

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

FOR LINE NUMBER: PAGE 53 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 6200 S. SYRACUSE WAY SUITE 200

City State Zip Code
GREENWOOD CO 80111

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

Name of Employer Occupation
ENVISION HEALTHCARE CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 29 / 2014

Transaction ID : SA11AI.7669

Amount of Each Receipt this Period
1600.00

B. Full Name (Last, First, Middle Initial)
SAN MANUEL BAND OF MISSION INDIANS

Mailing Address 26569 COMMUNITY CENTER DRIVE

City State Zip Code
HIGHLAND CA 92346

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8017

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MIKE SCHAFER

Mailing Address 602 EAST AVENUE R

City State Zip Code
PALMDALE CA 93550

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

Name of Employer Occupation
ANTELOPE VALLEY VAN & STORAGE BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : SA11AI.7643

Amount of Each Receipt this Period
500.00

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

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

4700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN SCHAFFER

Mailing Address 307 AVENIDA DE ROYALE

City THOUSAND OAKS State CA Zip Code 91362

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

Name of Employer UNION BANK Occupation FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7706

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARNA SCHNABEL

Mailing Address 162 S. BURLINGAME AVENUE

City LOS ANGELES State CA Zip Code 90049

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

Name of Employer DEL MAR AVIONICS Occupation BUSINESSWOMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.7980

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LEONARD SCHRAGE

Mailing Address 124 N. WOODBURN DR

City LOS ANGELES State CA Zip Code 90049

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

Name of Employer SAGE AUTO GROUP Occupation VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7690

Amount of Each Receipt this Period
2600.00

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

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

4100.00

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

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

FOR LINE NUMBER: PAGE 55 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TEMA SCHRAGE

Mailing Address 124 N. WOODBURN DR

City State Zip Code
LOS ANGELES CA 90049

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7692

Amount of Each Receipt this Period
2600.00

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

Mailing Address 4020 VIA LARGAVISTA

City State Zip Code
PALOS VERDES ESTATES CA 90274

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

Name of Employer Occupation
FIRST Q CAPITAL FINANCE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7707

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAYNE SHAPIRO

Mailing Address 277 SOUTH SPALDING DRIVE
#401

City State Zip Code
BEVERLY HILLS CA 90212

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7659

Amount of Each Receipt this Period
250.00

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIC SHAVER

Mailing Address 1314 W AVENUE J

City LANCASTER State CA Zip Code 93534

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

Name of Employer ALLIED PHYSICAL MEDICINE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.7918

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
SHINGLE SPRINGS BAND MIWOK INDIANS

Mailing Address PO BOX 1340

City SHINGLE SPRINGS State CA Zip Code 95682

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7962

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MURAD M SIAM

Mailing Address 515 S. FIGUEROA ST. #1600

City LOS ANGELES State CA Zip Code 90071

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

Name of Employer IDS REAL ESTATE Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7709

Amount of Each Receipt this Period
2600.00

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

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

4600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DANTE R SIMI

Mailing Address 6047 MIRKWOOD CT.

City PALMDALE State CA Zip Code 93551-1630

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

Name of Employer DESERT SANDS CHARTER HIGH SCHOOL Occupation EDUCATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11AI.7693

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KEITH SINCLAIR

Mailing Address 223 E THOUSAND OAKS BLVD #415

City THOUSAND OAKS State CA Zip Code 91360

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

Name of Employer SINCLAIR CO. Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7991

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
LARRY T SMITH

Mailing Address 1601 DOVE STREET, SUITE 145

City NEWPORT BEACH State CA Zip Code 92660

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

Name of Employer M.H.I REAL COMPANY Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.7786

Amount of Each Receipt this Period
1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN SNOW

Mailing Address 16911 ROYAL PINES LANE

City State Zip Code
SANTA CLARITA CA 91387

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SNOW LAW CORP. ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7977

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
THOMAS STAPLETON

Mailing Address 8504 WENDELL DRIVE

City State Zip Code
ALEXANDRIA VA 22308

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STAPLETON AND ASSOCIATES PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7649

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
PETER STARRETT

Mailing Address 1765 ALTA MURA ROAD

City State Zip Code
PACIFIC PALISADES CA 90272

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PETER STARRETT ASSOCIATES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7719

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHAWN STEEL

Mailing Address 27520 HAWTHORNE BLVD., #270

City	State	Zip Code
ROLLING HILLS ESTATES	CA	90274

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

Name of Employer	Occupation
LAW OFFICES OF SHAWN STEEL	ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 11 / 2014

Transaction ID : SA11AI.7762

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. TODD STEVENS

Mailing Address 22060 ROLLING RIDGE DRIVE

City	State	Zip Code
SANTA CLARITA	CA	91350

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

Name of Employer	Occupation
OCCIDENTAL PETROLEUM CORP	VICE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.7945

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TERRY STEWART

Mailing Address 1 ALTAMONT WAY

City	State	Zip Code
CAMARILLO	CA	93010

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 16 / 2014

Transaction ID : SA11AI.7913

Amount of Each Receipt this Period
50.00

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

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

1550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY STILKEY

Mailing Address 1453 COPPER MOUNTAIN DR.

City DIAMOND BAR	State CA	Zip Code 91765
---------------------	-------------	-------------------

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

Name of Employer KHO & PATEL	Occupation CPA
---------------------------------	-------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.7990

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
NICHOLAS STONNINGTON

Mailing Address 865 ORLANDO ROAD

City SAN MARINO	State CA	Zip Code 91108
--------------------	-------------	-------------------

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

Name of Employer STONNINGTON GROUP	Occupation PRESIDENT
---------------------------------------	-------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7995

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MARWOOD M STOUT

Mailing Address 12672 ANDALUSIA DRIVE

City CAMARILLO	State CA	Zip Code 93012
-------------------	-------------	-------------------

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

Name of Employer ANACAPA ORAL SURGERY	Occupation ORAL SURGEON
--	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11AI.7788

Amount of Each Receipt this Period
250.00

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

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

3850.00

**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 61 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICKEY STRAUSS

Mailing Address 10025 RUDNICK AVENUE

City CHATSWORTH State CA Zip Code 91311

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

Name of Employer MSM LANDSCAPE SERVICES, INC. Occupation LANDSCAPE CONTRACTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11AI.7921

Amount of Each Receipt this Period
250.00

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

Mailing Address 804 BRADFORD AVE.

City CAMARILLO State CA Zip Code 93010

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.7710

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
CHUCK STYGAR

Mailing Address 1665 DEVON ROAD

City PASADENA State CA Zip Code 91103

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

Name of Employer INFINID TECHNOLOGIES Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.7604

Amount of Each Receipt this Period
500.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BILL J THOMPSON

Mailing Address 24307 MAGIC MOUNTAIN PKWY

City VALENCIA State CA Zip Code 91355

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

Name of Employer LAW OFFICES OF BILL J. THOMPSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
290.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2014

Transaction ID : SA11Al.7694

Amount of Each Receipt this Period
90.00

B. Full Name (Last, First, Middle Initial)
CATHERINE TOSETTI

Mailing Address 1011 OAK GROVE AVENUE

City SAN MARINO State CA Zip Code 91108

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11Al.7664

Amount of Each Receipt this Period
2600.00

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

Mailing Address 1011 OAK GROVE AVENUE

City SAN MARINO State CA Zip Code 91108

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

Name of Employer LATHAM & WATKINS Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11Al.7665

Amount of Each Receipt this Period
2600.00

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

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

5290.00

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

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

FOR LINE NUMBER: PAGE 63 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHASE UNRUH

Mailing Address 30419 HEARD AVE.

