

# 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

Walters for Congress

ADDRESS (number and street) c/o 8001 Irvine Center Drive, #400

Check if different than previously reported. (ACC) Irvine CA 92618

2. **FEC IDENTIFICATION NUMBER** ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00546853 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A) STATE ▼ DISTRICT  
CA 45

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)

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 06 / 03 / 2014 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 04 / 01 / 2014 through 05 / 14 / 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 Jen Slater

Signature of Treasurer Jen Slater [Electronically Filed] Date 05 / 21 / 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.

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Walters for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	96487.78	869292.57
(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)).....	96487.78	869292.57
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	265283.63	647368.04
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	265283.63	647367.69
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	165928.73	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	117095.13	

**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

**Walters 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).....	63228.78	624683.78
(ii) Unitemized.....	1760.00	14253.00
(iii) TOTAL of contributions from individuals ▶	64988.78	638936.78
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	31499.00	230355.79
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	96487.78	869292.57
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.35
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	3.85
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	96487.78	869296.77

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	265283.63	647368.04
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	56000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	265283.63	703368.04

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	334724.58
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	96487.78
25. SUBTOTAL (add Line 23 and Line 24).....	431212.36
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	265283.63
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	165928.73

**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 58
	<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)  
**Walters for Congress**

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

Mailing Address 11611 San Vicente Blvd, #1000

City Los Angeles State CA Zip Code 90049

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

Name of Employer Vintage Capital Group Occupation Head of Investment Firm

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : INCA1164**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 11 Skyridge

City Newport Coast State CA Zip Code 92657

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

Name of Employer CJ Segerstrom & Sons Occupation Managing Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1196**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 6220 E Teton Ave

City Orange State CA Zip Code 92867

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

Name of Employer CJ Segerstrom Occupation CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1197**

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 6 OF 58
	<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)  
**Walters for Congress**

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

Mailing Address 2301 San Joaquin Hills Road

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1194**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 21861 Via del Lago

City Trabuco Canyon State CA Zip Code 92679

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

Name of Employer Microsemi Occupation CFP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1195**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address PO Box 1377

City San Juan Capistran State CA Zip Code 92693

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1198**

Amount of Each Receipt this Period  
 2000.00

**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 7 OF 58
	<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)  
**Walters for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Anton D. Segerstrom**

Mailing Address PO Box 25

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Segerstrom & Sons Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 18 / 2014

**Transaction ID : INCA1193**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 44 Tortuga Cay

City Aliso Viejo State CA Zip Code 92656

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2014

**Transaction ID : INCA1200**

Amount of Each Receipt this Period  
 450.00

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

Mailing Address 44 Tortuga Cay

City Aliso Viejo State CA Zip Code 92656

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

Name of Employer None Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 19 / 2014

**Transaction ID : INCA1199**

Amount of Each Receipt this Period  
 550.00

**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 8 OF 58
	<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)  
**Walters for Congress**

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

Mailing Address 26182 Glen Canyon Dr

City Laguna Hills State CA Zip Code 92653

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

Name of Employer Western Federal Credit Union Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : INCA1205**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1701 E St Andrew Place

City Santa Ana State CA Zip Code 92705

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

Name of Employer Orange County's Credit Union Occupation President and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 22 / 2014

**Transaction ID : INCA1204**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 3 Via Arribo

City Rancho Sta Margari State CA Zip Code 92688

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

Name of Employer NuVision Federal Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 / 25 / 2014

**Transaction ID : INCA1231**

Amount of Each Receipt this Period  
 1700.00

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

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

4200.00



**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 58
	<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)  
**Walters for Congress**

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

Mailing Address 3 Via Arribo

City Rancho Sta Margari State CA Zip Code 92688

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

Name of Employer NuVision Federal Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2279.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 02 / 2014**

**Transaction ID : NONA1281**

Amount of Each Receipt this Period  
**79.78**

Inkind Reception Refreshments

**B.** Full Name (Last, First, Middle Initial)  
**Barona Band of Mission Indians**

Mailing Address 1095 Barona Road

City Lakeside State CA Zip Code 92040

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  
**05 / 02 / 2014**

**Transaction ID : INCA1262**

Amount of Each Receipt this Period  
**2600.00**

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

Mailing Address 3199 E Airport Loop Dr, Ste E

City Costa Mesa State CA Zip Code 92626

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

Name of Employer Howard Chastain Occupation Investor

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  
**05 / 02 / 2014**

**Transaction ID : INCA1254**

Amount of Each Receipt this Period  
**1000.00**

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

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

**3679.78**

**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 58
	<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)  
**Walters for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fieldstead & Company**

Mailing Address PO Box 19599

City Irvine State CA Zip Code 92623

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

Name of Employer Howard Ahmanson/Owner Occupation Sole Proprietorship

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : INCA1250**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address PO Box 19599

City Irvine State CA Zip Code 92623

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

Name of Employer Fieldstead & Company Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : IDTA5**

Amount of Each Receipt this Period  
 2600.00

**[MEMO ITEM]**

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

Mailing Address 8 Executive Circle

City Irvine State CA Zip Code 92614

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

Name of Employer Western National Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : INCA1251**

Amount of Each Receipt this Period  
 2600.00

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

**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 11 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

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

Mailing Address 13424 San Antonio Avenue

City State Zip Code  
Chino CA 91710

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

Name of Employer Occupation  
Aero Flite Trailers Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : INCA1258**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 3039 E First Street

