

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

Tetalman for Congress

ADDRESS (number and street)

1531 Grand Avenue

Suite D

Check if different than previously reported. (ACC)

San Marcos

CA

92078

2. FEC IDENTIFICATION NUMBER

C C00500975

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

49

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

11

06

2012

in the State of

CA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period

10

01

2012

through

10

17

2012

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

Type or Print Name of Treasurer Xavier Martinez

Signature of Treasurer Xavier Martinez

[Electronically Filed]

Date

01

17

2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Tetelman 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))....	13707.00	99664.32
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13707.00	99664.32
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	24956.15	91378.65
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	410.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	24956.15	90968.65
8. Cash on Hand at Close of Reporting Period (from Line 27).....	21545.67	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	13081.21	

**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

**Tetalman for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4825.00	40614.00
(ii) Unitemized.....	7882.00	54551.32
(iii) TOTAL of contributions from individuals ▶	12707.00	95165.32
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	4499.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13707.00	99664.32
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	13000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	13000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	410.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	13707.00	113074.32

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24956.15	91378.65
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	150.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	24956.15	91528.65

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	32794.82
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13707.00
25. SUBTOTAL (add Line 23 and Line 24).....	46501.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24956.15
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	21545.67

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

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

FOR LINE NUMBER: PAGE 5 OF 39  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     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)  
**Tetalman for Congress**

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

Mailing Address 1 Camino Lozano

City San Clemente State CA Zip Code 92673

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.6815**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
47005.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.6815.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 1544 Burgundy Road

City Encinitas State CA Zip Code 92024

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

Name of Employer Nordson Occupation Business Development

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : SA11AI.6760**

Amount of Each Receipt this Period  
250.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
43435.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012

**Transaction ID : SA11AI.6760.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 1630 Burgundy Road

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
None Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2012

**Transaction ID : SA11AI.6755**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
42163.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 06 / 2012

**Transaction ID : SA11AI.6755.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 7919 Via Ensenada

City Carlsbad State CA Zip Code 92009

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

Name of Employer Retired Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **890.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : SA11AI.6752**

Amount of Each Receipt this Period  
**225.00**

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **41013.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2012

**Transaction ID : SA11AI.6752.0**

Amount of Each Receipt this Period  
**225.00**

**[MEMO ITEM]**

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

Mailing Address 900 N. Cleveland Street Spc 157H

City Oceanside State CA Zip Code 92054

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : SA11AI.6699**

Amount of Each Receipt this Period  
**100.00**

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

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

**325.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 901 D Caminito Madrigal

City Carlsbad State CA Zip Code 92011

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : SA11AI.6628**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1206 Barbara Drive

City Vista State CA Zip Code 92084

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

Name of Employer SAIC Occupation Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
920.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11AI.6744**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
41413.65

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11AI.6744.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

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

200.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 1206 Barbara Drive

City Vista State CA Zip Code 92084

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

Name of Employer SAIC Occupation Software Analyst

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1170.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SA11AI.6800**

Amount of Each Receipt this Period  
250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
47555.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SA11AI.6800.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 7480 Avenida De Palais

City Carlsbad State CA Zip Code 92009

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

**Transaction ID : SA11AI.6827**

Amount of Each Receipt this Period  
50.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
46555.65

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 16 2012

**Transaction ID : SA11AI.6827.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

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

Mailing Address 1068 Arden Drive

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 16 2012

**Transaction ID : SA11AI.6677**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 34092 Violet Lantern Suite 200

City State Zip Code  
Dana Point CA 92629

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

Name of Employer Occupation  
Attorney Paul Darryl, Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 17 2012

**Transaction ID : SA11AI.6798**

Amount of Each Receipt this Period  
250.00

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 11 OF 39  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
47255.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.6798.0**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**

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

Mailing Address 2148Encinitas Blvd #110

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
Sea Coast Exclusive Properties Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11AI.6796**

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
46005.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11AI.6796.0**