City State Zip Code
SANTA CLARITA CA 91390

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNRUH CHIROPRACTIC INC. CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7647

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MILT VALERA

Mailing Address 5401 LUBAO AVENUE

City State Zip Code
WOODLAND HILLS CA 91364

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NNA SERVICES, INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7948

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DELMAR VAN DAM

Mailing Address 9753 E. AVENUE F-8

City State Zip Code
LANCASTER CA 93535

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED DAIRY RANCHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7696

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

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

Mailing Address 4 MAVERICK LN.

City State Zip Code
ROLLINGS HILLS CA 90274

FEC ID number of contributing federal political committee.

Name of Employer Occupation
VIRCO MANUFACTURING CORP. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7663

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
ABRAHAM WACHT

Mailing Address 310 EIGHTEENTH STREET

City State Zip Code
SANTA MONICA CA 90402

FEC ID number of contributing federal political committee.

Name of Employer Occupation
FEDERAL INDUSTRIES PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7836

Amount of Each Receipt this Period

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

Mailing Address 148 QUEENS GARDEN DRIVE

City State Zip Code
WESTLAKE VILLAGE CA 91361

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TEAM NISSAN OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.7726

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HALBERT WASHBURN

Mailing Address 11444 WEST OLYMPIC BLVD.
11TH FLOOR

City LOS ANGELES State CA Zip Code 90064

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

Name of Employer BREITBURN ENERGY PARTNERS, LP Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.7947

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
IRVING WEINTRAUB

Mailing Address 10776 WILSHIRE BLVD, UNIT 26

City LOS ANGELES State CA Zip Code 90024

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7838

Amount of Each Receipt this Period
1000.00

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

Mailing Address 1271 CHATEAU ROAD

City PASADENA State CA Zip Code 91105

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

Name of Employer SELF Occupation INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : SA11AI.7608

Amount of Each Receipt this Period
500.00

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LANCE WILLIAMS		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2014	
Mailing Address 21080 CENTRE POINTE PARKWAY		Transaction ID : SA11AI.7621	
City SANTA CLARITA	State CA	Zip Code 91350	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer WILLIAMS HOMES, INC.	Occupation HOME BUILDER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) B. MR. DAVID WEST WILSON		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1400 N. TUSTIN		Transaction ID : SA11AI.8011	
City ORANGE	State CA	Zip Code 92867	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer AUTOMOBILE DEALER	Occupation DAVID WILSON FORD		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) C. MR. GARY L WILSON		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 355 S. GRAND AVENUE, SUITE 1710 SUITE 1710		Transaction ID : SA11AI.7779	
City LOS ANGELES	State CA	Zip Code 90071	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer GARY L. WILSON	Occupation PRIVATE INVESTOR		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 149
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOREN WITKIN

Mailing Address 24803 LOS ALTOS DRIVE

City VALENCIA State CA Zip Code 91355

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

Name of Employer CITADEL ENVIRONMENTAL SERVICES, INC. Occupation PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 12 / 2014

Transaction ID : SA11AI.7840

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STEFAN WOLOWICZ

Mailing Address 27917 SAN NICOLAS DR.

City RANCHO PALOS VERDES State CA Zip Code 90275

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 15 / 2014

Transaction ID : SA11AI.7622

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
YOCHA DEHE WINTUN NATION

Mailing Address P0 BOX 18

City BROOKS State CA Zip Code 95606

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.7753

Amount of Each Receipt this Period
2600.00

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

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

3250.00

196725.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABBOTT LABORATORIES EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address 100 ABBOTT PARK RD.
D312 AP6D-2

City ABBOTT PARK State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00040279

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.7906

Amount of Each Receipt this Period
3000.00

B. Full Name (Last, First, Middle Initial)
ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address 1 N. WAUKEGAN ROAD

City NORTH CHICAGO State IL Zip Code 60064

FEC ID number of contributing federal political committee. **C** C00536573

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11C.7800

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE

Mailing Address 9700 WEST BRYN MAWR AVE.

City ROSEMONT State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00005660

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 08 / 2014

Transaction ID : SA11C.7778

Amount of Each Receipt this Period
1000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1891 PRESTON WHITE DRIVE

City RESTON State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7712

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVE, NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7632

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1505 PRINCE STREET
SUITE 300

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00024968

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7896

Amount of Each Receipt this Period
 7500.00

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

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

15000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS POLITICAL ACTION COMMITTEE

Mailing Address 1061 AMERICAN LANE

City State Zip Code
SCHAUMBURG IL 60173

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.8015

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ANDY BARR FOR CONGRESS, INC.

Mailing Address PO BOX 2059

City State Zip Code
LEXINGTON KY 40588

FEC ID number of contributing federal political committee. **C** C00467571

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7628

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ANESTHESIA SERVICE MEDICAL GROUP ADVOCACY FUND

Mailing Address 7185 NAVAJO ROAD SUITE P

City State Zip Code
SAN DIEGO CA 92119

FEC ID number of contributing federal political committee. **C** C00216184

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7756

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 71 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ARENT FOX LLP PAC (AFPAC)

Mailing Address **ARENT FOX LLP**
1717 K STREET NW

City **WASHINGTON** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00241380**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11C.7874

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CALIFORNIA WATER SERVICE GROUP

Mailing Address **1720 NORTH FIRST STREET**

City **SAN JOSE** State **CA** Zip Code **95112**

FEC ID number of contributing federal political committee. **C C00357608**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.8013

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address **6101 BOLLINGER CANYON ROAD**
ROOM 3418

City **SAN RAMON** State **CA** Zip Code **94583**

FEC ID number of contributing federal political committee. **C C00035006**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 22 / 2014

Transaction ID : SA11C.8016

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address 6101 BOLLINGER CANYON ROAD
ROOM 3418

City SAN RAMON State CA Zip Code 94583

FEC ID number of contributing federal political committee. **C** C00035006

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7845

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVENUE, NW
SOUTH BUILDING, SUITE 600

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7630

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND

Mailing Address 1000 DARDEN CENTER DRIVE

City ORLANDO State FL Zip Code 32837

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.8019

Amount of Each Receipt this Period
1000.00

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

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

7000.00

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

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

A. Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7776

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
DTE ENERGY CO. PAC - FEDERAL

B. Mailing Address ONE ENERGY PLAZA
ROOM 1583 WCB

City State Zip Code
DETROIT MI 48226

FEC ID number of contributing federal political committee. **C** C00081547

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7894

Amount of Each Receipt this Period
1000.00

Full Name (Last, First, Middle Initial)
EUREKA POLITICAL ACTION COMMITTEE

C. Mailing Address PO BOX 30844

City State Zip Code
BETHESDA MD 20824

FEC ID number of contributing federal political committee. **C** C00390161

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7861

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11C.7798

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address PO BOX 20503

City INDIANAPOLIS State IN Zip Code 46220

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7797

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
FOLEY & LARDNER POLITICAL FUND, INC.