City State Zip Code  
Long Beach CA 90803

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

Name of Employer Occupation  
Aviation Repair Solutions President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
249.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 02 / 2014

**Transaction ID : INCA1259**

Amount of Each Receipt this Period  
249.00

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

Mailing Address 2802 Dow Ave

City State Zip Code  
Tustin CA 92780

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

Name of Employer Occupation  
Vititech Nutrition Sciences, Inc 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  
 05 / 02 / 2014

**Transaction ID : INCA1260**

Amount of Each Receipt this Period  
500.00

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

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

999.00

**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 12 OF 58
	<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)  
**Walters for Congress**

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

Mailing Address 10883 Oak Knoll Rd

City State Zip Code  
Ojai CA 93023

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

Name of Employer Occupation  
Oak Knoll Ranch, LLC 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  
 05 / 05 / 2014

**Transaction ID : INCA1263**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 29 Vernal Spring

City State Zip Code  
Irvine CA 92603

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

Name of Employer Occupation  
Katten Muchin Rosenman, LLP 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  
 05 / 06 / 2014

**Transaction ID : INCA1270**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Laguna Niguel Properties/Hon Development**

Mailing Address 27422 Portola Pkwy, #300

City State Zip Code  
Foothill Ranch CA 92610

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

Name of Employer Occupation  
Sole Proprietorship Barry Hon/Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 07 / 2014

**Transaction ID : INCA1279**

Amount of Each Receipt this Period  
2500.00

**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 13 OF 58
	<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)  
**Walters for Congress**

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

Mailing Address 27422 Portola Pkwy, #300

City State Zip Code  
Foothill Ranch CA 92610

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

Name of Employer Occupation  
Laguna Niguel Properties/Hon Developme Owner/Real Estate Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 07 / 2014

**Transaction ID : IDTA4**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**

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

Mailing Address 10650 Costello Dr

City State Zip Code  
Tustin CA 92782

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

Name of Employer Occupation  
IHI Power Services Corp Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 08 / 2014

**Transaction ID : INCA1285**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 11 Ville Franche

City State Zip Code  
Dana Point CA 92629

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

Name of Employer Occupation  
IHI Power Generation 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  
05 / 08 / 2014

**Transaction ID : INCA1284**

Amount of Each Receipt this Period  
2600.00

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

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

2850.00

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

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

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

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

**A.** Full Name (Last, First, Middle Initial)  
**Jacqueline Dupont**  
 Mailing Address 2533 Costero Magestuoso  
 City San Clemente State CA Zip Code 92673  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Dupont Residential Care, Inc Occupation President  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : INCA1296**  
 Amount of Each Receipt this Period  
 250.00

**B.** Full Name (Last, First, Middle Initial)  
**Mary Aileen Matheis**  
 Mailing Address 3 Teal  
 City Irvine State CA Zip Code 92604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Law Offices of Mary Aileen Matheis Occupation Attorney  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : INCA1292**  
 Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Frank Negri**  
 Mailing Address 1733 Brookhurst, #A3  
 City Fountain Valley State CA Zip Code 92708  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Martin Aircraft Tool Co Occupation Executive  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014  
**Transaction ID : INCA1289**  
 Amount of Each Receipt this Period  
 400.00

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

1650.00

**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 58
	<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)  
**Walters for Congress**

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

Mailing Address 2009 Las Lanos Ln

City Fullerton State CA Zip Code 92833

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

Name of Employer Polly's Inc Occupation Restaurant Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 09 / 2014

**Transaction ID : INCA1295**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 10573 W Pico Blvd, #853

City Los Angeles State CA Zip Code 90064

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

Name of Employer Bingham Consulting 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  
 05 / 09 / 2014

**Transaction ID : INCA1291**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 161 Shorecliff Rd

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer None Occupation 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  
 05 / 13 / 2014

**Transaction ID : INCA1313**

Amount of Each Receipt this Period  
1000.00

**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: PAGE 16 OF 58  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

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

Mailing Address 19266 Seabrook Ln

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 13 / 2014

**Transaction ID : INCA1311**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 20320 SW Birch St, #110

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
None 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  
 05 / 14 / 2014

**Transaction ID : INCA1316**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 2532 Dupont Dr

City State Zip Code  
Irvine CA 92612

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

Name of Employer Occupation  
The Busch Group CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1324**

Amount of Each Receipt this Period  
1000.00

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

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

3700.00



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

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

FOR LINE NUMBER: PAGE 17 OF 58  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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

**A.** Full Name (Last, First, Middle Initial)  
**Jackson J. Chen**

Mailing Address 30532 Le Port

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer China Moon Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1320**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 49 Strand Beach Dr

City Dana Point State CA Zip Code 92629

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

Name of Employer SUKUT Construction Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1327**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 1800 W Katella Ave, #400

City Orange State CA Zip Code 92867

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

Name of Employer SC Fuels Occupation President & COO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1323**

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: PAGE 18 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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

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

Mailing Address 9832 Calvin Ave

City Northridge State CA Zip Code 91324

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

Name of Employer Northwest Excavating Co, Inc Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1330**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 9832 Calvin Ave

City Northridge State CA Zip Code 91324

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

Name of Employer Northwest Excavating Co, Inc Occupation Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1331**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 360 E 1st St #303