Amount of Each Receipt this Period  
500.00

**[MEMO ITEM]**

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

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

500.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 12 OF 39

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

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

Mailing Address 760 E. Solana Circle

City Solana Beach State CA Zip Code 92075

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

Name of Employer VA Medical Center Occupation Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012

**Transaction ID : SA11AI.6756**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 42413.65

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012

**Transaction ID : SA11AI.6756.0**

Amount of Each Receipt this Period  
 250.00

**[MEMO ITEM]**

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

Mailing Address 4748 Agora Way

City Oceanside State CA Zip Code 92056

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

Name of Employer None Occupation None

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 250.00

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

**Transaction ID : SA11AI.6765**

Amount of Each Receipt this Period  
 100.00

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

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

350.00

**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 39
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 12 / 2012
Mailing Address P.O. BOX 382110		<b>Transaction ID : SA11AI.6765.0</b>
City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. <b>C</b> C00401224	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 43835.65	

Full Name (Last, First, Middle Initial) <b>Nora Jaffe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2012
Mailing Address 2424 Ellentown Road		<b>Transaction ID : SA11AI.6801</b>
City La Jolla	State CA	Zip Code 92037
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer None	Occupation None	<b>[MEMO ITEM]</b>
Receipt For: 2012 <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) <b>ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2012
Mailing Address P.O. BOX 382110		<b>Transaction ID : SA11AI.6801.0</b>
City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. <b>C</b> C00401224	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 48255.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> 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 14 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 3201 Mesa Drive

City State Zip Code  
Oceanside CA 92054

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012

**Transaction ID : SA11AI.6635**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4098 Manchester

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
Kim MacConnel, Artist Artist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 11 / 2012

**Transaction ID : SA11AI.6642**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 385 W Onwentsia Road

City State Zip Code  
Lake Forrest IL 60045

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

Name of Employer Occupation  
Woodland Foods Business Owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 05 / 2012

**Transaction ID : SA11AI.6753**

Amount of Each Receipt this Period  
250.00

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 39
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2012
Mailing Address P.O. BOX 382110		<b>Transaction ID : SA11AI.6753.0</b>
City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 41663.65	

Full Name (Last, First, Middle Initial) <b>George Olsher</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address P.O. Box 3485		<b>Transaction ID : SA11AI.6807</b>
City Rancho Santa Fe	State CA	Zip Code 92067
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation None	<b>[MEMO ITEM]</b>
Retired	Election Cycle-to-Date 436.00	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 16 / 2012
Mailing Address P.O. BOX 382110		<b>Transaction ID : SA11AI.6807.0</b>
City CAMBRIDGE	State MA	Zip Code 02238
FEC ID number of contributing federal political committee. C C00401224	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation	<b>[MEMO ITEM]</b>
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 46105.65	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> 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 39
	<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)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Arnold Rosenberg</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012	
Mailing Address 1860 Avenida Mimosa		<b>Transaction ID : SA11AI.6762</b>	
City Encinitas	State CA	Zip Code 92024	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Thomas Jefferson Law School	Occupation Law Professor		Amount of Each Receipt this Period 249.00
Receipt For: 2012 <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>B. ACTBLUE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 09 / 2012	
Mailing Address P.O. BOX 382110		<b>Transaction ID : SA11AI.6762.0</b>	
City CAMBRIDGE	State MA	Zip Code 02238	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C C00401224</b>			
Name of Employer		Occupation	
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 42960.65		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. John Rowe</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 02 / 2012	
Mailing Address P,O, Box 2387		<b>Transaction ID : SA11AI.6751</b>	
City Rancho Santa Fe	State CA	Zip Code 92067	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer John Rowe, Photographer	Occupation Photographer		Amount of Each Receipt this Period 300.00
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	300.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
40388.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2012

**Transaction ID : SA11AI.6751.0**

Amount of Each Receipt this Period  
200.00

**[MEMO ITEM]**

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

Mailing Address P.O. Box 2348

City State Zip Code  
Rancho Santa Fe CA 92067

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 08 / 2012

**Transaction ID : SA11AI.6647**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4171 Andros Way

City State Zip Code  
Oceanside CA 92056

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

Name of Employer Occupation

Information Requested Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 02 / 2012