Mailing Address 3000 K STREET NW

City WASHINGTON State DC Zip Code 20007

FEC ID number of contributing federal political committee. **C** C00105338

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7882

Amount of Each Receipt this Period
 1000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 75 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GOP GENERATION Y FUND

Mailing Address PO BOX 9055

City State Zip Code
PEORIA IL 61612

FEC ID number of contributing federal political committee. **C C00448191**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7853

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
HERBALIFE PAC

Mailing Address 990 WEST 190TH STREET

City State Zip Code
TORRANCE CA 90502

FEC ID number of contributing federal political committee. **C C00393298**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 15 / 2014

Transaction ID : SA11C.7620

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address 228 S. WASHINGTON ST., STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00326439**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7675

Amount of Each Receipt this Period
5000.00

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

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

11000.00

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

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

FOR LINE NUMBER: PAGE 76 OF 149
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUMANE SOCIETY LEGISLATIVE FUND POLITICAL ACTION COMMITTEE

Mailing Address 2100 L STREET, NW
SUITE 310

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00466813**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7960

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
IMPACT COMMITTEE

Mailing Address 100 LUNA PARK DRIVE
STE. 156

City State Zip Code
ALEXANDRIA VA 22305

FEC ID number of contributing federal political committee. **C C00525238**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8010

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP

Mailing Address 20 F STREET, NW SUITE 610

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7635

Amount of Each Receipt this Period
2500.00

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

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

8500.00

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

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

FOR LINE NUMBER: PAGE 77 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE (INSURP)

A. Mailing Address 20 F STREET, NW SUITE 610

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7601

Amount of Each Receipt this Period
2500.00

Full Name (Last, First, Middle Initial)
INVEST IN A STRONG AND SECURE AMERICA - ISSA PAC

B. Mailing Address PO BOX 3799

City State Zip Code
VISTA CA 92085

FEC ID number of contributing federal political committee. **C** C00450320

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7702

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
JOHN BOLTON PAC

C. Mailing Address 610 S. BOULEVARD

City State Zip Code
TAMPA FL 33606

FEC ID number of contributing federal political committee. **C** C00542431

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7859

Amount of Each Receipt this Period
5000.00

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

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

12500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN S FUND

Mailing Address **PO BOX 853**

City **EDWARDSVILLE** State **IL** Zip Code **62025**

FEC ID number of contributing federal political committee. **C C00390831**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.7634

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address **1295 STATE STREET**

City **SPRINGFIELD** State **MA** Zip Code **01111**

FEC ID number of contributing federal political committee. **C C00118943**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7714

Amount of Each Receipt this Period

4000.00

C. Full Name (Last, First, Middle Initial)
MCKESSON CORPORATION EMPLOYEES POLITICAL FUND

Mailing Address **ONE POST STREET
34TH FLOOR**

City **SAN FRANCISCO** State **CA** Zip Code **94104**

FEC ID number of contributing federal political committee. **C C00108035**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7843

Amount of Each Receipt this Period

2500.00

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

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

7500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMM

Mailing Address 2901 TELESTAR CT.

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.7876

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE

Mailing Address 430 NORTH MICHIGAN AVENUE

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C** C00030718

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11C.8014

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL MULTIFAMILY HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M STREET, NW
SUITE 540

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00130773

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7793

Amount of Each Receipt this Period
 2500.00

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

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

8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 700 NEWPORT CENTER DRIVE

City State Zip Code
NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee. **C C00068528**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7591

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
PATRIOTS IN ACTION

Mailing Address 1005 CONGRESS AVE STE 910

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C C00531590**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7703

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

Mailing Address 8700 WEST BRYN MAWR SUITE 1200S

City State Zip Code
CHICAGO IL 60631

FEC ID number of contributing federal political committee. **C C00066472**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 18 / 2014

Transaction ID : SA11C.7904

Amount of Each Receipt this Period
1000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 81 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

Mailing Address 1006 PENDLETON STREET

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11C.7847

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11C.7716

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
REPUBLICAN JEWISH COALITION-POLITICAL ACTION COMMITTEE (RJC-PAC)

Mailing Address 50 F STREET NW SUITE 100

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C** C00345132

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11C.7593

Amount of Each Receipt this Period
2500.00

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

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

12500.00

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

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

FOR LINE NUMBER: PAGE 82 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Mailing Address P. O. BOX 1011

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing federal political committee. **C** C00451294

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7880

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
SCALISE FOR CONGRESS

Mailing Address PO BOX 23219

City State Zip Code
JEFFERSON LA 70183

FEC ID number of contributing federal political committee. **C** C00394957

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7774

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
THE HOME DEPOT INC. POLITICAL ACTION COMMITTEE

Mailing Address 1155 F STREET, NW
SUITE 400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.7673

Amount of Each Receipt this Period
5000.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 149
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORP. FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 13TH STREET NW, SUITE 350

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8008

Amount of Each Receipt this Period
 _____ 2500.00

B. Full Name (Last, First, Middle Initial)
UNITED PARCEL SERVICE INC. PAC

Mailing Address 55 GLENLAKE PARKWAY NE

City ATLANTA	State GA	Zip Code 30328
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7758

Amount of Each Receipt this Period
 _____ 2500.00

C. Full Name (Last, First, Middle Initial)
UNITED TECHNOLOGIES CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 1101 PENNSYLVANIA AVE, NW
10TH FLOOR

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer	Occupation
------------------	------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.7902

Amount of Each Receipt this Period
 _____ 1000.00

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

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

_____ 6000.00

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

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

FOR LINE NUMBER: PAGE 84 OF 149
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WELLPOINT, INC. WELLPAC

Mailing Address 120 MONUMENT CIRCLE

City State Zip Code
INDIANAPOLIS IN 46204

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.7889

Amount of Each Receipt this Period
 1000.00

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).....

1000.00

129500.00

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

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

FOR LINE NUMBER: PAGE 85 OF 149

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMESTOWN ASSOCIATES

Mailing Address 5 MAPLETON ROAD, SUITE 300

City PRINSTON State NJ Zip Code 08540

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1884.45

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 06 / 2014

Transaction ID : SA14.8027

Amount of Each Receipt this Period
1884.45

REFUND: PLACED MEDIA

B. Full Name (Last, First, Middle Initial)
LOS ANGELES COUNTY REGISTRAR OF VOTERS

Mailing Address 12400 IMPERIAL HIGHWAY

City NORWALK State CA Zip Code 90650

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1582.03

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : SA14.7586

Amount of Each Receipt this Period
1582.03

REFUND: VOTER LIST

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).....