City Tustin State CA Zip Code 92780

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

Name of Employer Robert Micone Occupation Financial Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2025.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1315**

Amount of Each Receipt this Period  
2000.00

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

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

7200.00

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

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

FOR LINE NUMBER: PAGE 19 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**Morongo Band of Mission Indians**

Mailing Address 12700 Pumarra Rd

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  
 05 / 14 / 2014

**Transaction ID : INCA1342**

Amount of Each Receipt this Period  
 1600.00

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 2311 S Pullman St

City State Zip Code  
Santa Ana CA 92705

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

Name of Employer Occupation  
Gemini Industries Inc Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1321**

Amount of Each Receipt this Period  
 2600.00

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

Mailing Address 151 Innovation Dr

City State Zip Code  
Irvine CA 92617

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

Name of Employer Occupation  
American Career College Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1343**

Amount of Each Receipt this Period  
 2600.00

Amount of Each Receipt this Period  
 5200.00

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

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

6800.00

**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 58
	<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)  
**Walters for Congress**

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

Mailing Address 151 Innovation Dr

City Irvine State CA Zip Code 92617

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

Name of Employer American Career College Occupation Executive

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  
 05 / 14 / 2014

**Transaction ID : INCA1344**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Santa Ynez Band of Mission Indians**

Mailing Address PO Box 517

City Santa Ynez State CA Zip Code 93460

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

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 Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1340**

Amount of Each Receipt this Period  
600.00

**C.** Full Name (Last, First, Middle Initial)  
**Santa Ynez Band of Mission Indians**

Mailing Address PO Box 517

City Santa Ynez State CA Zip Code 93460

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

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 Y Y  
 05 / 14 / 2014

**Transaction ID : INCA1341**

Amount of Each Receipt this Period  
400.00

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

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

3600.00

63228.78

**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 58
	<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)  
**Walters for Congress**

**A. Full Name (Last, First, Middle Initial)**  
**Pat Bates for Senate 2014**

Mailing Address 7001 Irvine Center Dr, #400

City Irvine State CA Zip Code 92618

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  
 04 / 15 / 2014

**Transaction ID : INCA1190**

Amount of Each Receipt this Period  
 999.00

**B. Full Name (Last, First, Middle Initial)**  
**MetLife, Inc Employees' PAC**

Mailing Address 1095 Avenue of the Americas

City New York State NY Zip Code 10036

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  
 04 / 21 / 2014

**Transaction ID : INCA1201**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 975 F St NW Ste 300

City Washington State DC Zip Code 20004

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  
 04 / 24 / 2014

**Transaction ID : INCA1229**

Amount of Each Receipt this Period  
 2500.00

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

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

5999.00

**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 58
	<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)  
**Walters for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Koch PAC - Koch Industries, Inc PAC**

Mailing Address 600 14th St NW, #800

City Washington State DC Zip Code 20005

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

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  
 04 / 29 / 2014

**Transaction ID : INCA1240**

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
**Anesthesia Service Medical Group Advocay Fund**

Mailing Address 7185 Navajo Road, Suite P

City San Diego State CA Zip Code 92119

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  
 05 / 02 / 2014

**Transaction ID : INCA1253**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Council of Insurance Agents & Brokers PAC**

Mailing Address 701 Pennsylvania Ave, NW #750

City Washington State DC Zip Code 20004

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

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  
 05 / 02 / 2014

**Transaction ID : INCA1252**

Amount of Each Receipt this Period  
2000.00

**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: (check only one)	PAGE 23 OF 58
	<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)  
**Walters for Congress**

**A. Kinecta Federal Credit Union Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1440 Rosecrans Avenue

City Manhattan Beach State CA Zip Code 90266

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  
 05 / 02 / 2014

**Transaction ID : INCA1261**

Amount of Each Receipt this Period  
 500.00

**B. NAA PAC - National Apartment Association PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 4300 Wilson Blvd, #400

City Arlington State VA Zip Code 22203

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  
 05 / 02 / 2014

**Transaction ID : INCA1249**

Amount of Each Receipt this Period  
 2500.00

**C. Aflac Inc PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1932 Wynnton Rd

City Columbus State GA Zip Code 31999

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  
 05 / 07 / 2014

**Transaction ID : INCA1280**

Amount of Each Receipt this Period  
 1000.00

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

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

4000.00

**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 58
	<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)  
**Walters for Congress**

**A. Title Industry PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1828 L Street, NW Suite 705

City Washington State DC Zip Code 20036

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  
 05 / 09 / 2014

**Transaction ID : INCA1298**

Amount of Each Receipt this Period  
 2500.00

**B. Schoolsfirst FCU Employees Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 3699 Wilshire Blvd, Suite 1290

City Los Angeles State CA Zip Code 90010

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  
 05 / 12 / 2014

**Transaction ID : INCA1310**

Amount of Each Receipt this Period  
 1000.00

**C. AT&T Federal PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 208 S Akard St, #2701

City Dallas State TX Zip Code 75202

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  
 05 / 13 / 2014

**Transaction ID : INCA1307**

Amount of Each Receipt this Period  
 2000.00

**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 25 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

**A.** Full Name (Last, First, Middle Initial)  
**SBA List Candidate Fund**

Mailing Address 1707 L St NW, #550

City Washington State DC Zip Code 20036

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  
 05 / 13 / 2014

**Transaction ID : INCA1312**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 1111-14th St NW Ste 1100

City Washington State DC Zip Code 20005

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  
 05 / 14 / 2014

**Transaction ID : INCA1322**

Amount of Each Receipt this Period  
 2500.00

**C.** Full Name (Last, First, Middle Initial)  
**CULAC the PAC of Credit Union National Assn**

Mailing Address 601 Pennsylvania Ave NW, S Bldg #6

City Washington State DC Zip Code 20004

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  
 05 / 14 / 2014

**Transaction ID : INCA1339**

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: (check only one)	PAGE 26 OF 58
	<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)  
**Walters for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Edward Lifesciences PAC**

