

**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 158 OF 162	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Valadao for Congress

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2014
Mailing Address 320 1st Street Southeast		Amount of Each Disbursement this Period 25000.00 Transaction ID : SB21.E1573837
City Washington State DC Zip Code 20003	Purpose of Disbursement Contribution <input type="checkbox"/> 011 011 Category/Type	
Candidate Name National Republican Congressional Committee		
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. Tulare County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 810 W. Main St. Suite B		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB21.E1576741
City Visalia State CA Zip Code 93291	Purpose of Disbursement Contribution <input type="checkbox"/> 011 011 Category/Type	
Candidate Name Tulare County Republican Party		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C.		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 Contribution <input type="checkbox"/> _____ _____ Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	26500.00
TOTAL This Period (last page this line number only).....	29500.00