3466.48

3466.48

**SCHEDULE B (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 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 76		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 4 W. FOOTHILL BLVD.		Amount of Each Disbursement this Period 67.28
City ARCADIA	State CA	
Zip Code 91006	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8136
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. ABATE TAXI SERVICES		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 4625 5TH ST NW		Amount of Each Disbursement this Period 85.42
City WASHINGTON	State DC	
Zip Code 20011	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17 8037)	Transaction ID : SB17.8117
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO BOX 619616, MD 5675		Amount of Each Disbursement this Period 60.18
City DFW AIRPORT	State TX	
Zip Code 75261	Purpose of Disbursement TRAVEL FEE (WANGSAPORN SB17.8040)	Transaction ID : SB17.8292
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AMERICAN AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address PO BOX 619616, MD 5675		Amount of Each Disbursement this Period 722.00
City DFW AIRPORT	State TX	
Zip Code 75261	Purpose of Disbursement TRAVEL: AIR (WANGSAPORN SB17.8040)	Transaction ID : SB17.8293 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AQUA AL 2		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 212 7TH STREET SE		Amount of Each Disbursement this Period 207.33
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement MEETING EXPENSE: MEALS (CHASE CREDIT CARD SB17.8037)	Transaction ID : SB17.8115 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 45.00
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement MOBILE PHONE (WANGSAPORN SB17.8040)	Transaction ID : SB17.8226 [MEMO ITEM]
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 75.00
City DALLAS State TX Zip Code 75202	Purpose of Disbursement MOBILE PHONE (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8243 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 208 S. AKARD STREET		Amount of Each Disbursement this Period 83.00
City DALLAS State TX Zip Code 75202	Purpose of Disbursement UTILITIES (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8172 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 3820 WEST SIERRA		Amount of Each Disbursement this Period 83.00
City ACTON State CA Zip Code 93510	Purpose of Disbursement UTILITIES (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8140 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AVBOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 41319 12TH STREET W		Amount of Each Disbursement this Period 40.00
City PALMDALE State CA Zip Code 93551	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8266
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. AVBOT		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 41319 12TH STREET W		Amount of Each Disbursement this Period 40.00
City PALMDALE State CA Zip Code 93551	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8267
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. BARIC & ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 2601 MAIN STREET #560		Amount of Each Disbursement this Period 5000.00
City IRVINE State CA Zip Code 92614	Purpose of Disbursement LEGAL CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.8031
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BEVERLY WILSHIRE			Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014	
Mailing Address 9500 WILSHIRE BLVD			Amount of Each Disbursement this Period 18.00	
City BEVERLY HILLS	State CA	Zip Code 90212	Transaction ID : SB17.8204	
Purpose of Disbursement PARKING (WANGSAPORN SB17.8106)		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. BEX			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 706 W LANCASTER BLVD			Amount of Each Disbursement this Period 64.56	
City LANCASTER	State CA	Zip Code 93534	Transaction ID : SB17.8156	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. BIRDIES			Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014	
Mailing Address 41520 10TH ST.			Amount of Each Disbursement this Period 18.93	
City W. PALMDALE	State CA	Zip Code 93551	Transaction ID : SB17.8157	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BUFFALO WILD WINGS		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 40155 10TH ST. W		Amount of Each Disbursement this Period 20.79
City PALMDALE State CA Zip Code 93551	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8279 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BUFFALO WILD WINGS		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 40155 10TH ST. W		Amount of Each Disbursement this Period 16.67
City PALMDALE State CA Zip Code 93551	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8165 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BUFFALO WILD WINGS		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 40155 10TH ST. W		Amount of Each Disbursement this Period 26.33
City PALMDALE State CA Zip Code 93551	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8133 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BULLFEATHERS		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 410 FIRST STREET, SE		Amount of Each Disbursement this Period 3848.40
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSE: MEALS (CHASE CREDIT CARD SB17.8037)	
Candidate Name	Category/Type	Transaction ID : SB17.8113 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHARLES MOBIL		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2014
Mailing Address 10857 SANTA MONICA BLVD		Amount of Each Disbursement this Period 59.83
City LOS ANGELES State CA Zip Code 90025	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8228 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CHASE CREDIT CARD SERVICES		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address REMITTANCE CENTER PROCESSING 2500 WESTFIELD DRIVE		Amount of Each Disbursement this Period 3848.40
City ELGIN State IL Zip Code 60124	Purpose of Disbursement CREDIT CARD PAYMENT: SEE MEMOS	
Candidate Name	Category/Type	Transaction ID : SB17.8037
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3848.40
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 2568 SYCAMORE DRIVE		Amount of Each Disbursement this Period 62.69
City SIMI VALLEY	State CA	
Zip Code 93065	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8146
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CIRCLE K		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 392 N. LAKE		Amount of Each Disbursement this Period 54.27
City PASADENA	State CA	
Zip Code 91101	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8138
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CITY OF LANCASTER - PARKS,RECREATION & ARTS		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 44933 FERN AVE.		Amount of Each Disbursement this Period 350.00
City LANCASTER	State CA	
Zip Code 93534	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	Transaction ID : SB17.8277
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CLAIM JUMPER

Mailing Address 25740 THE OLD ROAD

City VALENCIA State CA Zip Code 91831

Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 16 / 2014

Amount of Each Disbursement this Period: 35.43

Transaction ID : SB17.8169

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. COCO'S

Mailing Address 16526 SOLEDAD CANYON ROAD

City CANYON COUNTRY State CA Zip Code 91387

Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 17 / 2014

Amount of Each Disbursement this Period: 21.63

Transaction ID : SB17.8168

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. COGS SIGNS

Mailing Address 2401 E. ORANGEBURG AVE. SUITE 675
PMB 227

City MODESTO State CA Zip Code 95355

Purpose of Disbursement PRINTING & DESIGN SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 09 / 2014

Amount of Each Disbursement this Period: 7371.87

Transaction ID : SB17.8044

SUBTOTAL of Disbursements This Page (optional)..... 7371.87

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

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRAZY OTTO'S		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 1228 WEST AVENUE I		Amount of Each Disbursement this Period 9.10 Transaction ID : SB17.8264
City LANCASTER State CA Zip Code 93534	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. DC FLYER CAB		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 37 L STREET SE		Amount of Each Disbursement this Period 10.28 Transaction ID : SB17.8121
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17.8037)	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. DC FLYER CAB		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 37 L STREET SE		Amount of Each Disbursement this Period 9.47 Transaction ID : SB17.8123
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SB17.8037)	
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DENNY'S		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 2005 WEST AVENUE		Amount of Each Disbursement this Period 9.83
City LANCASTER State CA Zip Code 93536	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8249 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ECHELON INSIGHTS		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 315A CAMERON STREET		Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA State VA Zip Code 22314	Purpose of Disbursement POLLING	
Candidate Name	Category/Type	Transaction ID : SB17.8046