**Transaction ID : SA11AI.6000**

Amount of Each Receipt this Period  
250.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 4171 Andros Way

City State Zip Code  
Oceanside CA 92056

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

Name of Employer Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SA11AI.6824**

Amount of Each Receipt this Period  
100.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
48705.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 17 / 2012

**Transaction ID : SA11AI.6824.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 3580 Turquoise Lane

City State Zip Code  
Oceanside CA 92056

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

Name of Employer Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

**Transaction ID : SA11AI.6697**

Amount of Each Receipt this Period  
100.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 39
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. Box 2027

City Rancho Santa Fe State CA Zip Code 92067

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11AI.6797**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **45505.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11AI.6797.0**

Amount of Each Receipt this Period  
**250.00**

**[MEMO ITEM]**

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

Mailing Address 4748 Miletus Way

City Oceanside State CA Zip Code 92054

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : SA11AI.6684**

Amount of Each Receipt this Period  
**100.00**

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

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

**350.00**

**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 39
	<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)  
**Tetalman for Congress**

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

Mailing Address 2196 Castilla Way

City Oceanside State CA Zip Code 92056

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

Name of Employer None Occupation Not Employed

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.6831**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **46805.65**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012

**Transaction ID : SA11AI.6831.0**

Amount of Each Receipt this Period  
**50.00**

**[MEMO ITEM]**

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

Mailing Address 634 Glencrest Place

City Solana Beach State CA Zip Code 92075

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

Name of Employer None Occupation Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11AI.6806**

Amount of Each Receipt this Period  
**100.00**

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

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

**150.00**

**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 39
	<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)  
**Tetalman for Congress**

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
45255.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

**Transaction ID : SA11AI.6806.0**

Amount of Each Receipt this Period  
100.00

**[MEMO ITEM]**

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

Mailing Address 748 Requeza Street

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
None Retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
299.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

**Transaction ID : SA11AI.6826**

Amount of Each Receipt this Period  
50.00

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

Mailing Address P.O. BOX 382110

City State Zip Code  
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
46405.65

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

**Transaction ID : SA11AI.6826.0**

Amount of Each Receipt this Period  
50.00

**[MEMO ITEM]**

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

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

50.00

4825.00

**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 39
	<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)  
**Tetalman for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**LSM DEMOCRATIC CLUB**

