

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="23385.97"/>	<input type="text" value="23385.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="26955.47"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="803.45"/>	<input type="text" value="3872.95"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="27758.92"/>	<input type="text" value="27258.92"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="500.00"/>	<input type="text" value="0.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="27258.92"/>	<input type="text" value="27258.92"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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

Write or Type Committee Name

SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	520.00	680.00
(ii) Unitemized	280.00	3180.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	800.00	3860.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	800.00	3860.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3.45	12.95
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	803.45	3872.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	803.45	3872.95

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	500.00	0.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	500.00	0.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	800.00	3860.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	800.00	3860.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Paul Amicone
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 07 / 2011
Transaction ID : SA11AI.5135

Amount of Each Receipt this Period
10.00

Payroll Deduction

B. Paul Amicone
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 22 / 2011
Transaction ID : SA11AI.5151

Amount of Each Receipt this Period
10.00

Payroll Deduction

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

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
12 / 19 / 2011
Transaction ID : SA11AI.5166

Amount of Each Receipt this Period
10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 7 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
 Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 11 / 07 / 2011
Transaction ID : SA11AI.5136

Amount of Each Receipt this Period
 10.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
B. Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
 Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 11 / 22 / 2011
Transaction ID : SA11AI.5152

Amount of Each Receipt this Period
 10.00

Payroll Deduction

Full Name (Last, First, Middle Initial)
C. Sebastian Barnes

Mailing Address 735 E. Carnegie Dr.
 Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 230.00

Date of Receipt
 12 / 19 / 2011
Transaction ID : SA11AI.5167

Amount of Each Receipt this Period
 10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 30.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Sherry Eversole-Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2011
Transaction ID : SA11AI.5137
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. Sherry Eversole-Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11AI.5153
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. Sherry Eversole-Patterson
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2011
Transaction ID : SA11AI.5168
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Daniel Finneran
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 07 / 2011
Transaction ID : SA11AI.5138

Amount of Each Receipt this Period
10.00

Payroll Deduction

B. Daniel Finneran
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
220.00

Date of Receipt
11 / 22 / 2011
Transaction ID : SA11AI.5154

Amount of Each Receipt this Period
10.00

Payroll Deduction

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

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
230.00

Date of Receipt
12 / 19 / 2011
Transaction ID : SA11AI.5169

Amount of Each Receipt this Period
10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 30.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. William Forester
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2011
Transaction ID : SA11AI.5140
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. William Forester
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2011
Transaction ID : SA11AI.5155
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. William Forester
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : SA11AI.5170
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Jason Grantham		Date of Receipt MM / DD / YYYY 11 / 22 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5156
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	C	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	Payroll Deduction

Full Name (Last, First, Middle Initial) B. Jason Grantham		Date of Receipt MM / DD / YYYY 12 / 19 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5171
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	C	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	Payroll Deduction

Full Name (Last, First, Middle Initial) C. Edward Jimenez		Date of Receipt MM / DD / YYYY 10 / 24 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5126
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	C	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period 10.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Edward Jimenez		Date of Receipt MM / DD / YYYY 11 / 07 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5142
City San Bernardino State CA Zip Code 92408	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer San Bernardino County Occupation Public Safety Official	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction
Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) B. Edward Jimenez		Date of Receipt MM / DD / YYYY 11 / 22 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5157
City San Bernardino State CA Zip Code 92408	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer San Bernardino County Occupation Public Safety Official	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction
Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) C. Edward Jimenez		Date of Receipt MM / DD / YYYY 12 / 19 / 2011
Mailing Address 735 E. Carnegie Dr. Ste. 125		Transaction ID : SA11AI.5172
City San Bernardino State CA Zip Code 92408	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 10.00
Name of Employer San Bernardino County Occupation Public Safety Official	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Payroll Deduction
Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

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

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Robert Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2011
Transaction ID : SA11AI.5143
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. Robert Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11AI.5158
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. Robert Johnston
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2011
Transaction ID : SA11AI.5173
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Laren Leichter
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2011
Transaction ID : SA11AI.5144
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. Laren Leichter
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11AI.5159
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. Laren Leichter
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2011
Transaction ID : SA11AI.5174
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Roxanne Logan
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 11 / 07 / 2011
Transaction ID : SA11AI.5145
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. Roxanne Logan
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11AI.5160
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. Roxanne Logan
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2011
Transaction ID : SA11AI.5206
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶ 30.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Ken Lutz		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.5146
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="210.00"/>	Payroll Deduction