Mailing Address **One Edwards Way**

City **Irvine** State **CA** Zip Code **92614**

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

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  
**05 / 14 / 2014**

**Transaction ID : INCA1328**

Amount of Each Receipt this Period  
**5000.00**

**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).....

**5000.00**

**31499.00**

**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 27 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Buchheim Properties III</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address c/o D.W.A Smith & Company, Inc. 1300 Quail Street, Suite 106		Amount of Each Disbursement this Period 3600.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Office Rent	Transaction ID : EXPB1129
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capital Campaigns, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 38 Executive Park, Suite 390		Amount of Each Disbursement this Period 7000.00
City Irvine	State CA	
Zip Code 92614	Purpose of Disbursement Fundraising Consulting Services	Transaction ID : EXPB1131
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period 5000.00
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Campaign Consulting Services	Transaction ID : EXPB1149
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	15600.00
<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 28 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period <b>396.00</b>
City Rocklin	State CA	Zip Code 95765
Purpose of Disbursement Travel & Design Costs	Category/ Type <b>001</b>	
Candidate Name	Transaction ID : <b>EXPB1147</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Misc - No Vendor Aggregating over \$200</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address		Amount of Each Disbursement this Period <b>271.00</b>
City	State	Zip Code
Purpose of Disbursement Misc Travel Costs	Category/ Type <b>001</b>	
Candidate Name	Transaction ID : <b>PDTB35EXPB1147</b>	
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:		

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial) <b>C. Southwest Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address 2702 Love Field Drive		Amount of Each Disbursement this Period <b>125.00</b>
City Dallas	State TX	Zip Code 75235
Purpose of Disbursement Airfare Costs	Category/ Type <b>001</b>	
Candidate Name	Transaction ID : <b>PDTB34EXPB1147</b>	
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:		

**[MEMO ITEM]**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>396.00</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 29 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period <b>10463.00</b>
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Outdoor Signs	<b>Transaction ID : EXPB1151</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. COGS Outdoor Signs</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address 3309 S Main Street		Amount of Each Disbursement this Period <b>10463.00</b>
City Santa Ana	State CA	
Zip Code 92707	Purpose of Disbursement Outdoor Signs	<b>Transaction ID : PDTB33EXPB1151</b>
Candidate Name	Category/Type <b>001</b>	
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)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Turnip Rose</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 02 / 2014</b>
Mailing Address 1565 Scenic Ave		Amount of Each Disbursement this Period <b>5717.73</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Event Catering & Staff Costs	<b>Transaction ID : EXPB1153</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>16180.73</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 30 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Campaign Compliance Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 8001 Irvine Center Drive, #400		Amount of Each Disbursement this Period 1472.50
City Irvine State CA Zip Code 92618	Purpose of Disbursement Financial Analyst	
Candidate Name	Category/Type 001	Transaction ID : EXPB1174
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period 563.85
City Rocklin State CA Zip Code 95765	Purpose of Disbursement Shipping & Web Ads	
Candidate Name	Category/Type 001	Transaction ID : EXPB1180
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Facebook</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address 156 University Ave		Amount of Each Disbursement this Period 207.00
City Palo Alto State CA Zip Code 94301	Purpose of Disbursement Web Ads	
Candidate Name	Category/Type 001	Transaction ID : PDTB37EXPB1180
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:		[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2036.35
<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 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2014</b>
Mailing Address Payment Center		Amount of Each Disbursement this Period <b>356.85</b>
City <b>Memphis</b>	State <b>TN</b>	Zip Code <b>38101</b>
Purpose of Disbursement Shipping Costs	<b>001</b>	<b>Transaction ID : PDTB38EXPB1180</b>
Candidate Name	Category/ Type	<b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Thomas Communications Group, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2014</b>
Mailing Address 20532 El Toro Rd, #210A		Amount of Each Disbursement this Period <b>362.50</b>
City <b>Mission Viejo</b>	State <b>CA</b>	Zip Code <b>92692</b>
Purpose of Disbursement Fundraising Consulting Services	<b>001</b>	<b>Transaction ID : EXPB1178</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Taxpayers of Orange County</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 08 / 2014</b>
Mailing Address 1914 W Orangewood Avenue #201		Amount of Each Disbursement this Period <b>2870.00</b>
City <b>Orange</b>	State <b>CA</b>	Zip Code <b>92868</b>
Purpose of Disbursement Slate Card	<b>001</b>	<b>Transaction ID : EXPB1176</b>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3232.50</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 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Fukushima Photography</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014		
Mailing Address 13672 Cypress St			Amount of Each Disbursement this Period 1821.50		
City Garden Grove	State CA	Zip Code 92843	Transaction ID : EXPB1167		
Purpose of Disbursement Photography Costs		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Gilliard Blanning &amp; Associates, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014		
Mailing Address 5701 Lonetree Blvd, #301			Amount of Each Disbursement this Period 16366.00		
City Rocklin	State CA	Zip Code 95765	Transaction ID : EXPB1166		
Purpose of Disbursement Media Buy		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. The Monaco Group</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014		
Mailing Address 1011 S Linwood Ave			Amount of Each Disbursement this Period 10969.13		
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB1172		
Purpose of Disbursement Postage Costs		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29156.63
<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 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period 2525.56
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Printing Costs Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1170</b>