Mailing Address 912 CASSOU RD

City SAN MARCOS State CA Zip Code 92069

FEC ID number of contributing federal political committee. **C** C00459701

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012

**Transaction ID : SA11C.6709**

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Remington Abbott</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012	
Mailing Address 920 Sycamore Avenue			Amount of Each Disbursement this Period 300.00	
City Vista	State CA	Zip Code 92081	Transaction ID : SB17.6668	
Purpose of Disbursement Yard Sign Placement		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Act Blue Technologies</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2012	
Mailing Address 14 Arrow Street Suite 11			Amount of Each Disbursement this Period 127.40	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.6849	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Act Blue Technologies</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2012	
Mailing Address 14 Arrow Street Suite 11			Amount of Each Disbursement this Period 84.88	
City Cambridge	State MA	Zip Code 02138	Transaction ID : SB17.6847	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	512.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Act Blue Technologies</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 14 Arrow Street Suite 11		Amount of Each Disbursement this Period 165.66 <b>Transaction ID : SB17.6848</b>
City Cambridge	State MA	
Zip Code 02138	Purpose of Disbursement Credit Card Processing Fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. California Latino Voters' Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2012
Mailing Address 930 Colorado Blvd Bldg 2		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.5970</b>
City Los Angeles	State CA	
Zip Code 90041	Purpose of Disbursement Advertising - Voter Guide	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. California Premier Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 265.70 <b>Transaction ID : SB17.6618</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Printing	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	831.36
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Premier Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 425.61 <b>Transaction ID : SB17.6619</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Bumper Stickers	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. California Premier Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 213.54 <b>Transaction ID : SB17.6620</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Robo Calls	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. California Premier Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 2173 Salk Avenue Suite 250		Amount of Each Disbursement this Period 245.45 <b>Transaction ID : SB17.6621</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Robo Calls	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	884.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 39			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. California Property Brokers, LTD</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2012
Mailing Address 3324 Seacrest Drive			Amount of Each Disbursement this Period 1050.00 <b>Transaction ID : SB17.5981</b>
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Office Rent	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Carlsbad Village Theater</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2012
Mailing Address 390 Oak Avenue			Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.6024</b>
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Venue Rental	Candidate Name		Category/ Type 007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Carlsbad Village Theater</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 390 Oak Avenue			Amount of Each Disbursement this Period 550.00 <b>Transaction ID : SB17.6625</b>
City Carlsbad	State CA	Zip Code 92008	
Purpose of Disbursement Fundraising Event: Venue Rental	Candidate Name		Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 39	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mary Elizabeth Deery</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 17 / 2012</b>
Mailing Address 418 Shadow Lane		Amount of Each Disbursement this Period <b>655.00</b>
City Vista State CA Zip Code 92084	Purpose of Disbursement Fundraising Fees	<b>Transaction ID : SB17.6665</b>
Candidate Name	Category/Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charles Dodson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2012</b>
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period <b>500.00</b>
City Carlsbad State CA Zip Code 92008	Purpose of Disbursement Campaign Management Services	<b>Transaction ID : SB17.5976</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Dodson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 04 / 2012</b>
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period <b>500.00</b>
City Carlsbad State CA Zip Code 92008	Purpose of Disbursement Campaign Management Services	<b>Transaction ID : SB17.5978</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1655.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 39		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Charles Dodson</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 2315 Via Francisca Unit M		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.6661</b>
City Carlsbad	State CA	
Zip Code 92008	Purpose of Disbursement Campaign Manager Services	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Educate Your Vote G12</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 08 / 2012
Mailing Address 7904 Vista Guyaba		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : SB17.6018</b>
City Carlsbad	State CA	
Zip Code 92009	Purpose of Disbursement Slate Mailer Program	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. FedEx Office</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 15 / 2012
Mailing Address 2444 Vista Way		Amount of Each Disbursement this Period 263.99 <b>Transaction ID : SB17.7136</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Copies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2013.99
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 39		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sheila Kadah</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2012
Mailing Address 5301 Village Drive		Amount of Each Disbursement this Period 230.25 <b>Transaction ID : SB17.6021</b>
City Oceanside	State CA	
Zip Code 92057	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Molly Kelly</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2012
Mailing Address 1968 Riviera Drive		Amount of Each Disbursement this Period 430.84 <b>Transaction ID : SB17.6020</b>
City Vista	State CA	
Zip Code 92084	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Molly Kelly</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 1968 Riviera Drive		Amount of Each Disbursement this Period 1025.00 <b>Transaction ID : SB17.6666</b>
City Vista	State CA	
Zip Code 92084	Purpose of Disbursement Fundraising Fees	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1686.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 39		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Laurie Marrelli</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 05 / 2012</b>
Mailing Address <b>12229 Carmel Vista Road</b>		Amount of Each Disbursement this Period <b>75.00</b> <b>Transaction ID : SB17.6026</b>
City <b>San Diego</b> State <b>CA</b> Zip Code <b>92130</b>	Purpose of Disbursement <b>Website Services</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NGP Van</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 02 / 2012</b>
Mailing Address <b>1101 15th Street NW #500</b>		Amount of Each Disbursement this Period <b>550.00</b> <b>Transaction ID : SB17.7129</b>
City <b>Washington</b> State <b>DC</b> Zip Code <b>20005</b>	Purpose of Disbursement <b>Voter Contact Software</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) <b>c. North County Times</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 11 / 2012</b>
Mailing Address <b>207 E. Pennsylvania</b>		Amount of Each Disbursement this Period <b>249.06</b> <b>Transaction ID : SB17.7133</b>
City <b>Escondido</b> State <b>CA</b> Zip Code <b>92025</b>	Purpose of Disbursement <b>Advertising</b> Category/Type <b>004</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>874.06</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 39		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Morgan Simpson</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 16 / 2012</b>
Mailing Address <b>P.O. Box 82302</b>		Amount of Each Disbursement this Period <b>702.00</b>
City <b>San Diego</b>	State <b>CA</b>	Zip Code <b>92138</b>
Purpose of Disbursement <b>Fundraising Fees</b>	Category/Type <b>003</b>	
Candidate Name		<b>Transaction ID : SB17.6658</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 03 / 2012</b>
Mailing Address <b>2150 Vista Way</b>		Amount of Each Disbursement this Period <b>113.70</b>
City <b>Oceanside</b>	State <b>CA</b>	Zip Code <b>92054</b>
Purpose of Disbursement <b>Printer Ink</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : SB17.7131</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 10 / 2012</b>
Mailing Address <b>2150 Vista Way</b>		Amount of Each Disbursement this Period <b>126.93</b>
City <b>Oceanside</b>	State <b>CA</b>	Zip Code <b>92054</b>
Purpose of Disbursement <b>Postage Stamps, and Envelopes</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : SB17.6656</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>942.63</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 39
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 118.26 <b>Transaction ID : SB17.7132</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Paper and Ink	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 2150 Vista Way		Amount of Each Disbursement this Period 215.15 <b>Transaction ID : SB17.6657</b>
City Oceanside	State CA	
Zip Code 92054	Purpose of Disbursement Ink & Thank you cards	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Chelsea Stipek</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 4727 Mayflower Way		Amount of Each Disbursement this Period 330.00 <b>Transaction ID : SB17.6710</b>
City Oceanside	State CA	
Zip Code 92057	Purpose of Disbursement Fundraising Fees	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	663.41
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 39		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

