

# 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

Committee to Re-Elect Congressman Rohrabacher

ADDRESS (number and street) 170 E 17th Street #110

Check if different than previously reported. (ACC)

Costa Mesa

CA

92627

2. **FEC IDENTIFICATION NUMBER** ▼

C C00224691

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

CA

48

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  /  /  in the State of

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

- General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period

/  /  through  /  /

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 Jack Wu

Signature of Treasurer Jack Wu

[Electronically Filed]

Date

/  /

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								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Committee to Re-Elect Congressman Rohrabacher**

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 15 / 2014 To: M M / D D / Y Y Y Y 06 / 30 / 2014

	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))....	178135.00	673803.59
(b) Total Contribution Refunds (from Line 20(d)) .....	1200.00	7550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	176935.00	666253.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	67538.17	526088.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	400.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	67538.17	525688.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	318861.13	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	19000.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

**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

**Committee to Re-Elect Congressman Rohrabacher**

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).....	175135.00	651828.59
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	175135.00	651828.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	3000.00	21975.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	178135.00	673803.59
<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	400.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	178135.00	674203.59

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	67538.17	526088.92
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 .....	1200.00	7550.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1200.00	7550.00
21. OTHER DISBURSEMENTS .....	6550.00	14447.23
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	75288.17	548086.15

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	216014.30
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	178135.00
25. SUBTOTAL (add Line 23 and Line 24).....	394149.30
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	75288.17
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	318861.13

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

Fixed a glitch in the data entry software

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 6 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Deane Fenstermaker**

Mailing Address 8258 Colling Ridge Court

City Alexandria State VA Zip Code 22308

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2014

**Transaction ID : INCA8671**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert W. Yates**

Mailing Address 4539 Seminary Road

City Alexandria State VA Zip Code 22304

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

Name of Employer Info Requested Occupation Info Requested  
 Engineer Special Products Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 21 / 2014

**Transaction ID : INCA8725**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 1907 SABRINA TERRACE

City corona del mar State CA Zip Code 92625

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

Name of Employer Info Requested Occupation Info Requested  
 Stainless Micro Polish Inc. President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
700.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 22 / 2014

**Transaction ID : INCA8764**

Amount of Each Receipt this Period  
400.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Erickson, Lucille</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 24 / 2014	
Mailing Address 43 Southhampton Ct		<b>Transaction ID : INCA8724</b>	
City Newport Beach	State CA	Zip Code 92660	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Self	Occupation Homemaker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) <b>B. Harris, Robert 'Chip'</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2014	
Mailing Address 46 Old Course Drive		<b>Transaction ID : NONA9082</b>	
City Newport Beach	State CA	Zip Code 92660	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 Fundraising Event	
Name of Employer Acacia Research Corporation	Occupation Chairman		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>C. Shawn Harris</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 01 / 2014	
Mailing Address 46 Old Course Drive		<b>Transaction ID : NONA9081</b>	
City Newport Beach	State CA	Zip Code 92660	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 Fundraising Event	
Name of Employer Home	Occupation Home		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

**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 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Carole Pedriana**

Mailing Address 111 21st Street

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 03 / 2014

**Transaction ID : INCA8766**

Amount of Each Receipt this Period  
150.00

**B.** Full Name (Last, First, Middle Initial)  
**Doug Francis**

Mailing Address 19 Bell Pasture

City State Zip Code  
Ladera Ranch CA 92694

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

Name of Employer Occupation  
Ghost Group Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2014

**Transaction ID : INCA8768**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**John B. Geroch**

Mailing Address 460 Las Palmas

City State Zip Code  
Irvine CA 92602

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

Name of Employer Occupation  
State Of California Supervising Scientist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 04 / 2014

**Transaction ID : INCA8788**

Amount of Each Receipt this Period  
500.00

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

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

3250.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>Dolores Movius</b>		Date of Receipt MM / DD / YYYY 06 / 06 / 2014
Mailing Address 3261 Devon Cir		<b>Transaction ID : INCA8791</b>
City Huntington Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>David Harrington</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2014
Mailing Address 1 Bearberry		<b>Transaction ID : INCA8786</b>
City Aliso Viejo	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 99.00
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 99.00	