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ENDEAVOR STRATEGIC COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1415 TAFT N. TAFT STREET SUITE 885		Amount of Each Disbursement this Period 285.82
City ARLINGTON State VA Zip Code 22201	Purpose of Disbursement DIGITAL CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.8051
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5285.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ENGINE CO. 28			Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 644 S FIGUEROA STREET			Amount of Each Disbursement this Period 37.52
City LOS ANGELES	State CA	Zip Code 90017	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type	Transaction ID : SB17.8161
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) B. ENGINE CO. 28			Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 644 S FIGUEROA STREET			Amount of Each Disbursement this Period 100.10
City LOS ANGELES	State CA	Zip Code 90017	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type	Transaction ID : SB17.8154
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) C. FARMERS INSURANCE			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 44309 LOWTREE AVENUE			Amount of Each Disbursement this Period 423.05
City LANCASTER	State CA	Zip Code 93534	
Purpose of Disbursement INSURANCE		Category/ Type	Transaction ID : SB17.8057
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	423.05
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 36.35
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8216 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 18.89
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8219 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 21.59
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement PRINTING & DESIGN SERVICES (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8250 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 18.89
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8273
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 18.89
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8278
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 942 S. SHADY GROVE RD.		Amount of Each Disbursement this Period 18.89
City MEMPHIS State TN Zip Code 38119	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8192
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 100 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FREEWAY CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 24518 W. LYONS AVE		Amount of Each Disbursement this Period 55.00
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	Transaction ID : SB17.8271
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FREEWAY CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 24518 W. LYONS AVE		Amount of Each Disbursement this Period 60.00
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8186
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. FREEWAY CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 24518 W. LYONS AVE		Amount of Each Disbursement this Period 60.93
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8164
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 101 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRY'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 27 / 2014
Mailing Address 13401 CROSSROADS PARKWAY NORTH		Amount of Each Disbursement this Period 113.34
City State Zip Code CITY OF INDUSTRY CA 91746	Purpose of Disbursement OFFICE SUPPLIES (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8144 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. GAVEA		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 42060 10TH STREET NW		Amount of Each Disbursement this Period 31.59
City State Zip Code LANCASTER CA 93534	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8257 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. GBG		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 858 W LANCASTER BLVD		Amount of Each Disbursement this Period 32.95
City State Zip Code LANCASTER CA 93534	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8174 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 102 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GLADSTONE'S		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 300 WORLD WAY		Amount of Each Disbursement this Period 45.88
City LOS ANGELES	State CA	
Zip Code 90045	Purpose of Disbursement TRAVEL: FOOD (CHASE CREDIT CARD SB17.8037)	Transaction ID : SB17.8119
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. GOOGLE		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 1600 AMPHITHEATRE PKWY		Amount of Each Disbursement this Period 10.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE SUBSCRIPTION (WANGSAPORN SB17.8040)	Transaction ID : SB17.8290
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. GOOGLE		Date of Disbursement MM / DD / YYYY 07 / 02 / 2014
Mailing Address 1600 AMPHITHEATRE PKWY		Amount of Each Disbursement this Period 10.00
City MOUNTAIN VIEW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE SUBSCRIPTION (WANGSAPORN SB17.8042)	Transaction ID : SB17.8193
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 103 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GS STRATEGY GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 350 N. 9TH STREET, SUITE 550		Amount of Each Disbursement this Period 7000.00
City BOISE	State ID	
Zip Code 83702	Purpose of Disbursement RESEARCH	Transaction ID : SB17.8058
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HALFWAY HOUSE		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 15564 SIERRA HWY		Amount of Each Disbursement this Period 53.51
City SANTA CLARITA	State CA	
Zip Code 91390	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)	Transaction ID : SB17.8255
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. HAMMOND & ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address PO BOX 368		Amount of Each Disbursement this Period 2750.58
City FALLS CHURCH	State VA	
Zip Code 22040	Purpose of Disbursement FUNDRAISING CONSULTING	Transaction ID : SB17.8059
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9750.58
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAMMOND & ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address PO BOX 368			Amount of Each Disbursement this Period 4044.57	
City FALLS CHURCH	State VA	Zip Code 22040	Transaction ID : SB17.8060	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. HAMMOND & ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address PO BOX 368			Amount of Each Disbursement this Period 3053.26	
City FALLS CHURCH	State VA	Zip Code 22040	Transaction ID : SB17.8061	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. EVAN HANDY			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 19839 DRASIN DRIVE			Amount of Each Disbursement this Period 4000.00	
City CANYON COUNTRY	State CA	Zip Code 91351	Transaction ID : SB17.8053	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	11097.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EVAN HANDY		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 19839 DRASIN DRIVE		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.8054
City CANYON COUNTRY	State CA	
Zip Code 91351	Purpose of Disbursement STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EVAN HANDY		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 19839 DRASIN DRIVE		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.8055
City CANYON COUNTRY	State CA	
Zip Code 91351	Purpose of Disbursement STRATEGY CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HD FUELS		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 2399 TAPO ST.		Amount of Each Disbursement this Period 61.74 Transaction ID : SB17.8253 [MEMO ITEM]
City SIMI VALLEY	State CA	
Zip Code 93063	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HOLIDAY INN		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 550 C ST W		Amount of Each Disbursement this Period 1196.54
City WASHINGTON State DC Zip Code 20024	Purpose of Disbursement TRAVEL: LODGING (CHASE CREDIT CARD SB17.8037)	
Candidate Name	Category/Type	Transaction ID : SB17.8129 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HOLIDAY INN		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 550 C ST W		Amount of Each Disbursement this Period 42.09
City WASHINGTON State DC Zip Code 20024	Purpose of Disbursement TRAVEL: FOOD (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8288 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HOLIDAY INN		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 550 C ST W		Amount of Each Disbursement this Period 262.21
City WASHINGTON State DC Zip Code 20024	Purpose of Disbursement TRAVEL: LODGING (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8289 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WESLEY HORN			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 22924 LYONS AVE. SUITE 104			Amount of Each Disbursement this Period 800.00	
City NEWHALL	State CA	Zip Code 91321	Transaction ID : SB17.8104	
Purpose of Disbursement FIELD CONSULTING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) B. WESLEY HORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 22924 LYONS AVE. SUITE 104			Amount of Each Disbursement this Period 800.00	
City NEWHALL	State CA	Zip Code 91321	Transaction ID : SB17.8105	
Purpose of Disbursement FIELD CONSULTING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