Full Name (Last, First, Middle Initial) <b>B. The Prosper Group Corporation</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 435 East Main Street, #250		Amount of Each Disbursement this Period 5157.80
City Greenwood State IN Zip Code 46143	Purpose of Disbursement Telephone Equipment & Use Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1182</b>

Full Name (Last, First, Middle Initial) <b>C. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 3131 S Vaughn Way, Suite 350		Amount of Each Disbursement this Period 319.71
City Aurora State CO Zip Code 80014	Purpose of Disbursement Credit Card Processing Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1183</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8003.07
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Campaign Compliance Group, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>8001 Irvine Center Drive, #400</b>		Amount of Each Disbursement this Period <b>1250.00</b>
City <b>Irvine</b> State <b>CA</b> Zip Code <b>92618</b>	Purpose of Disbursement <b>Financial Analyst</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : EXPB1187</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cardservices</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>PO Box 94014</b>		Amount of Each Disbursement this Period <b>4543.36</b>
City <b>Palatine</b> State <b>IL</b> Zip Code <b>60094</b>	Purpose of Disbursement <b>Travel &amp; Meeting Costs</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : EXPB1185</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>PO Box 619616</b>		Amount of Each Disbursement this Period <b>1624.98</b>
City <b>Dfw Airport</b> State <b>TX</b> Zip Code <b>75626</b>	Purpose of Disbursement <b>Airfare Costs</b>	
Candidate Name	Category/Type <b>001</b>	<b>Transaction ID : PDTB47EXPB1185</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5793.36</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 35 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Hotels.com</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address Crystal City Holiday Inn		Amount of Each Disbursement this Period 1656.62
City Arlington	State VA	
Zip Code 22203	Purpose of Disbursement Lodging Costs	Transaction ID : PDTB46EXPB1185
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address P.O Box 66100		Amount of Each Disbursement this Period 978.48
City Chicago	State IL	
Zip Code 60666	Purpose of Disbursement Airfare Costs	Transaction ID : PDTB45EXPB1185
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 72.63
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Meeting Costs	Transaction ID : PDTB49EXPB1185
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address <b>4610 Fairfax Dr</b>		Amount of Each Disbursement this Period <b>89.96</b>
City <b>Arlington</b> State <b>VA</b> Zip Code <b>22203</b>	Purpose of Disbursement <b>Meeting Costs</b> <span style="border: 1px solid black; padding: 2px;">001</span>	
Candidate Name		Transaction ID : <b>PDTB48EXPB1185</b>
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:	Category/Type	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. Misc - No Vendor Aggregating over \$200</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 11 / 2014</b>
Mailing Address		Amount of Each Disbursement this Period <b>120.69</b>
City	State Zip Code	
Purpose of Disbursement <b>Misc Meeting &amp; Taxi Costs</b> <span style="border: 1px solid black; padding: 2px;">001</span>		Transaction ID : <b>PDTB50EXPB1185</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) <b>c. California Republican Taxpayers Assn</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2014</b>
Mailing Address <b>1130 Fremont Blvd, #105-115</b>		Amount of Each Disbursement this Period <b>1438.00</b>
City <b>Seaside</b> State <b>CA</b> Zip Code <b>93955</b>	Purpose of Disbursement <b>Slate Card Payment</b> <span style="border: 1px solid black; padding: 2px;">001</span>	
Candidate Name		Transaction ID : <b>EXPB1189</b>
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1438.00</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 37 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 15 / 2014</b>
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period <b>29337.00</b>
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Media Buy	<b>Transaction ID : EXPB1188</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 18 / 2014</b>
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period <b>10622.58</b>
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Postage Costs	<b>Transaction ID : EXPB1192</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Budget Watchdogs Newsletter</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 23 / 2014</b>
Mailing Address 1954 W Carson Street, Suite B		Amount of Each Disbursement this Period <b>5915.00</b>
City Torrance	State CA	
Zip Code 90501	Purpose of Disbursement Slate Card Payment	<b>Transaction ID : EXPB1211</b>
Candidate Name	Category/Type <b>001</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>45874.58</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 38 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. California Voter Guide</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1954 W Carson Street, Suite B		Amount of Each Disbursement this Period 2926.00
City Torrance State CA Zip Code 90501	Purpose of Disbursement Slate Card Payment	
Candidate Name	Category/Type 001	Transaction ID : EXPB1213
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Epiphany Productions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 18.02
City Alexandria State VA Zip Code 22301	Purpose of Disbursement Shipping Costs	
Candidate Name	Category/Type 001	Transaction ID : EXPB1217
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address Payment Center		Amount of Each Disbursement this Period 18.02
City Memphis State TN Zip Code 38101	Purpose of Disbursement Shipping Costs	
Candidate Name	Category/Type 001	Transaction ID : PDTB36EXPB1217 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2944.02
<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 39 OF 58		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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