Full Name (Last, First, Middle Initial) <b>Michelle Harrington</b>		Date of Receipt MM / DD / YYYY 06 / 09 / 2014
Mailing Address 1 Bearberry		<b>Transaction ID : INCA8787</b>
City Aliso Viejo	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 99.00
Name of Employer Self	Occupation Realtor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 99.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	498.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Jao**

Mailing Address 8907 Warner Ave. #108

City: Huntington Beach State: CA Zip Code: 92618

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

Name of Employer: Bridgecreek Development Occupation: Real Estate Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 06 / 09 / 2014

**Transaction ID : INCA8793**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Bryan Zatica**

Mailing Address 841 E Washington Ave

City: Santa Ana State: CA Zip Code: 92701

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

Name of Employer: Macro-Z-Technology Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 10 / 2014

**Transaction ID : INCA8795**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Gina Efros**

Mailing Address 1430 South Burnside Ave

City: Los Angeles State: CA Zip Code: 90019

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

Name of Employer: Efros Bicycle Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 11 / 2014

**Transaction ID : INCA8797**

Amount of Each Receipt this Period: 300.00

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Jo Ann Kenton</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2014	
Mailing Address 1107 E Balboa Boulevard		<b>Transaction ID : INCA8799</b>	
City Newport Beach	State CA	Zip Code 92661	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		C	
Name of Employer	Occupation		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 50.00		

Full Name (Last, First, Middle Initial) <b>B. Jules Zeman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 11 / 2014	
Mailing Address 555 South Flower 45th Floor		<b>Transaction ID : INCA8798</b>	
City Los Angeles	State CA	Zip Code 90071	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Haight Brown & Bonesteel	Occupation Attorney		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1700.00		

Full Name (Last, First, Middle Initial) <b>C. James Beeler</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 312 22nd Street		<b>Transaction ID : INCA8805</b>	
City Huntington Beach	State CA	Zip Code 92648	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Boeing Defense Systems	Occupation Engineer/Scientist		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 800.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 135		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 9315 Jasmine Ave

City Fountain Valley State CA Zip Code 92708

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

Name of Employer Self Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : INCA8803**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**John Jason Chun**

Mailing Address P.O. Box 7248

City Newport Beach State CA Zip Code 92658

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

Name of Employer Self Occupation Landlord

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2014

**Transaction ID : INCA8804**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Justin Hartfield**

Mailing Address 41 Discovery

City Irvine State CA Zip Code 92618

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

Name of Employer Ghost Employer Group Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2014

**Transaction ID : INCA8809**

Amount of Each Receipt this Period  
2600.00

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

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

3100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 4040 Macarthur Blvd  
Ste.300

City Newport Beach State CA Zip Code 92660

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

Name of Employer: Saunders Property Company Occupation: Property Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6150.00**

Date of Receipt: **06 / 17 / 2014**

**Transaction ID : INCA8720**

Amount of Each Receipt this Period: **2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**John R. Saunders**

Mailing Address 4040 Macarthur Blvd  
Ste.300

City Newport Beach State CA Zip Code 92660

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

Name of Employer: Saunders Property Company Occupation: Property Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6150.00**

Date of Receipt: **06 / 17 / 2014**

**Transaction ID : INCA8721**

Amount of Each Receipt this Period: **1400.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Bincow**

Mailing Address 8561 Hamilton St

City Alta Loma State CA Zip Code 91701

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

Name of Employer: Gateway Foundation Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **06 / 18 / 2014**

**Transaction ID : INCA8817**

Amount of Each Receipt this Period: **250.00**

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

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

**4250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Chris Castle**

Mailing Address 3800 N. Lamar Blvd  
#730-259

City Austin State TX Zip Code 78756

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

Name of Employer Self Occupation Investor

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8814**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald DiCostanzo**

Mailing Address 3 Tiburon Bay Drive

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Pedego Electric Bikes Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8820**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Roseann DiCostanzo**

Mailing Address 3 Tiburon Bay Drive

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Self Occupation Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8821**