Full Name (Last, First, Middle Initial) C. ED HOVHANNISSIAN			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014	
Mailing Address 22924 LYONS AVE. STE 104			Amount of Each Disbursement this Period 1200.00	
City NEWHALL	State CA	Zip Code 91321	Transaction ID : SB17.8048	
Purpose of Disbursement FIELD CONSULTING		Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ED HOVHANNISSIAN		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 22924 LYONS AVE. STE 104		Amount of Each Disbursement this Period 1200.00 Transaction ID : SB17.8049
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement FIELD CONSULTING	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HYATT REGENCY		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 24500 TOWN CENTER DRIVE		Amount of Each Disbursement this Period 68.02 Transaction ID : SB17.8214 [MEMO ITEM]
City VALENCIA	State CA	
Zip Code 91355	Purpose of Disbursement TRAVEL: FOOD (WANGSAPORN SB17.8106)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. HYATT REGENCY		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 24500 TOWN CENTER DRIVE		Amount of Each Disbursement this Period 1982.94 Transaction ID : SB17.8220 [MEMO ITEM]
City VALENCIA	State CA	
Zip Code 91355	Purpose of Disbursement FACILITY RENTAL/CATERING SERVICES (WANGSAPORN SB17.8040)	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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 109 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JAMESTOWN ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014	
Mailing Address 5 MAPLETON ROAD, SUITE 300			Amount of Each Disbursement this Period 9844.46	
City PRINSTON	State NJ	Zip Code 08540	Transaction ID : SB17.8062	
Purpose of Disbursement PLACED MEDIA		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. JULIANNI'S			Date of Disbursement M M / D D / Y Y Y Y 07 / 14 / 2014	
Mailing Address 44960 VALLEY CENTRAL WAY			Amount of Each Disbursement this Period 51.46	
City LANCASTER	State CA	Zip Code 93536	Transaction ID : SB17.8182	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. ED KENNEDY			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 2922 WEST AVE J-4			Amount of Each Disbursement this Period 2000.00	
City LANCASTER	State CA	Zip Code 93536	Transaction ID : SB17.8064	
Purpose of Disbursement FIELD CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	11844.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KOBERL AT BLUE		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 998 MONTEREY ST		Amount of Each Disbursement this Period 55.00
City SAN LUIS OBISPO	State CA	
Zip Code 93401	Purpose of Disbursement TRAVEL: FOOD (WANGSAPORN SB17.8040)	Transaction ID : SB17.8230
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. LA CITY METERED PARKING		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 6309 VAN NUYS BLVD		Amount of Each Disbursement this Period 2.00
City VAN NUYS	State CA	
Zip Code 91401	Purpose of Disbursement PARKING (WANGSAPORN SB17.8040)	Transaction ID : SB17.8237
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. LA CITY METERED PARKING		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014
Mailing Address 6309 VAN NUYS BLVD		Amount of Each Disbursement this Period 12.00
City VAN NUYS	State CA	
Zip Code 91401	Purpose of Disbursement TRAVEL: PARKING (WANGSAPORN SB17.8040)	Transaction ID : SB17.8242
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LARRY LEVINE & ASSOCIATES		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 13701 RIVERSIDE DRIVE		Amount of Each Disbursement this Period 6557.00
City SHERMAN OAKS	State CA	
Zip Code 91423	Purpose of Disbursement PRINTING & DESIGN SERVICES	Transaction ID : SB17.8068
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. LEADERSHIP INSTITUTE		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 1101 N HIGHLAND STREET		Amount of Each Disbursement this Period 250.00
City ARLINGTON	State VA	
Zip Code 22201	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8042)	Transaction ID : SB17.8159
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. MARIE CALLENDER'S		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1649 W AVENUE K		Amount of Each Disbursement this Period 11.45
City LANCASTER	State CA	
Zip Code 93534	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)	Transaction ID : SB17.8262
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6557.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARIE CALLENDER'S		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 1649 W AVENUE K		Amount of Each Disbursement this Period 8.30
City LANCASTER	State CA Zip Code 93534	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)		Transaction ID : SB17.8268
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. METRO WASHINGTON AIRPORT AUTHORITY		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 730 12TH STREET NW		Amount of Each Disbursement this Period 85.44
City WASHINGTON	State DC Zip Code 20005	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17 8037)		Transaction ID : SB17.8111
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. MILLIE'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 2597 SYCAMORE DRIVE		Amount of Each Disbursement this Period 15.28
City SIMI VALLEY	State CA Zip Code 93065	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Transaction ID : SB17.8149
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MOBIL		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2014
Mailing Address 25357 N. CHAIQUELLA AVE.		Amount of Each Disbursement this Period 59.96
City STEVENSON RANCH	State CA	
Zip Code 91381	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	Transaction ID : SB17.8276
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. TYLER MOORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 22924 LYONS AVE. STE 104		Amount of Each Disbursement this Period 2500.00
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement FIELD CONSULTING	Transaction ID : SB17.8094
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TYLER MOORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 22924 LYONS AVE., SUITE 104		Amount of Each Disbursement this Period 2500.00
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement FIELD CONSULTING	Transaction ID : SB17.8095
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TYLER MOORE			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 22924 LYONS AVE., SUITE 104			Amount of Each Disbursement this Period 2647.50	
City NEWHALL	State CA	Zip Code 91321	Transaction ID : SB17.8096	
Purpose of Disbursement FIELD CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. OUTBACK			Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014	
Mailing Address 25261 THE OLD RD.			Amount of Each Disbursement this Period 35.15	
City STEVENSON RANCH	State CA	Zip Code 91381	Transaction ID : SB17.8208	
Purpose of Disbursement TRAVEL: FOOD (WANGSAPORN SB17.8106)		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PIZZA HUT			Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014	
Mailing Address 23430 LYONS AVE			Amount of Each Disbursement this Period 42.50	
City NEWHALL	State CA	Zip Code 91321	Transaction ID : SB17.8188	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2647.50
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 115 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PLUVIOUS GROUP		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 515 S. FIGUEROA STREET, 16TH FLOOR		Amount of Each Disbursement this Period 17190.00 Transaction ID : SB17.8069
City LOS ANGELES State CA Zip Code 90071	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PREVAIL STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 400 FIRST STREET SE, SECOND FLOOR		Amount of Each Disbursement this Period 8009.50 Transaction ID : SB17.8070
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement COMMUNICATIONS CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PREVAIL STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 400 FIRST STREET SE, SECOND FLOOR		Amount of Each Disbursement this Period 10848.84 Transaction ID : SB17.8071
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement COMMUNICATIONS CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	36048.34
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PREVAIL STRATEGIES		Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014
Mailing Address 400 FIRST STREET SE, SECOND FLOOR		Amount of Each Disbursement this Period 10113.31 Transaction ID : SB17.8072
City WASHINGTON State DC Zip Code 20003	Purpose of Disbursement COMMUNICATIONS CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB17.8073
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RED CURVE SOLUTIONS		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 138 CONANT STREET		Amount of Each Disbursement this Period 2439.40 Transaction ID : SB17.8074
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	14952.71
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. REDS BBQ AND GRILLERY		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 3090-A1 COCHRAN STREET		Amount of Each Disbursement this Period 85.44
City SIMI VALLEY	State CA	
Zip Code 93065	Purpose of Disbursement TRAVEL: FOOD (WANGSAPORN SB17.8106)	Transaction ID : SB17.8210
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. REGISTER RECORDER/COUNTY CLERK'S OFFICE		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 12400 IMPERIAL HIGHWAY		Amount of Each Disbursement this Period 9000.00
City NORWALK	State CA	
Zip Code 90650	Purpose of Disbursement DATA PURCHASE	Transaction ID : SB17.8076
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ROXFORD CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 2881 ENCINITAS ROAD		Amount of Each Disbursement this Period 71.64
City SYLMAR	State CA	
Zip Code 91342	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8106)	Transaction ID : SB17.8206
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	9000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAND CANYON CHEVRON			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 28522 SAND CANYON			Amount of Each Disbursement this Period 60.00
City CANYON COUNTRY	State CA	Zip Code 91387	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Category/ Type	Transaction ID : SB17.8201 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. SAUGUS CAFE			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 25861 SAN FERNANDO ROAD			Amount of Each Disbursement this Period 33.90
City SAUGUS	State CA	Zip Code 91350	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)		Category/ Type	Transaction ID : SB17.8238 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) C. SAUGUS CAFE			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 25861 SAN FERNANDO ROAD			Amount of Each Disbursement this Period 54.63
City SAUGUS	State CA	Zip Code 91350	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)		Category/ Type	Transaction ID : SB17.8270 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAUGUS CAFE		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 25861 SAN FERNANDO ROAD		Amount of Each Disbursement this Period 36.75
City SAUGUS State CA Zip Code 91350	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8190 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SAUGUS CAFE		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 25861 SAN FERNANDO ROAD		Amount of Each Disbursement this Period 31.35
City SAUGUS State CA Zip Code 91350	Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8180 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. JOHN SCARDINO		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 31200 VIA COLINAS, SUTE 200		Amount of Each Disbursement this Period 900.00
City WESTLAKE VILLAGE State CA Zip Code 91362	Purpose of Disbursement FIELD CONSULTING	
Candidate Name	Category/Type	Transaction ID : SB17.8066
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SCV CHAMBER			Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 27451 TOURNEY ROAD			Amount of Each Disbursement this Period 100.00
City VALENCIA	State CA	Zip Code 91355	
Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8042)		Category/ Type	Transaction ID : SB17.8185 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SHELL			Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 6599 COLLINS DRIVE			Amount of Each Disbursement this Period 25.99
City MOORPARK	State CA	Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		Category/ Type	Transaction ID : SB17.8221 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SHELL			Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2014
Mailing Address 2699 SHELL BEACH BLVD			Amount of Each Disbursement this Period 62.48
City PISMO BEACH	State CA	Zip Code 93449	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		Category/ Type	Transaction ID : SB17.8223 [MEMO ITEM]
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014		
Mailing Address 6599 COLLINS DRIVE			Amount of Each Disbursement this Period 64.26		
City MOORPARK	State CA	Zip Code 93021	Transaction ID : SB17.8239 [MEMO ITEM]		
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) B. SHELL			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014		
Mailing Address 6599 COLLINS DRIVE			Amount of Each Disbursement this Period 54.26		
City MOORPARK	State CA	Zip Code 93021	Transaction ID : SB17.8240 [MEMO ITEM]		
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) C. SHELL			Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2014		
Mailing Address 24301 VALENCIA BLVD.			Amount of Each Disbursement this Period 61.64		
City VALENCIA	State CA	Zip Code 91355	Transaction ID : SB17.8241 [MEMO ITEM]		
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014
Mailing Address 3820 WEST SIERRA		Amount of Each Disbursement this Period 52.53
City ACTON State CA Zip Code 93510	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8247 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 50.00
City MOORPARK State CA Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8258 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 50.00
City MOORPARK State CA Zip Code 93021	Purpose of Disbursement TRAVEL FUEL (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8280 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 50.00
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL FUEL (WANGSAPORN SB17.8040)		Transaction ID : SB17.8283
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 23502 NEWHALL AVE		Amount of Each Disbursement this Period 56.07
City SANTA CLARITA	State CA Zip Code 91321	
Purpose of Disbursement TRAVEL: FUEL (CHASE CREDIT CARD SB17.8037)		Transaction ID : SB17.8108
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 2390 TAPO STREET		Amount of Each Disbursement this Period 45.86
City SIMI VALLEY	State CA Zip Code 93063	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8199
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 70.00
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8195
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 55.00
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8194
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 67.10
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8189
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 60.00
City MOONPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8183
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 60.00
City MOONPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8176
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 23582 NEWHALL AVE		Amount of Each Disbursement this Period 63.06
City SANTA CLARITA	State CA	
Zip Code 91321	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8178
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 80.00
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8131
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 72.25
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8162
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 70.00
City MOORPARK	State CA Zip Code 93021	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)		Transaction ID : SB17.8152
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM]
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 127 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 50.00
City MOORPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8147
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 60.00
City MOORPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8166
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 50.00
City MOORPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8141
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELL		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 6599 COLLINS DRIVE		Amount of Each Disbursement this Period 80.00
City MOORPARK	State CA	
Zip Code 93021	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8042)	Transaction ID : SB17.8132
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. SILVER CAB		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 2014 5TH STREET NE		Amount of Each Disbursement this Period 11.36
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17 8037)	Transaction ID : SB17.8125
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SOUTHWEST AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014
Mailing Address 2702 LOVE FIELD DR.		Amount of Each Disbursement this Period 262.00
City DALLAS	State TX	
Zip Code 75235	Purpose of Disbursement TRAVEL: AIR (WANGSAPORN SB17.8040)	Transaction ID : SB17.8259
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SOUTHWEST AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 2702 LOVE FIELD DR.			Amount of Each Disbursement this Period 353.00
City DALLAS	State TX	Zip Code 75235	
Purpose of Disbursement TRAVEL: AIR (WANGSAPORN SB17.8042)		Category/ Type	Transaction ID : SB17.8191
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM]
State: District:			