Full Name (Last, First, Middle Initial) <b>A. Epiphany Productions, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 104 Hume Avenue		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : EXPB1215</b>
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Fundraising Consulting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Gilliard Blanning &amp; Associates, Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 5701 Lonetree Blvd, #301		Amount of Each Disbursement this Period 2581.00 <b>Transaction ID : EXPB1221</b>
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Ad Production	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period 7322.29 <b>Transaction ID : EXPB1223</b>
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Printing Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12403.29
<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 40 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period 9368.58
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Postage Costs Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1210</b>

Full Name (Last, First, Middle Initial) <b>B. Political Data Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO Box 59570		Amount of Each Disbursement this Period 696.77
City Norwalk State CA Zip Code 90652	Purpose of Disbursement Voter Data Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1225</b>

Full Name (Last, First, Middle Initial) <b>C. Political Data Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2014
Mailing Address PO Box 59570		Amount of Each Disbursement this Period 751.85
City Norwalk State CA Zip Code 90652	Purpose of Disbursement Voter Data Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	<b>Transaction ID : EXPB1226</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10817.20
<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 41 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Buchheim Properties III</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address c/o D.W.A Smith & Company, Inc. 1300 Quail Street, Suite 106		Amount of Each Disbursement this Period 3600.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Office Rent	Transaction ID : EXPB1237
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paul Kim</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 18552 Stone Gate Lane		Amount of Each Disbursement this Period 1500.00
City Rowland Heights	State CA	
Zip Code 91748	Purpose of Disbursement Campaign Consulting Services	Transaction ID : EXPB1236
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Samuel S. Oh</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2014
Mailing Address 15462 Nantucket Street		Amount of Each Disbursement this Period 1059.00
City Westminster	State CA	
Zip Code 92683	Purpose of Disbursement Postage	Transaction ID : EXPB1233
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6159.00
<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 42 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. Samuel S. Oh</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 28 / 2014</b>
Mailing Address <b>15462 Nantucket Street</b>		Amount of Each Disbursement this Period <b>1211.58</b>
City <b>Westminster</b> State <b>CA</b> Zip Code <b>92683</b>	Purpose of Disbursement <b>Reimbursement for Supplies</b> Category/Type <b>001</b>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>EXPB1234</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 28 / 2014</b>
Mailing Address <b>Payment Center</b>		Amount of Each Disbursement this Period <b>100.00</b>
City <b>Sacramento</b> State <b>CA</b> Zip Code <b>95887</b>	Purpose of Disbursement <b>Telephone</b> Category/Type <b>001</b>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>EDTB86EXPB1234</b> <b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Boost Mobile</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 28 / 2014</b>
Mailing Address <b>31921 Camino Capistrano</b>		Amount of Each Disbursement this Period <b>55.00</b>
City <b>San Juan Capsitran</b> State <b>CA</b> Zip Code <b>92675</b>	Purpose of Disbursement <b>Telephone</b> Category/Type <b>001</b>	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : <b>EDTB85EXPB1234</b> <b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1211.58</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 43 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

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

Mailing Address 27220 Heather Ridge Road

City Laguna Niguel State CA Zip Code 92677

Purpose of Disbursement Meeting Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 04 / 28 / 2014

Amount of Each Disbursement this Period 132.49

Transaction ID : EDTB84EXPB1234

**[MEMO ITEM]**

Category/Type 001

Full Name (Last, First, Middle Initial)  
**B. Misc - No Vendor Aggregating over \$200**

Mailing Address

City State Zip Code

Purpose of Disbursement Campaign Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 04 / 28 / 2014

Amount of Each Disbursement this Period 241.37

Transaction ID : EDTB88EXPB1234

**[MEMO ITEM]**

Category/Type 001

Full Name (Last, First, Middle Initial)  
**c. Staples**

Mailing Address 23710 El Toro Rd

City Lake Forest State CA Zip Code 92630

Purpose of Disbursement Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement 04 / 28 / 2014

Amount of Each Disbursement this Period 299.86

Transaction ID : EDTB83EXPB1234

**[MEMO ITEM]**

Category/Type 001

**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 44 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. TShirts4U</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 7224 Valjean Ave		Amount of Each Disbursement this Period 382.86
City Van Nuys	State CA	
Zip Code 91406	Purpose of Disbursement T-Shirts for Campaign	Transaction ID : EDTB87EXPB1234
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Samuel S. Oh</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 15462 Nantucket Street		Amount of Each Disbursement this Period 8000.00
City Westminster	State CA	
Zip Code 92683	Purpose of Disbursement Campaign Consulting Services	Transaction ID : EXPB1235
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Political Data Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address PO Box 59570		Amount of Each Disbursement this Period 745.43
City Norwalk	State CA	
Zip Code 90652	Purpose of Disbursement Voter Data	Transaction ID : EXPB1238
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8745.43
<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 45 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. Probolsky Research</b>		Date of Disbursement M M / D D / Y Y Y Y <b>04 / 29 / 2014</b>
Mailing Address <b>3990 Westerly Place, Suite 185</b>		Amount of Each Disbursement this Period <b>23850.00</b>
City <b>Newport Beach</b> State <b>CA</b> Zip Code <b>92660</b>	Purpose of Disbursement <b>Survey Costs</b> Category/Type <b>001</b>	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : EXPB1241**