Amount of Each Receipt this Period  
2000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Byron Hoffman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 6 Rue Villars		<b>Transaction ID : INCA8823</b>
City Newport Beach	State CA	Zip Code 92660
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer retired	Occupation Landbroker	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2400.00	

Full Name (Last, First, Middle Initial) <b>B. Pamela Hoffman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 6 Rue Villars		<b>Transaction ID : INCA8822</b>
City Newport Beach	State CA	Zip Code 92660
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Craig Huey</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address PO Box 4243		<b>Transaction ID : INCA8815</b>
City Diamond Bar	State CA	Zip Code 91765
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer Cdmg, Inc	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6600.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 16 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Huey**

Mailing Address PO Box 4243

City State Zip Code  
Diamond Bar CA 91765

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

Name of Employer Occupation  
Cdmg, Inc Owner

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : INCA8816**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**George D. Margolin**

Mailing Address 1701 Irvine Ave

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Self Self-Inventor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : INCA8818**

Amount of Each Receipt this Period  
**300.00**

**C.** Full Name (Last, First, Middle Initial)  
**Patrick Paddon**

Mailing Address 3229 Starline Drive

City State Zip Code  
Rancho Palos Verde CA 90275

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

Name of Employer Occupation  
Calfirst National Bancorp Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 18 / 2014**

**Transaction ID : INCA8813**

Amount of Each Receipt this Period  
**800.00**

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

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

**3700.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick Paddon**

Mailing Address 3229 Starline Drive

City Rancho Palos Verde State CA Zip Code 90275

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

Name of Employer Calfirst National Bancorp Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8811**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Paddon**

Mailing Address 3229 Starline Drive

City Rancho Palos Verde State CA Zip Code 90275

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

Name of Employer Calfirst National Bancorp Occupation Banker

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8812**

Amount of Each Receipt this Period  
2600.00

**C.** Full Name (Last, First, Middle Initial)  
**Frank N. Ricchiazzi**

Mailing Address 10549 Cogswell Ave.

City Las Vegas State NV Zip Code 89134

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 18 / 2014

**Transaction ID : INCA8819**

Amount of Each Receipt this Period  
400.00

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

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

5600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Marco Albertini**

Mailing Address 7711 Alberta Drive

City: Huntington Beach State: CA Zip Code: 92648

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

Name of Employer: Albertini Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 19 / 2014

**Transaction ID : INCA8836**

Amount of Each Receipt this Period: 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Mollie Lazarus**

Mailing Address 2135 Via Teca

City: San Clemente State: CA Zip Code: 92673

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

Name of Employer: Rehab Alliance Occupation: Physical Therapist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 06 / 19 / 2014

**Transaction ID : INCA8835**

Amount of Each Receipt this Period: 250.00

**C.** Full Name (Last, First, Middle Initial)  
**John Rickard**

Mailing Address 2632 Vista Drive

City: Newport Beach State: CA Zip Code: 92663

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

Name of Employer: Rickard Metals Occupation: Aero Space Metals

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 4400.00

Date of Receipt: 06 / 19 / 2014

**Transaction ID : INCA8837**

Amount of Each Receipt this Period: 2200.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 2632 Vista Drive

City Newport Beach State CA Zip Code 92663

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

Name of Employer Rickard Metals Occupation Aero Space Metals

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : INCA8838**

Amount of Each Receipt this Period  
1800.00

**B.** Full Name (Last, First, Middle Initial)  
**Sean Singleton**

Mailing Address 622 Norvell Street

City El Cerrito State CA Zip Code 94530

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

Name of Employer NewCap Partner Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : INCA8839**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Erick Wolf**

Mailing Address 619 Larkspur Ave

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Airwolf 3D Printers Occupation Founder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 19 / 2014

**Transaction ID : INCA8834**

Amount of Each Receipt this Period  
2000.00

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

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

4050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 36 Vintage

City Irvine State CA Zip Code 92620

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

Name of Employer JedaNetworks.com Occupation Technical Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : INCA8845**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 300.00

**B.** Full Name (Last, First, Middle Initial)  
**Edward Geehr**

Mailing Address 703 St. James Place

City Newport Beach State CA Zip Code 92663

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

Name of Employer Self Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : INCA8846**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Subbarao Myla**

Mailing Address 11 Rim Ridge

City Newport Coast State CA Zip Code 92657

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

Name of Employer Self Occupation Cardiologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : INCA8847**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 200.00

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

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

\_\_\_\_\_ 700.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Phillip M, Ramos jr.**

Mailing Address 1023 S. Taylor Ct.

