

# 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

Friends of Joe Baca 2014

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

C C00325449

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

35

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M /

D D /

Y Y Y Y

in the State of

5. Covering Period

M M /

D D /

Y Y Y Y

11 / 27 / 2012

through

M M /

D D /

Y Y Y Y

12 / 31 / 2012

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

Type or Print Name of Treasurer Joe Baca

Signature of Treasurer Joe Baca

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

01 / 30 / 2013

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Friends of Joe Baca 2014**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	9725.00	9725.00
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	9725.00	8725.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	39497.11	87867.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	39497.11	87867.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	8535.87	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	30325.74	

**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

**Friends of Joe Baca 2014**

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).....	2050.00	2050.00
(ii) Unitemized.....	675.00	675.00
(iii) TOTAL of contributions from individuals ▶	2725.00	2725.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	7000.00	7000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	9725.00	9725.00
<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	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	519.06	519.06
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	10244.06	10244.06

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39497.11	87867.88
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	1000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	1000.00
21. OTHER DISBURSEMENTS .....	-87.70	-87.70
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	39409.41	88780.18

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	37701.22
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	10244.06
25. SUBTOTAL (add Line 23 and Line 24).....	47945.28
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	39409.41
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8535.87

**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 34
	<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	

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)  
**Friends of Joe Baca 2014**

**A.** Full Name (Last, First, Middle Initial)  
**James L. Casserly**

Mailing Address 2839 Allendale Place, NW

City Washington State DC Zip Code 20008

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

Name of Employer Willkie, Farr & Gallagher, LLP Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : INCA10317**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Solomon P. Ortiz, Jr.**

Mailing Address 4019 Killarmet

City Corpus Christi State TX Zip Code 78413

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

Name of Employer Self-Employed Occupation Ortiz Holdings, LLC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 13 / 2012

**Transaction ID : INCA10318**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 12912 Hillary Way

City Redlands State CA Zip Code 92372

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

Name of Employer McPeters McAlearney Shimoff & Hatt Occupation Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

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

**Transaction ID : INCA10324**

Amount of Each Receipt this Period  
500.00

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

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

1800.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA10317

2012 General Debt

Form/Schedule: SA11AI

Transaction ID: INCA10318

2012 General Debt

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA10324

2012 General Debt

Form/Schedule:

Transaction ID:

**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 34
	<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)  
**Friends of Joe Baca 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Gary J. Singer**

Mailing Address 610 Newport Center Drive, Suite 17

City Newport Beach State CA Zip Code 92660

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

Name of Employer O'Melveny & Myers, LLP Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : INCA10326**

Amount of Each Receipt this Period  
250.00

**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).....

250.00

2050.00



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA10326

2012 General Debt

Form/Schedule:

Transaction ID:

**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 34
	<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)  
**Friends of Joe Baca 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Becerra for Congress**

Mailing Address P.O. Box 261060

City Los Angeles State CA Zip Code 90026

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 17 / 2012

**Transaction ID : INCA10338**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 256 North Sam Houston Parkway East #278

City Houston State TX Zip Code 77060

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : INCA10328**

Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
**Napolitano for Congress**

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

**Transaction ID : INCA10327**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : INCA10338

2012 General Debt

Form/Schedule: SA11C

Transaction ID: INCA10328

2012 General Debt

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : INCA10327

2012 General Debt

Form/Schedule:

Transaction ID:

**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 34
	<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)  
**Friends of Joe Baca 2014**

**A.** Full Name (Last, First, Middle Initial)  
**United Transportation Union PAC (UTU PAC)**

Mailing Address 24950 Country Club Blvd., Suite 34

City North Olmsted State OH Zip Code 44070

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

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

**Transaction ID : INCA10319**

Amount of Each Receipt this Period  
2500.00

**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).....

2500.00

7000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11C

Transaction ID : INCA10319

2012 General Debt

Form/Schedule:

Transaction ID:

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 OF 34  
(check only one)  
 11a 12  11b 13a  11c 13b  11d 14  15

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NAME OF COMMITTEE (In Full)  
**Friends of Joe Baca 2014**

**A.** Full Name (Last, First, Middle Initial)  
**Time Warner Media Sales**

Mailing Address 4100 Jurupa Street

City Ontario State CA Zip Code 91761

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
478.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 03 / 2012

**Transaction ID : INCA10281**

Amount of Each Receipt this Period  
478.80

Refund

**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 M / D 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 M / D 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).....