Full Name (Last, First, Middle Initial) B. Ken Lutz		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.5161
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="220.00"/>	Payroll Deduction

Full Name (Last, First, Middle Initial) C. Ken Lutz		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.5175
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="10.00"/>
	<input type="text" value="230.00"/>	Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Colin McKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 10 / 2011
Transaction ID : SA11AI.5115
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

B. Colin McKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2011
Transaction ID : SA11AI.5131
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

C. Colin McKenzie
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt 11 / 07 / 2011
Transaction ID : SA11AI.5147
 Amount of Each Receipt this Period 20.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 60.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Colin McKenzie
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
440.00

Date of Receipt
11 / 22 / 2011
Transaction ID : SA11AI.5162

Amount of Each Receipt this Period
20.00

Payroll Deduction

B. Colin McKenzie
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
460.00

Date of Receipt
12 / 19 / 2011
Transaction ID : SA11AI.5176

Amount of Each Receipt this Period
20.00

Payroll Deduction

C. Dale Mondary
Full Name (Last, First, Middle Initial)

Mailing Address 735 E. Carnegie Dr.
Ste. 125

City San Bernardino State CA Zip Code 92408

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

Name of Employer San Bernardino County Occupation Public Safety Official

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 07 / 2011
Transaction ID : SA11AI.5148

Amount of Each Receipt this Period
10.00

Payroll Deduction

SUBTOTAL of Receipts This Page (optional)..... ▶ 50.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 22
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Dale Mondary
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 22 / 2011
Transaction ID : SA11AI.5163
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

B. Dale Mondary
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : SA11AI.5177
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

C. Dan Rice
 Full Name (Last, First, Middle Initial)
 Mailing Address 735 E. Carnegie Dr.
 Ste. 125
 City San Bernardino State CA Zip Code 92408
 FEC ID number of contributing federal political committee. **C**
 Name of Employer San Bernardino County Occupation Public Safety Official
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 07 / 2011
Transaction ID : SA11AI.5149
 Amount of Each Receipt this Period 10.00
 Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	30.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 OF 22
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Dan Rice		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : SA11AI.5164	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period <input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="220.00"/>	Payroll Deduction

Full Name (Last, First, Middle Initial) B. Dan Rice		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : SA11AI.5178	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period <input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="230.00"/>	Payroll Deduction

Full Name (Last, First, Middle Initial) C. Dean Swan		Date of Receipt
Mailing Address 735 E. Carnegie Dr. Ste. 125		<input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
City San Bernardino	State CA	Zip Code 92408
FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Transaction ID : SA11AI.5150	
Name of Employer San Bernardino County	Occupation Public Safety Official	Amount of Each Receipt this Period <input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	Payroll Deduction

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 21 OF 22
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

A. Dean Swan
Full Name (Last, First, Middle Initial)
Mailing Address 735 E. Carnegie Dr.
Ste. 125
City San Bernardino State CA Zip Code 92408
FEC ID number of contributing federal political committee. **C**
Name of Employer San Bernardino County Occupation Public Safety Official
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 22 / 2011
Transaction ID : SA11AI.5165
Amount of Each Receipt this Period 10.00
Payroll Deduction

B. Dean Swan
Full Name (Last, First, Middle Initial)
Mailing Address 735 E. Carnegie Dr.
Ste. 125
City San Bernardino State CA Zip Code 92408
FEC ID number of contributing federal political committee. **C**
Name of Employer San Bernardino County Occupation Public Safety Official
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 230.00

Date of Receipt 12 / 19 / 2011
Transaction ID : SA11AI.5179
Amount of Each Receipt this Period 10.00
Payroll Deduction

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) ▼
Aggregate Year-to-Date ▼

Date of Receipt
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	20.00
TOTAL This Period (last page this line number only).....▶	520.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SAN BERNARDINO COUNTY SAFETY EMPLOYEES BENEFIT ASSOCIATION FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. GLORIA NEGRETE MCLEOD FOR CONGRESS

Mailing Address 5415 FRANCIS AVE

City CHINO State CA Zip Code 91710

Purpose of Disbursement
Campaign Contribution

011

Category/
Type

Candidate Name

GLORIA NEGRETE MCLEOD

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 35

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 13 / 2011

Transaction ID : SB23.5204

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

500.00

500.00