City Anaheim Hills State CA Zip Code 92808

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

Name of Employer Self Occupation Philatron Wire&Cable

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 20 / 2014

**Transaction ID : INCA8848**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 206 Driftwood Rd

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 21 / 2014

**Transaction ID : INCA8726**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Fariborz Maseeh**

Mailing Address 4343 Von Karmen Ave

City Newport Beach State CA Zip Code 92660

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

Name of Employer Self Occupation investment manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4882.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : NONA9068**

Amount of Each Receipt this Period  
2600.00  
Event Fund-raiser

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

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

4800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Fariborz Maseeh**

Mailing Address 4343 Von Karmen Ave

City Newport Beach State CA Zip Code 92660

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

Name of Employer Self Occupation investment manager

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 22 / 2014

**Transaction ID : NONA9069**

Amount of Each Receipt this Period  
 282.00

Event Fund-raiser

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

Mailing Address 3150 Bristol Street Suite 400

City Costa Mesa State Zip Code 92626

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

Name of Employer Amen Clinics Inc Occupation CEO

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8862**

Amount of Each Receipt this Period  
 1400.00

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

Mailing Address 3150 Bristol Street Suite 400

City Costa Mesa State Zip Code 92626

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

Name of Employer Amen Clinics Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8861**

Amount of Each Receipt this Period  
 2600.00

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

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

4282.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Bragg**

Mailing Address 64515 Via Fermato

City State Zip Code  
Palm Springs CA 92264

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Self Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA8854**

Amount of Each Receipt this Period

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

Mailing Address 51 Ritz Cove Dr.

City State Zip Code  
Dana Point CA 92659

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Callahan & Blaine Attorney

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA8858**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**William F. Cote**

Mailing Address P.O. Box 21

City State Zip Code  
Corona Del Mar CA 92625

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Cote real estate investments Real Estate agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA8763**

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Margaret Goertzen</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 64515 Via Fermato		<b>Transaction ID : INCA8853</b>	
City Palm Springs	State CA	Zip Code 92264	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Self	Occupation Designer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Fred Minagar</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 12 Sierra Vista		<b>Transaction ID : INCA8863</b>	
City Laguna Niguel	State CA	Zip Code 92677	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00	
Name of Employer Minagar & Assoc. Inc.	Occupation Transportation Engineer		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Fevzi Oten</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 2 Gardenia		<b>Transaction ID : INCA8866</b>	
City Irvine	State CA	Zip Code 92620	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer Targus Inc	Occupation Vice President		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4250.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

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

FOR LINE NUMBER: PAGE 25 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Janet Racin**

Mailing Address 1695 Viking Road

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Retired Occupation Retired

Receipt For: 2016  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8865**

Amount of Each Receipt this Period  
 1400.00

4000.00

**B.** Full Name (Last, First, Middle Initial)  
**Janet Racin**

Mailing Address 1695 Viking Road

City Laguna Beach State CA Zip Code 92651

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8864**

Amount of Each Receipt this Period  
 2600.00

4000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jamen Shively**

Mailing Address 124 N. 48th St

City Seattle State WA Zip Code 98103

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

Name of Employer ICCCO Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8859**

Amount of Each Receipt this Period  
 2600.00

2600.00

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

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

6600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. John E. Staton</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 5805 Star Lane		<b>Transaction ID : INCA8857</b>	
City Houston	State TX	Zip Code 77057	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 200.00		

Full Name (Last, First, Middle Initial) <b>B. Yuri Vanetik</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 1085 Castlerock Lane		<b>Transaction ID : INCA8856</b>	
City Santa Ana	State CA	Zip Code 92705	Amount of Each Receipt this Period _____ 2000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Vanetik International, Llc	Occupation Finance		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2000.00		