478.80

478.80

**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 16 OF 34			
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. AT &amp; T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 60017		Amount of Each Disbursement this Period 217.13 <b>Transaction ID : EXPB10299</b>
City Los Angeles	State CA	
Zip Code 90060	Purpose of Disbursement Phone	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) <b>B. Chemeria Consultancy, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 294457		Amount of Each Disbursement this Period 2465.12 <b>Transaction ID : EXPB10283</b>
City Phelan	State CA	
Zip Code 92329	Purpose of Disbursement Robocalls	Category/ Type 004
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:	

Full Name (Last, First, Middle Initial) <b>c. Chemeria Consultancy, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012
Mailing Address P.O. Box 294457		Amount of Each Disbursement this Period 9062.50 <b>Transaction ID : EXPB10285</b>
City Phelan	State CA	
Zip Code 92329	Purpose of Disbursement Robocalls	Category/ Type 004
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).....	11744.75
<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 17 OF 34			
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. Elvis R. Galvan</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012		
Mailing Address 509 South Vine Avenue			Amount of Each Disbursement this Period 264.18		
City Ontario	State CA	Zip Code 91762	Transaction ID : EXPB10266		
Purpose of Disbursement Salary		001 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:					

Full Name (Last, First, Middle Initial) <b>B. Ignacio Gomez dba Gomez Studios</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012		
Mailing Address 812 West Kenneth Road			Amount of Each Disbursement this Period 3317.86		
City Glendale	State CA	Zip Code 91202	Transaction ID : EXPB10311		
Purpose of Disbursement Portrait		001 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:					

Full Name (Last, First, Middle Initial) <b>C. Macias, Joseph dba JMM Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2012		
Mailing Address 800 4th Street, SW, S720			Amount of Each Disbursement this Period 37.90		
City Washington	State DC	Zip Code 20024	Transaction ID : EXPB10282		
Purpose of Disbursement Shipping		001 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).....	3619.94
<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 18 OF 34	
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. Macias, Joseph dba JMM Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012	
Mailing Address 800 4th Street, SW, S720			Amount of Each Disbursement this Period 113.25	
City Washington	State DC	Zip Code 20024	Transaction ID : EXPB10288	
Purpose of Disbursement Staff Travel		Category/ Type 002		
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:				

Full Name (Last, First, Middle Initial) <b>B. Macias, Joseph dba JMM Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012	
Mailing Address 800 4th Street, SW, S720			Amount of Each Disbursement this Period 56.85	
City Washington	State DC	Zip Code 20024	Transaction ID : EXPB10287	
Purpose of Disbursement Shipping		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) <b>C. Macias, Joseph dba JMM Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012	
Mailing Address 800 4th Street, SW, S720			Amount of Each Disbursement this Period 377.55	
City Washington	State DC	Zip Code 20024	Transaction ID : EXPB10289	
Purpose of Disbursement Food for Campaign Workers		Category/ Type 001		
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).....	547.65
<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 19 OF 34	
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. Macias, Joseph dba JMM Associates</b>			Date of Disbursement M M / D D / Y Y Y Y <b>12 / 20 / 2012</b>	
Mailing Address 800 4th Street, SW, S720			Amount of Each Disbursement this Period <b>3500.00</b>	
City Washington	State DC	Zip Code 20024	Transaction ID : <b>EXPB10329</b>	
Purpose of Disbursement Fundraising Consulting		Category/ Type <b>003</b>		
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:				

Full Name (Last, First, Middle Initial) <b>B. Gilbert A. Melendez</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 30 / 2012</b>	
Mailing Address 7018 La Mancha Drive			Amount of Each Disbursement this Period <b>264.18</b>	
City Rancho Cucamonga	State CA	Zip Code 91701	Transaction ID : <b>EXPB10267</b>	
Purpose of Disbursement Salary		Category/ Type <b>001</b>		
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:				

Full Name (Last, First, Middle Initial) <b>c. David Negrete dba DN Communications</b>			Date of Disbursement M M / D D / Y Y Y Y <b>12 / 03 / 2012</b>	
Mailing Address 2967 Glenmanor Place			Amount of Each Disbursement this Period <b>2296.00</b>	
City Los Angeles	State CA	Zip Code 90039	Transaction ID : <b>EXPB10272</b>	
Purpose of Disbursement Campaign Management		Category/ Type <b>001</b>		
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>6060.18</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 20 OF 34	
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. NJB &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 29 / 2012</b>
Mailing Address 1850 North Magnolia Avenue		Amount of Each Disbursement this Period <b>3500.00</b> <b>Transaction ID : EXPB10264</b>
City Rialto State CA Zip Code 92376	Purpose of Disbursement Fundraising Consulting Category/Type <b>003</b>	
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:		