Full Name (Last, First, Middle Initial) <b>B. Capital Campaigns, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2014</b>
Mailing Address <b>38 Executive Park, Suite 390</b>		Amount of Each Disbursement this Period <b>7000.00</b>
City <b>Irvine</b> State <b>CA</b> Zip Code <b>92614</b>	Purpose of Disbursement <b>Fundraising Consulting 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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : EXPB1244**

Full Name (Last, First, Middle Initial) <b>c. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y <b>05 / 01 / 2014</b>
Mailing Address <b>1011 S Linwood Ave</b>		Amount of Each Disbursement this Period <b>9948.58</b>
City <b>Santa Ana</b> State <b>CA</b> Zip Code <b>92705</b>	Purpose of Disbursement <b>Postage Costs</b> Category/Type <b>001</b>	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

**Transaction ID : EXPB1245**

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>40798.58</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 46 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

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

Full Name (Last, First, Middle Initial) <b>A. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2014
Mailing Address Main Office		Amount of Each Disbursement this Period 9948.58
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Postage Costs	Transaction ID : EDTB90EXPB1245
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Roger Ballard</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 3 Via Arribo		Amount of Each Disbursement this Period 79.78
City Rancho Sta Margari	State CA	
Zip Code 92688	Purpose of Disbursement Inkind Reception Refreshments	Transaction ID : NONB1281
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Political Data Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address PO Box 59570		Amount of Each Disbursement this Period 863.13
City Norwalk	State CA	
Zip Code 90652	Purpose of Disbursement Voter Data	Transaction ID : EXPB1246
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	942.91
<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 47 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period 10471.50
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Postage Costs 001 Category/Type	
Candidate Name		Transaction ID : EXPB1247
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2014
Mailing Address Main Office		Amount of Each Disbursement this Period 10471.50
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Postage Costs 001 Category/Type	
Candidate Name		Transaction ID : EDTB89EXPB1247
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:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. American Express Merchant Services</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2014
Mailing Address P.O.Box 981540		Amount of Each Disbursement this Period 573.27
City El Paso State TX Zip Code 79998	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name		Transaction ID : EXPB1283
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11044.77
<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 48 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2014
Mailing Address 1011 S Linwood Ave			Amount of Each Disbursement this Period 10571.50
City Santa Ana	State CA	Zip Code 92705	
Purpose of Disbursement Postage Costs		Category/ Type 001	<b>Transaction ID : EXPB1268</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. The Monaco Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1011 S Linwood Ave			Amount of Each Disbursement this Period 7421.24
City Santa Ana	State CA	Zip Code 92705	
Purpose of Disbursement Postage Costs		Category/ Type 001	<b>Transaction ID : EXPB1274</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. US Postmaster</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address Main Office			Amount of Each Disbursement this Period 7421.24
City Santa Ana	State CA	Zip Code 92705	
Purpose of Disbursement Postage Costs		Category/ Type 001	<b>Transaction ID : PDTB52EXPB1274</b>
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	17992.74
<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 49 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address 1011 S Linwood Ave		Amount of Each Disbursement this Period 7421.24
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Postage Costs 001 Category/Type	
Candidate Name		Transaction ID : EXPB1276
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. US Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2014
Mailing Address Main Office		Amount of Each Disbursement this Period 7421.24
City Santa Ana State CA Zip Code 92705	Purpose of Disbursement Postage Costs 001 Category/Type	
Candidate Name		Transaction ID : PDTB51EXPB1276 [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) <b>c. Transfirst LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2014
Mailing Address 3131 S Vaughn Way, Suite 350		Amount of Each Disbursement this Period 174.35
City Aurora State CO Zip Code 80014	Purpose of Disbursement Credit Card Processing Fees 001 Category/Type	
Candidate Name		Transaction ID : EXPB1287
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7595.59
<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 50 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. The Monaco Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2014	
Mailing Address 1011 S Linwood Ave			Amount of Each Disbursement this Period 8234.64	
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB1300	
Purpose of Disbursement Printing Costs		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. The Monaco Group</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address 1011 S Linwood Ave			Amount of Each Disbursement this Period 8682.66	
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB1302	
Purpose of Disbursement Postage Costs		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. US Postmaster</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2014	
Mailing Address Main Office			Amount of Each Disbursement this Period 8682.66	
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EDTB91EXPB1302	
Purpose of Disbursement Postage Costs		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	16917.30
<b>TOTAL</b> This Period (last page this line number only).....	265283.63

**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)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Campaign Compliance Group, Inc.**

Mailing Address 8001 Irvine Center Drive, #400

City State Zip Code  
Irvine CA 92618

Nature of Debt (Purpose):  
Financial Analyst

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD1161</b>	
<input type="text" value="1472.50"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="1472.50"/>	<input type="text" value="0.00"/>	

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

Mailing Address PO Box 94014

City State Zip Code  
Palatine IL 60094

Nature of Debt (Purpose):  
Travel & Meeting Costs

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD1184</b>	
<input type="text" value="4543.36"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="4543.36"/>	<input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gilliard Blanning & Associates, Inc**

Mailing Address 5701 Lonetree Blvd, #301

City State Zip Code  
Rocklin CA 95765

Nature of Debt (Purpose):  
Campaign Consulting Services

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD1092</b>	
<input type="text" value="5000.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="5000.00"/>	<input type="text" value="0.00"/>	