Full Name (Last, First, Middle Initial) <b>C. Suzanne Wessman</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 2310 Park Newport		<b>Transaction ID : INCA8855</b>	
City Newport Beach	State	Zip Code 92660	Amount of Each Receipt this Period _____ 300.00
FEC ID number of contributing federal political committee.		C	
Name of Employer Altura Vistas LLC	Occupation High Tech Entertainment		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 2500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

**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 27 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Mike Yoshimura**

Mailing Address 11 Burlingame Ln

City Aliso Viejo State CA Zip Code 92656

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8860**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 485 Schooner

City Seal Beach State CA Zip Code 90740

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

Name of Employer Allied Anesthesia Inc. Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 23 / 2014

**Transaction ID : INCA8867**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Scott Anderson**

Mailing Address 14071 Evening Primrose Place

City Chino Hills State CA Zip Code 91709

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

Name of Employer zenith specialty bag co. inc Occupation President/CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
0.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8901**

Amount of Each Receipt this Period  
500.00

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

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

2700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 135		
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Larry Campeau**

Mailing Address 1955 Balearic Dr

City State Zip Code  
Costa Mesa CA 92626

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : INCA8891**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Ahmed Dehbozorgi**

Mailing Address 100 Bartitone

City State Zip Code  
Irvine CA 92620

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

Name of Employer Occupation  
Pacific Oil Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : INCA8894**

Amount of Each Receipt this Period  
2600.00

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

Mailing Address 507 Larkspur

City State Zip Code  
Corona Del Mar CA 92625

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

Name of Employer Occupation  
Bitcentral CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 24 / 2014

**Transaction ID : INCA8889**

Amount of Each Receipt this Period  
200.00

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Edwin C. Laird**

Mailing Address 255 Mayflower Drive

City Newport Beach State CA Zip Code 92660

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

Name of Employer Coatings Resource Corp. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8893**

Amount of Each Receipt this Period  
 2600.00

2700.00

**B.** Full Name (Last, First, Middle Initial)  
**Cristin Perry**

Mailing Address 23345 Caminito Telmo

City Laguna Hills State CA Zip Code 92653

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

Name of Employer Galaxy Solutions Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8898**

Amount of Each Receipt this Period  
 200.00

200.00

**C.** Full Name (Last, First, Middle Initial)  
**Donna Porter**

Mailing Address 215 Lewis Court

City Corona State CA Zip Code 92882

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

Name of Employer Self Occupation Assistant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8892**

Amount of Each Receipt this Period  
 2500.00

2500.00

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

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

5300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Qureshey, Ishrat</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 11741 Skyline Dr		<b>Transaction ID : INCA8903</b>	
City State Zip Code Santa Ana 92705	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>B. Safi Ur Qureshey</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 11741 Skyline Dr		<b>Transaction ID : INCA8902</b>	
City State Zip Code Santa Ana CA 92705	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Bife research Director		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Anna Rogacheva</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 24 / 2014	
Mailing Address 23345 Caminito Telmo		<b>Transaction ID : INCA8897</b>	
City State Zip Code Laguna Hills CA 92653	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C	Name of Employer Occupation SSU Student		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4200.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 31 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>Patsy M. Samson</b>		Date of Receipt MM / DD / YYYY 06 / 24 / 2014
Mailing Address 1199 Pacific Highway #3703		<b>Transaction ID : INCA8890</b>
City San Diego	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 3000.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Nasser Sharif</b>		Date of Receipt MM / DD / YYYY 06 / 24 / 2014
Mailing Address 3141 Ocana Ave		<b>Transaction ID : INCA8899</b>
City Long Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Self	Occupation Self	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Shakufeh Sharif</b>		Date of Receipt MM / DD / YYYY 06 / 24 / 2014
Mailing Address 3141 Ocana Ave		<b>Transaction ID : INCA8900</b>
City Long Beach	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Self	Occupation Self	Election Cycle-to-Date 2600.00
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7200.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 32 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Serge Skouliabine**

Mailing Address 1732 Ventura Blvd

City Encino	State CA	Zip Code 91316
----------------	-------------	-------------------

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

Name of Employer Monitor Group	Occupation CEO
-----------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8896**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Josh Stacy**