**A. Tec-Knowlogy Source**

Full Name (Last, First, Middle Initial)  
Mailing Address 3511 Landsford Way

City Carlsbad State CA Zip Code 92010

Purpose of Disbursement Web Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 05 / 2012

Amount of Each Disbursement this Period: 625.00

Transaction ID : SB17.6027

Category/Type: 001

**B. Tec-Knowlogy Source**

Full Name (Last, First, Middle Initial)  
Mailing Address 3511 Landsford Way

City Carlsbad State CA Zip Code 92010

Purpose of Disbursement Web Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2012

Amount of Each Disbursement this Period: 1027.45

Transaction ID : SB17.6667

Category/Type: 001

**c. The La Jolla Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 8304 Clairemont Mesa Blvd  
Suite 213

City San Diego State CA Zip Code 92111

Purpose of Disbursement Advertising Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 17 / 2012

Amount of Each Disbursement this Period: 5450.00

Transaction ID : SB17.6659

Category/Type: 004

**SUBTOTAL** of Disbursements This Page (optional) ..... 7102.45

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 39		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2012
Mailing Address 2772 Roosevelt Street		Amount of Each Disbursement this Period 90.00
City Carlsbad	State DE	
Zip Code 92008	Purpose of Disbursement 001	<b>Transaction ID : SB17.7127</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Univision Communications</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 06 / 2012
Mailing Address 500 Frank W Burr Blvd Suite 20		Amount of Each Disbursement this Period 4260.00
City Teaneck	State NJ	
Zip Code 07666	Purpose of Disbursement Radio Advertising 004	<b>Transaction ID : SB17.6022</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Sidney Wildesmith</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 1655 Burgundy Road		Amount of Each Disbursement this Period 550.00
City Encinitas	State CA	
Zip Code 92024	Purpose of Disbursement Photography 004	<b>Transaction ID : SB17.6662</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4900.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 39	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Full Name (Last, First, Middle Initial) <b>A. Sidney Wildesmith</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2012
Mailing Address 1655 Burgundy Road		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.6663</b>
City Encinitas State CA Zip Code 92024	Purpose of Disbursement Photography Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Your Ballot Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2012
Mailing Address 15021 Ventura Blvd #530		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : SB17.6654</b>
City Sherman Oaks State CA Zip Code 91403	Purpose of Disbursement Slate Mailer Candidate Name Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	650.00
<b>TOTAL</b> This Period (last page this line number only).....	24565.87

