

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 70			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" 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)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kern County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 15 / 2012</b>
Mailing Address <b>P.O. Box 1144</b>		Amount of Each Disbursement this Period <b>600.00</b> <b>Transaction ID : SB21.E1510896</b>
City <b>Bakersfield</b> State <b>CA</b> Zip Code <b>93302</b>	Purpose of Disbursement <b>011</b> Category/Type	
Candidate Name <b>Kern County Republican Party</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tulare County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 15 / 2012</b>
Mailing Address <b>810 W. Main St. Suite B</b>		Amount of Each Disbursement this Period <b>1500.00</b> <b>Transaction ID : SB21.E1510898</b>
City <b>Visalia</b> State <b>CA</b> Zip Code <b>93291</b>	Purpose of Disbursement <b>011</b> Category/Type	
Candidate Name <b>Tulare County Republican Party</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2012</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>2100.00</b>