Mailing Address 14891 Doheny Circle

City Irvine	State CA	Zip Code 92604
----------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8888**

Amount of Each Receipt this Period  
1400.00

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

Mailing Address 523 W. 6th Street, Suite 716

City Los Angeles	State CA	Zip Code 90014
---------------------	-------------	-------------------

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

Name of Employer DR WELCH Attorneys At Law	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8895**

Amount of Each Receipt this Period  
2000.00

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

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

3600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Nancy Yoshimura**

Mailing Address 11 Burlingame Ln

City Aliso Viejo State CA Zip Code 92656

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 24 / 2014

**Transaction ID : INCA8887**

Amount of Each Receipt this Period  
 2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Thomas R. Adams**

Mailing Address P.O. Box 1157

City Newport Beach State CA Zip Code 92659

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

Name of Employer Tiodize Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8922**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Corinne AndersonSchoepe**

Mailing Address 30800 Rancho Viejo Road

City San Juan Capistran State CA Zip Code 92675

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

Name of Employer Fluidmaster Occupation Product Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8929**

Amount of Each Receipt this Period  
 2000.00

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

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

6600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Robert AndersonSchoepe**

Mailing Address 30800 Rancho Viejo Road

City San Juan Capistran State CA Zip Code 92675

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

Name of Employer Fluidmaster Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8927**

Amount of Each Receipt this Period  
 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Teri AndersonSchoepe**

Mailing Address 30800 Rancho Viejo Road

City San Juan Capistran State CA Zip Code 92675

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

Name of Employer Self Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8928**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Torrey AndersonSchoepe**

Mailing Address 30800 Rancho Viejo Road

City San Juan Capistran State CA Zip Code 92675

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

Name of Employer Yahoo News Occupation Editor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8930**

Amount of Each Receipt this Period  
 2000.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Sally Bender**

Mailing Address 35 Burning Tree Rd

City Newport Beach State CA Zip Code 92660

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

Name of Employer: Hobby People Occupation: Administrator

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6000.00**

Date of Receipt: **06 / 25 / 2014**

**Transaction ID : INCA8745**

Amount of Each Receipt this Period: **1400.00**

**B.** Full Name (Last, First, Middle Initial)  
**Sally Bender**

Mailing Address 35 Burning Tree Rd

City Newport Beach State CA Zip Code 92660

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

Name of Employer: Hobby People Occupation: Administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **6000.00**

Date of Receipt: **06 / 25 / 2014**

**Transaction ID : INCA8744**

Amount of Each Receipt this Period: **2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara Blackman**

Mailing Address PO Box 823

City Palos Verdes Estat State CA Zip Code 90274

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

Name of Employer: None Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **35.00**

Date of Receipt: **06 / 25 / 2014**

**Transaction ID : INCA8755**

Amount of Each Receipt this Period: **35.00**

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

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

**4035.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**G. Jeffrey Brown**

Mailing Address 1416 Vancouver Ave

City State Zip Code  
Burlingame CA 94010

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

Name of Employer Occupation  
Electronic Arts Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8727**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Agnes M. Buchanan**

Mailing Address 20 N. Encino

City State Zip Code  
Laguna Beach CA 92651

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

Name of Employer Occupation  
Requesting Info

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8738**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sharyn L. Buffa**

Mailing Address 2824 Nevis Cir

City State Zip Code  
Costa Mesa CA 92626

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

Name of Employer Occupation  
Info Requested Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8771**

Amount of Each Receipt this Period  
300.00

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

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

3300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Chamaa**

Mailing Address 6661 Alamitos Cir

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation  
AESCO TECHNOLOGIES, INC. Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8731**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Keith D. Curry**

Mailing Address PO Box 5927

City State Zip Code  
Newport Beach CA 92662

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

Name of Employer Occupation  
Public Financial Management Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8739**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jean Dales**