Full Name (Last, First, Middle Initial) <b>B. NJB &amp; Associates, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 27 / 2012</b>
Mailing Address 1850 North Magnolia Avenue		Amount of Each Disbursement this Period <b>3500.00</b> <b>Transaction ID : EXPB10339</b>
City Rialto State CA Zip Code 92376	Purpose of Disbursement Fundraising Consulting Category/Type <b>003</b>	
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:		

Full Name (Last, First, Middle Initial) <b>c. Olson Hagel &amp; Fishburn LLP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 14 / 2012</b>
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period <b>3579.93</b> <b>Transaction ID : EXPB10313</b>
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Legal & Reporting Services Category/Type <b>001</b>	
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>10579.93</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 21 OF 34	
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. Rita Copeland dba Paylink</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address 5429 Madison Avenue			Amount of Each Disbursement this Period 79.50	
City Sacramento	State CA	Zip Code 95841	Transaction ID : EXPB10269	
Purpose of Disbursement Payroll Fee		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) <b>B. Rita Copeland dba Paylink</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012	
Mailing Address 5429 Madison Avenue			Amount of Each Disbursement this Period 108.08	
City Sacramento	State CA	Zip Code 95841	Transaction ID : EXPB10268	
Purpose of Disbursement Payroll Tax		Category/ Type 001		
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:				

Full Name (Last, First, Middle Initial) <b>c. U.S. Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012	
Mailing Address P.O. Box 790408			Amount of Each Disbursement this Period 171.88	
City St. Louis	State MO	Zip Code 63179	Transaction ID : EXPB10305	
Purpose of Disbursement Meals with Constituents		Category/ Type 001		
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).....	359.46
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : EXPB10305

Subvendors do not aggregate over \$200.01 in cycle

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 34			
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 2752.72
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : EXPB10303</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Staples Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 3303 Jefferson Drive		Amount of Each Disbursement this Period 2068.16
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : PDTB136EXPB10303</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Stater Brothers Markets</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 301 South Tippecanoe Avenue		Amount of Each Disbursement this Period 684.56
City San Bernardino	State CA	
Zip Code 92408	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : PDTB137EXPB10303</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2752.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 34	
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 1070.69 <b>Transaction ID : EXPB10301</b>
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement Campaign Shipping	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) <b>B. UPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 1457 East Victoria Avenue		Amount of Each Disbursement this Period 1070.69 <b>Transaction ID : PDTB135EXPB10301</b> <b>[MEMO ITEM]</b>
City San Bernardino	State CA	
Zip Code 92408	Purpose of Disbursement Campaign Shipping	Category/ Type 001
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:	

Full Name (Last, First, Middle Initial) <b>c. U.S. Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 395.78 <b>Transaction ID : EXPB10306</b>
City St. Louis	State MO	
Zip Code 63179	Purpose of Disbursement Campaign Office Supplies	Category/ Type 001
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).....	1466.47
<b>TOTAL</b> This Period (last page this line number only).....	



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : EXPB10306

Subvendors do not aggregate over \$200.01 in cycle

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 34			
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 144.95
City St. Louis	State MO	
Zip Code 63179		
Purpose of Disbursement Campaign Storage	Category/ Type 001	
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:		

Full Name (Last, First, Middle Initial) <b>B. U.S. Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 250.90
City St. Louis	State MO	
Zip Code 63179		
Purpose of Disbursement Phones	Category/ Type 001	
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:		

Full Name (Last, First, Middle Initial) <b>C. AT &amp; T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address Payment Center		Amount of Each Disbursement this Period 250.90
City Sacramento	State CA	
Zip Code 95887		
Purpose of Disbursement Phones	Category/ Type 001	[MEMO ITEM]
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).....	395.85
<b>TOTAL</b> This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : EXPB10308

Subvendors do not aggregate over \$200.01 in cycle

Form/Schedule:

Transaction ID:

**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 34			
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2012
Mailing Address 241 West Rialto Avenue		Amount of Each Disbursement this Period 675.00
City Rialto	State CA Zip Code 92376	
Purpose of Disbursement Campaign Postage	Category/Type 003	<b>Transaction ID : EXPB10316</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 27 / 2012
Mailing Address 400 Capitol Mall		Amount of Each Disbursement this Period 357.09
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Merchant Fees	Category/Type 001	<b>Transaction ID : EXPB10322</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2012
Mailing Address 400 Capitol Mall		Amount of Each Disbursement this Period 20.00
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Bank Fee	Category/Type 001	<b>Transaction ID : EXPB10321</b>
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).....	1052.09
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 34		
	<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)  
**Friends of Joe Baca 2014**