Full Name (Last, First, Middle Initial) B. SPARKLETTS			Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX 660579			Amount of Each Disbursement this Period 83.30
City DALLAS	State TX	Zip Code 75266-0579	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.8077
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. SPARKLETTS			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address PO BOX 660579			Amount of Each Disbursement this Period 36.60
City DALLAS	State TX	Zip Code 75266-0579	
Purpose of Disbursement UTILITIES		Category/ Type	Transaction ID : SB17.8078
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	119.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2014
Mailing Address 3660 COLORADO BLVD		Amount of Each Disbursement this Period 7.05
City PASADENA State CA Zip Code 91006	Purpose of Disbursement OFFICE SUPPLIES (WANGSAPORN SB17.8040)	
Candidate Name	Category/Type	Transaction ID : SB17.8252 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 25570 N. OLD ROAD		Amount of Each Disbursement this Period 217.99
City VALENCIA State CA Zip Code 91355	Purpose of Disbursement OFFICE SUPPLIES (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8150 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. STAPLES		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 25570 N. OLD ROAD		Amount of Each Disbursement this Period 11.98
City VALENCIA State CA Zip Code 91355	Purpose of Disbursement OFFICE SUPPLIES (WANGSAPORN SB17.8042)	
Candidate Name	Category/Type	Transaction ID : SB17.8151 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 131 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STARBUCK'S		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 25912 MCBEAN PKWY		Amount of Each Disbursement this Period 5.90
City VALENCIA	State CA Zip Code 91355	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042)		Transaction ID : SB17.8171
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. SUN CAB		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014
Mailing Address 1029 NEW JERSEY AVE. SE		Amount of Each Disbursement this Period 12.53
City WASHINGTON	State DC Zip Code 20003	
Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17 8037)		Transaction ID : SB17.8127
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. THE CLIFFS RESORT		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2014
Mailing Address 2757 SHELL BEACH ROAD		Amount of Each Disbursement this Period 512.18
City PISMO BEACH	State CA Zip Code 93449	
Purpose of Disbursement TRAVEL: LODGING (WANGSAPORN SB17.8040)		Transaction ID : SB17.8225
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 132 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE JUSTIN COMPANY			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 1130 ROBERTSON WAY			Amount of Each Disbursement this Period 3870.59	
City SACRAMENTO	State CA	Zip Code 95818	Transaction ID : SB17.8079	
Purpose of Disbursement PRINTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. THE PROSPER GROUP			Date of Disbursement M M / D D / Y Y Y Y 09 / 10 / 2014	
Mailing Address 435 EAST MAIN STREET STE 250			Amount of Each Disbursement this Period 562.73	
City GREENWOOD	State IN	Zip Code 46143	Transaction ID : SB17.8080	
Purpose of Disbursement DIGITAL CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. THE RUSTEN HOUSE			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 43953 15TH ST W			Amount of Each Disbursement this Period 64.79	
City LANCASTER	State CA	Zip Code 93534	Transaction ID : SB17.8135	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8042).		Category/ Type		
Candidate Name			[MEMO ITEM]	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	4433.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 133 OF 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 122-A E. FOOTHILL BLVVD.		Amount of Each Disbursement this Period 39.87
City ARCADIA	State CA	
Zip Code 91006	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8106)	Transaction ID : SB17.8212
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 122-A E. FOOTHILL BLVVD.		Amount of Each Disbursement this Period 39.87
City ARCADIA	State CA	
Zip Code 91006	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	Transaction ID : SB17.8217
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 122-A E. FOOTHILL BLVVD.		Amount of Each Disbursement this Period 39.87
City ARCADIA	State CA	
Zip Code 91006	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8040)	Transaction ID : SB17.8231
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 2828 COCHRAN STREET		Amount of Each Disbursement this Period 44.44
City SIMI VALLEY	State CA	
Zip Code 93065	Purpose of Disbursement DELIVERY (WANGSAPORN SB17.8042)	Transaction ID : SB17.8197
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 46.58
City GRAND RAPIDS	State MI	
Zip Code 49503	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.8081
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 75.88
City GRAND RAPIDS	State MI	
Zip Code 49503	Purpose of Disbursement MERCHANT FEES	Transaction ID : SB17.8082
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	122.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 49.50 Transaction ID : SB17.8083
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 48.14 Transaction ID : SB17.8084
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 08 / 11 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 126.44 Transaction ID : SB17.8085
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	224.08
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 141.30 Transaction ID : SB17.8086
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 162.68 Transaction ID : SB17.8087
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 429.74 Transaction ID : SB17.8088
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	733.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 137 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 308.68 Transaction ID : SB17.8089
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 242.96 Transaction ID : SB17.8090
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 926.96 Transaction ID : SB17.8091
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1478.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRANSAXT		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 190 MONROE AVE, SUITE 500		Amount of Each Disbursement this Period 451.06 Transaction ID : SB17.8092
City GRAND RAPIDS State MI Zip Code 49503	Purpose of Disbursement MERCHANT FEES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. U.A. PROPERTY MANAGEMENT		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 22916 LYONS AVENUE #1A		Amount of Each Disbursement this Period 1265.00 Transaction ID : SB17.8097
City SANTA CLARITA State CA Zip Code 91321	Purpose of Disbursement RENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. U.A. PROPERTY MANAGEMENT		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address 22916 LYONS AVENUE #1A		Amount of Each Disbursement this Period 1265.00 Transaction ID : SB17.8098
City SANTA CLARITA State CA Zip Code 91321	Purpose of Disbursement RENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2981.06
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 139 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