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Tetalman for Congress** Transaction ID : **SC/10.4100**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **Jerry Tetalman** *[PERSONAL FUNDS]* Election: 2012  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
4017 Isle Drive

City State ZIP Code  
Carlsbad CA 92008

Original Amount of Loan 5000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5000.00
------------------------------------	------------------------------------	--

**TERMS**

Date Incurred M 08 / D 22 / Y 2011	Date Due M / D / Y 12/31/2012	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---------------------------------------	----------------------------------	-------------------------------	---

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	[ ] 5000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	[ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

Transaction ID : **SC/10.6590**

LOAN SOURCE Full Name (Last, First, Middle Initial)

**Jerry Tetalman**

**[PERSONAL FUNDS]**

Election: 2012

Primary  
 General  
 Other (specify) ▼

Mailing Address  
4017 Isle Drive

City State ZIP Code  
Carlsbad CA 92008

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period  
8000.00 0.00 8000.00

**TERMS**

Date Incurred Date Due Interest Rate Secured:  
08 / 16 / 2012 M M / D D / 11/30/12 0.00 % (apr)  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 8000.00  
**TOTALS** This Period (last page in this line only)..... ▶ 13000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

NAME OF COMMITTEE (In Full)  
**Tetalman for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>AT&amp;T</b>	Nature of Debt (Purpose): Telephone Service
Mailing Address P.O. Box 5014	
City State Zip Code Carol Stream IL 60197	

Outstanding Balance Beginning This Period 40.00	<b>Transaction ID : SD10.6030</b>	
Amount Incurred This Period 0.00	Payment This Period 40.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Charles Dodson</b>	Nature of Debt (Purpose): Campaign Management Services
Mailing Address 2315 Via Francisca Unit M	
City State Zip Code Carlsbad CA 92008	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID : SD10.5973</b>	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>San Diego Gas &amp; Electric (S.D.G.&amp;E.)</b>	Nature of Debt (Purpose): Office Utilities
Mailing Address P.O. Box 25111	
City State Zip Code Santa Ana CA 92799	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.6717</b>	
Amount Incurred This Period 81.21	Payment This Period 0.00	Outstanding Balance at Close of This Period 81.21

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	81.21
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**Tetalman for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chelsea Stipek</b>	Nature of Debt (Purpose): Fundraising Fees
Mailing Address 4727 Mayflower Way	
City State Zip Code Oceanside CA 92057	

Outstanding Balance Beginning This Period <input style="width:100%; text-align: right;" type="text" value="112.50"/>	<b>Transaction ID : SD10.5974</b>	
Amount Incurred This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>	Payment This Period <input style="width:100%; text-align: right;" type="text" value="112.50"/>	Outstanding Balance at Close of This Period <input style="width:100%; text-align: right;" type="text" value="0.00"/>

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

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>		
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>

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

Outstanding Balance Beginning This Period <input style="width:100%;" type="text"/>		
Amount Incurred This Period <input style="width:100%;" type="text"/>	Payment This Period <input style="width:100%;" type="text"/>	Outstanding Balance at Close of This Period <input style="width:100%;" type="text"/>

<b>1) SUBTOTALS</b> This Period This Page (optional) ..... ▶	<input style="width:100%; text-align: right;" type="text" value="0.00"/>
<b>2) TOTALS</b> This Period (last page this line number only) ..... ▶	<input style="width:100%; text-align: right;" type="text" value="81.21"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only)..... ▶	<input style="width:100%; text-align: right;" type="text" value="13000.00"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input style="width:100%; text-align: right;" type="text" value="13081.21"/>