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 400 Capitol Mall		Amount of Each Disbursement this Period 285.60
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Merchant Fees	Category/Type 001	<b>Transaction ID : EXPB10332</b>
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:		

Full Name (Last, First, Middle Initial) <b>B. Wells Fargo Bank</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2012
Mailing Address 400 Capitol Mall		Amount of Each Disbursement this Period 45.28
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Refund entered in error	Category/Type 001	<b>Transaction ID : EXPB10355</b>
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:		

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).....	330.88
<b>TOTAL</b> This Period (last page this line number only).....	38909.92

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

NAME OF COMMITTEE (In Full)

**Friends of Joe Baca 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chemeria Consultancy, Inc.</b>		Nature of Debt (Purpose): Robocalls
Mailing Address P.O. Box 294457		
City	State	Zip Code
Phelan	CA	92329

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD10279</b>	
<input type="text" value="9062.50"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="9062.50"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chemeria Consultancy, Inc.</b>		Nature of Debt (Purpose): Robocalls
Mailing Address P.O. Box 294457		
City	State	Zip Code
Phelan	CA	92329

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD10280</b>	
<input type="text" value="2465.12"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="2465.12"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Ignacio Gomez dba Gomez Studios</b>		Nature of Debt (Purpose): Portrait
Mailing Address 812 West Kenneth Road		
City	State	Zip Code
Glendale	CA	91202

Outstanding Balance Beginning This Period	<b>Transaction ID : PAYD10310</b>	
<input type="text" value="3317.86"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3317.86"/>	<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"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**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)

**Friends of Joe Baca 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Print Logistics, Inc.**

Nature of Debt (Purpose):  
Campaign Mailer

Mailing Address 1818 L Street, Suite 713

City State Zip Code  
Sacramento CA 95811

Outstanding Balance Beginning This Period

24010.32

Transaction ID : PAYD10309

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24010.32

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

Nature of Debt (Purpose):  
Campaign Shipping

Mailing Address P.O. Box 790408

City State Zip Code  
St. Louis MO 63179

Outstanding Balance Beginning This Period

1070.69

Transaction ID : PAYD10275

Amount Incurred This Period

0.00

Payment This Period

1070.69

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**U.S. Bank**

Nature of Debt (Purpose):  
Campaign Office Supplies

Mailing Address P.O. Box 790408

City State Zip Code  
St. Louis MO 63179

Outstanding Balance Beginning This Period

2752.72

Transaction ID : PAYD10276

Amount Incurred This Period

0.00

Payment This Period

2752.72

Outstanding Balance at Close of This Period

0.00

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

24010.32

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 32 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Friends of Joe Baca 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Shipping
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10347</b>	
Amount Incurred This Period 422.08	Payment This Period 0.00	Outstanding Balance at Close of This Period 422.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Campaign Office Supplies
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10348</b>	
Amount Incurred This Period 3156.38	Payment This Period 0.00	Outstanding Balance at Close of This Period 3156.38

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Campaign Storage
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10357</b>	
Amount Incurred This Period 769.70	Payment This Period 0.00	Outstanding Balance at Close of This Period 769.70

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	4348.16
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 33 OF 34
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

**Friends of Joe Baca 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Candidate Travel
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10358</b>	
Amount Incurred This Period 815.31	Payment This Period 0.00	Outstanding Balance at Close of This Period 815.31

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Fundraising Catering
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10359</b>	
Amount Incurred This Period 455.55	Payment This Period 0.00	Outstanding Balance at Close of This Period 455.55

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>U.S. Bank</b>	Nature of Debt (Purpose): Meals with Constituents
Mailing Address P.O. Box 790408	
City State Zip Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10360</b>	
Amount Incurred This Period 46.40	Payment This Period 0.00	Outstanding Balance at Close of This Period 46.40

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	1317.26
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full)

**Friends of Joe Baca 2014**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**U.S. Bank**

Mailing Address P.O. Box 790408

City State Zip Code  
 St. Louis MO 63179

Nature of Debt (Purpose):  
 Civic Donation

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : PAYD10361</b>	
Amount Incurred This Period 650.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 650.00

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
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1) <b>SUBTOTALS</b> This Period This Page (optional) .....	650.00
2) <b>TOTALS</b> This Period (last page this line number only) .....	30325.74
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) ▶	30325.74