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

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gilliard Blanning &amp; Associates, Inc</b>	Nature of Debt (Purpose): Outdoor Signs
Mailing Address 5701 Lonetree Blvd, #301	
City State Zip Code Rocklin CA 95765	

Outstanding Balance Beginning This Period 10463.00	<b>Transaction ID : PAYD1093</b>	
Amount Incurred This Period 0.00	Payment This Period 10463.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gilliard Blanning &amp; Associates, Inc</b>	Nature of Debt (Purpose): Travel & Design Costs
Mailing Address 5701 Lonetree Blvd, #301	
City State Zip Code Rocklin CA 95765	

Outstanding Balance Beginning This Period 396.00	<b>Transaction ID : PAYD1116</b>	
Amount Incurred This Period 0.00	Payment This Period 396.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gilliard Blanning &amp; Associates, Inc</b>	Nature of Debt (Purpose): Shipping & Web Ads
Mailing Address 5701 Lonetree Blvd, #301	
City State Zip Code Rocklin CA 95765	

Outstanding Balance Beginning This Period 563.85	<b>Transaction ID : PAYD1162</b>	
Amount Incurred This Period 0.00	Payment This Period 563.85	Outstanding Balance at Close of This Period 0.00

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

**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)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gilliard Blanning & Associates, Inc**

Mailing Address 5701 Lonetree Blvd, #301

City State Zip Code  
Rocklin CA 95765

Nature of Debt (Purpose):  
Campaign Consulting Services

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1159**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gilliard Blanning & Associates, Inc**

Mailing Address 5701 Lonetree Blvd, #301

City State Zip Code  
Rocklin CA 95765

Nature of Debt (Purpose):  
Media Buy

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1264**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Gilliard Blanning & Associates, Inc**

Mailing Address 5701 Lonetree Blvd, #301

City State Zip Code  
Rocklin CA 95765

Nature of Debt (Purpose):  
Design & Production Costs

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1271**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="11064.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 54 OF 58
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Gilliard Blanning &amp; Associates, Inc</b>	Nature of Debt (Purpose): Media Buy
Mailing Address 5701 Lonetree Blvd, #301	
City State Zip Code Rocklin CA 95765	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD1278</b>	
Amount Incurred This Period 32250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 32250.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Samuel S. Oh</b>	Nature of Debt (Purpose): Postage & Office Supplies
Mailing Address 15462 Nantucket Street	
City State Zip Code Westminster CA 92683	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD1282</b>	
Amount Incurred This Period 3288.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3288.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Steinberg &amp; Associates, Inc.</b>	Nature of Debt (Purpose): Polling Costs
Mailing Address 335 Stunt Road	
City State Zip Code Calabasas CA 91302	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD1308</b>	
Amount Incurred This Period 9250.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 9250.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	44788.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**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)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
 Santa Ana CA 92705

Nature of Debt (Purpose):  
 Printing Costs

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1228**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
 Santa Ana CA 92705

Nature of Debt (Purpose):  
 Printing Costs

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1243**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
 Santa Ana CA 92705

Nature of Debt (Purpose):  
 Printing Costs

Outstanding Balance Beginning This Period  **Transaction ID : PAYD1265**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="19483.96"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**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)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
Santa Ana CA 92705

Nature of Debt (Purpose):  
Printing Costs

Outstanding Balance Beginning This Period **Transaction ID : PAYD1267**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
7849.97 0.00 7849.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
Santa Ana CA 92705

Nature of Debt (Purpose):  
Printing & Mailing Costs

Outstanding Balance Beginning This Period **Transaction ID : PAYD1288**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
7456.39 0.00 7456.39

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**The Monaco Group**

Mailing Address 1011 S Linwood Ave

City State Zip Code  
Santa Ana CA 92705

Nature of Debt (Purpose):  
Printing Costs

Outstanding Balance Beginning This Period **Transaction ID : PAYD1304**  
0.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period  
6392.73 0.00 6392.73

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	21699.09
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00



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

NAME OF COMMITTEE (In Full)

**Walters for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Monaco Group</b>		Nature of Debt (Purpose): Printing Costs
Mailing Address 1011 S Linwood Ave		
City State	Zip Code	
Santa Ana CA	92705	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1305</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="9853.25"/>	<input type="text" value="0.00"/>	<input type="text" value="9853.25"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>The Monaco Group</b>		Nature of Debt (Purpose): Printing Costs
Mailing Address 1011 S Linwood Ave		
City State	Zip Code	
Santa Ana CA	92705	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1309</b>	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="10206.83"/>	<input type="text" value="0.00"/>	<input type="text" value="10206.83"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Thomas Communications Group, LLC</b>		Nature of Debt (Purpose): Fundraising Consulting Services
Mailing Address 20532 El Toro Rd, #210A		
City State	Zip Code	
Mission Viejo CA	92692	

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD1160</b>	
<input type="text" value="362.50"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="362.50"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="20060.08"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

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

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Turnip Rose</b>	Nature of Debt (Purpose): Event Catering & Staff Costs
Mailing Address 1565 Scenic Ave	
City State Zip Code Costa Mesa CA 92626	

Outstanding Balance Beginning This Period <input type="text" value="5717.73"/>	<b>Transaction ID : PAYD1128</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5717.73"/>	Outstanding Balance at Close of This Period <input 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 type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input 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 type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="117095.13"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="117095.13"/>