A. U.A. PROPERTY MANAGEMENT

Full Name (Last, First, Middle Initial)
Mailing Address 22916 LYONS AVENUE #1A

City SANTA CLARITA State CA Zip Code 91321

Purpose of Disbursement RENT

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 03 / 2014

Amount of Each Disbursement this Period: 1265.00

Transaction ID : SB17.8099

B. UBER

Full Name (Last, First, Middle Initial)
Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (WANGSAPORN SB17.8040)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 24 / 2014

Amount of Each Disbursement this Period: 5.32

Transaction ID : SB17.8282

[MEMO ITEM]

C. UBER

Full Name (Last, First, Middle Initial)
Mailing Address 1455 MARKET STREET

City SAN FRANCISCO State CA Zip Code 94103

Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (WANGSAPORN SB17.8040)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 25 / 2014

Amount of Each Disbursement this Period: 10.00

Transaction ID : SB17.8284

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 1265.00

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

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 1455 MARKET STREET		Amount of Each Disbursement this Period 5.72
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (WANGSAPORN SB17.8040)	Transaction ID : SB17.8285
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. UBER		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 1455 MARKET STREET		Amount of Each Disbursement this Period 4.94
City SAN FRANCISCO	State CA	
Zip Code 94103	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (WANGSAPORN SB17.8040)	Transaction ID : SB17.8286
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. USPS		Date of Disbursement MM / DD / YYYY 06 / 15 / 2014
Mailing Address 61 S BALDWIN AVE		Amount of Each Disbursement this Period 8.60
City SIERRA MADRE	State CA	
Zip Code 91024	Purpose of Disbursement POSTAGE (WANGSAPORN SB17.8040)	Transaction ID : SB17.8245
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VALENCIA CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2014
Mailing Address 24137 LYONS AVE.		Amount of Each Disbursement this Period 50.14
City NEWHALL	State CA	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8106)		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) B. VALENCIA CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 24137 LYONS AVE.		Amount of Each Disbursement this Period 53.64
City NEWHALL	State CA	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8106)		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) C. VALENCIA CHEVRON		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 24137 LYONS AVE.		Amount of Each Disbursement this Period 62.17
City NEWHALL	State CA	
Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VALENCIA CHEVRON		Date of Disbursement MM / DD / YYYY 06 / 09 / 2014
Mailing Address 24137 LYONS AVE.		Amount of Each Disbursement this Period 60.40
City NEWHALL	State CA	
Zip Code 91321	Purpose of Disbursement TRAVEL: FUEL (WANGSAPORN SB17.8040)	Transaction ID : SB17.8232
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. VENTURA COUNTY ELECTIONS DIVISION		Date of Disbursement MM / DD / YYYY 08 / 06 / 2014
Mailing Address 800 SOUTH VICTORIA AVENUE		Amount of Each Disbursement this Period 1300.00
City VENTURA	State CA	
Zip Code 93009	Purpose of Disbursement FILING FEE	Transaction ID : SB17.8101
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement MM / DD / YYYY 05 / 31 / 2014
Mailing Address PO BOX 660108		Amount of Each Disbursement this Period 81.02
City DALLAS	State TX	
Zip Code 75266	Purpose of Disbursement WIRELESS PHONE SERVICE (WANGSAPORN SB17.8106)	Transaction ID : SB17.8202
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 143 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2014
Mailing Address PO BOX 660108		Amount of Each Disbursement this Period 215.59
City DALLAS State TX Zip Code 75266	Purpose of Disbursement UTILITIES (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8274 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address PO BOX 660108		Amount of Each Disbursement this Period 237.05
City DALLAS State TX Zip Code 75266	Purpose of Disbursement OFFICE EQUIPMENT (WANGSAPORN SB17.8042)	
Candidate Name		Transaction ID : SB17.8142 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. VIETNAM VETERAND OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO BOX 91323		Amount of Each Disbursement this Period 100.00
City PASADENA State CA Zip Code 91109	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	
Candidate Name		Transaction ID : SB17.8234 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 144 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VIETNAM VETERAND OF AMERICA		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address PO BOX 91323		Amount of Each Disbursement this Period 98.00
City PASADENA State CA Zip Code 91109	Purpose of Disbursement EVENT REGISTRATION FEE (WANGSAPORN SB17.8040)	Transaction ID : SB17.8235
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VIP CAB		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 2606 BLADENSBURG ROAD, NE		Amount of Each Disbursement this Period 9.20
City WASHINGTON State DC Zip Code 20018	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SR17.8037)	Transaction ID : SB17.8109
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VIP CAB		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 2606 BLADENSBURG ROAD, NE		Amount of Each Disbursement this Period 9.89
City WASHINGTON State DC Zip Code 20018	Purpose of Disbursement TRAVEL: GROUND TRANSPORTATION (CHASE CREDIT CARD SB17.8037)	Transaction ID : SB17.8122
Candidate Name	Category/Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 149			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VIRGIN AMERICA		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 555 AIRPORT BLVD., SUITE 200		Amount of Each Disbursement this Period 1928.00
City BURLINGAME State CA Zip Code 94010	Purpose of Disbursement TRAVEL: AIR (CHASE CREDIT CARD SB17.8037)	
Candidate Name	Category/Type	Transaction ID : SB17.8130 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VIRGIN AMERICA		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 555 AIRPORT BLVD., SUITE 200		Amount of Each Disbursement this Period 50.00
City BURLINGAME State CA Zip Code 94010	Purpose of Disbursement TRAVEL: FEE (CHASE CREDIT CARD SB17.8037)	
Candidate Name	Category/Type	Transaction ID : SB17.8112 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VISTEVA		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 9877 CHAPMAN AVE. #D192		Amount of Each Disbursement this Period 45.00
City GARDEN GROVE State CA Zip Code 92841	Purpose of Disbursement NETWORK SERVICE & SUPPORT	
Candidate Name	Category/Type	Transaction ID : SB17.8102
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	45.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. VONAGE BUSINESS SOLUTIONS

Mailing Address 23 MAIN STREET

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement OFFICE PHONES (WANGSAPORN SB17.8040)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 21 / 2014

Amount of Each Disbursement this Period: 80.60

Transaction ID : SB17.8272

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. VONAGE BUSINESS SOLUTIONS

Mailing Address 23 MAIN STREET

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement OFFICE PHONES (WANGSAPORN SB17.8040)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 21 / 2014

Amount of Each Disbursement this Period: 103.23

Transaction ID : SB17.8275

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. VONAGE BUSINESS SOLUTIONS

Mailing Address 23 MAIN STREET

City HOLMDEL State NJ Zip Code 07733

Purpose of Disbursement OFFICE PHONES (WANGSAPORN SB17.8042)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 21 / 2014

Amount of Each Disbursement this Period: 116.92

Transaction ID : SB17.8160

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 147 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 255 COCHRAN ST.		Amount of Each Disbursement this Period 10.77
City SIMI VALLEY	State CA	
Zip Code 93065	Purpose of Disbursement OFFICE SUPPLIES (WANGSAPORN SB17.8040)	Transaction ID : SB17.8269
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. CHRIS WANGSAPORN		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO BOX283		Amount of Each Disbursement this Period 4000.00
City SIERRA MADRE	State CA	
Zip Code 91025	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.8038
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CHRIS WANGSAPORN		Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2014
Mailing Address PO BOX283		Amount of Each Disbursement this Period 4000.00
City SIERRA MADRE	State CA	
Zip Code 91025	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.8039
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (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 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHRIS WANGSAPORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014	
Mailing Address PO BOX283			Amount of Each Disbursement this Period 6430.69	
City SIERRA MADRE	State CA	Zip Code 91025	Transaction ID : SB17.8040	
Purpose of Disbursement REIMBURSEMENT: SEE MEMOS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CHRIS WANGSAPORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014	
Mailing Address PO BOX283			Amount of Each Disbursement this Period 502.92	
City SIERRA MADRE	State CA	Zip Code 91025	Transaction ID : SB17.8106	
Purpose of Disbursement REIMBURSEMENT: SEE MEMOS BELOW		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CHRIS WANGSAPORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address PO BOX283			Amount of Each Disbursement this Period 4000.00	
City SIERRA MADRE	State CA	Zip Code 91025	Transaction ID : SB17.8041	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	10933.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 149	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STRICKLAND FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHRIS WANGSAPORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address PO BOX283			Amount of Each Disbursement this Period 3490.20	
City SIERRA MADRE	State CA	Zip Code 91025	Transaction ID : SB17.8042	
Purpose of Disbursement REIMBURSEMENT: SEE MEMOS		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. YARD HOUSE			Date of Disbursement M M / D D / Y Y Y Y 06 / 19 / 2014	
Mailing Address 1247 RANCHO VISTA BLVD.			Amount of Each Disbursement this Period 88.56	
City PALMDALE	State CA	Zip Code 93551	Transaction ID : SB17.8260	
Purpose of Disbursement MEETING EXPENSE: MEALS (WANGSAPORN SB17.8040)		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" 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).....	3490.20
TOTAL This Period (last page this line number only).....	176854.51