Mailing Address 417 Main Street  
Suite 101

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8748**

Amount of Each Receipt this Period  
**200.00**

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

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

**900.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Lily Dedukh**

Mailing Address 1 Gallery Place

City Newport Coast State CA Zip Code 92657

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

Name of Employer Self Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8933**

Amount of Each Receipt this Period  
 200.00

**B.** Full Name (Last, First, Middle Initial)  
**Kadee Della Donna**

Mailing Address 1900 E. Ocean Blvd, Unit 1714

City Long Beach State CA Zip Code 90802

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8936**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jim Eggers**

Mailing Address 16962 Concord Ln

City Huntington Beach State CA Zip Code 92649

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

Name of Employer oracle corp Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8751**

Amount of Each Receipt this Period  
 200.00

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Gregory B. Ford**

Mailing Address 2 Via Giada

City: Newport Coast State: CA Zip Code: 92657

FEC ID number of contributing federal political committee: C

Name of Employer: RCS Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8732**

Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Fred Fourcher**

Mailing Address 507 Larkspur

City: Corona Del Mar State: CA Zip Code: 92625

FEC ID number of contributing federal political committee: C

Name of Employer: Bitcentral Occupation: CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8938**

Amount of Each Receipt this Period: 800.00

**C.** Full Name (Last, First, Middle Initial)  
**General Atomics/Pac**

Mailing Address 2941 Coleridge Drive

City: Los Alamitos State: CA Zip Code: 90720

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8740**

Amount of Each Receipt this Period: 2000.00

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

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

3800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 12904 Fairhaven Extension

City Santa Ana State CA Zip Code 92705

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

Name of Employer American Correctional Solutions Occupation Contract Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8733**

Amount of Each Receipt this Period  
**200.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mark Griffin**

Mailing Address 1410 Anacapa

City Irvine State CA Zip Code 92602

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8729**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Sharon Grimes**

Mailing Address 219 Via Eboli

City Newport Beach State CA Zip Code 92663

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

Name of Employer Self Realtor/ Gas and Oil Occupation Special projects Alon USA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8735**

Amount of Each Receipt this Period  
**200.00**

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

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

**600.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Evi B. Gurney**

Mailing Address 2256 Port Durness Pl

City Newport Beach State CA Zip Code 92660

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

Name of Employer All American Racers Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8737**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 3936 Birmingham Ln NW

City Rochester State MN Zip Code 55901

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8759**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 80 Monarch Bay

City Newport Beach State CA Zip Code 92529

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8747**

Amount of Each Receipt this Period  
 1000.00

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

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

2300.00

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

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

FOR LINE NUMBER: (check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15  
 PAGE 42 OF 135

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**J.F. Shea Construction**

Mailing Address 667 Brea Canyon Rd  
 Suite 30

City Walnut State CA Zip Code 91789

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8741**

Amount of Each Receipt this Period  
 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Robert Jones**

Mailing Address 17782 Crestmoor Ln

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Occupation

Info Requested Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8753**

Amount of Each Receipt this Period  
 250.00

**C.** Full Name (Last, First, Middle Initial)  
**Arthur M. Kassel**

Mailing Address 6144 1/4 Chesebro Road

City Agoura Hills State CA Zip Code 91301

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

Name of Employer Occupation  
 Arthur Kassel Business Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8935**

Amount of Each Receipt this Period  
 2000.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Kenneth L. Khachigian**

Mailing Address 501 W.Lobos Marinos

City San Clemente State CA Zip Code 92672

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

Name of Employer Brownstein Hyatt Farber Schreck, Llp Occupation Senior Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8742**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Cynara D. Kidwell**

Mailing Address 4755 Long Branch Ave

City San Diego State CA Zip Code 92107

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

Name of Employer Self Occupation Computer Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8734**

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
**Semsettin Kilic**

Mailing Address 601 E Pinehurst Avenue

City La Habra State CA Zip Code 90631

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

Name of Employer At&T Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8937**

Amount of Each Receipt this Period  
400.00

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

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

950.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Lambert**

Mailing Address 3085 Country Club Dr

City State Zip Code  
Costa Mesa CA 92626

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

Name of Employer Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8752**

Amount of Each Receipt this Period  
 800.00

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

Mailing Address 805 Clemensen Avenue

City State Zip Code  
Santa Ana CA 92705

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

Name of Employer Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8749**

Amount of Each Receipt this Period  
 200.00

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

Mailing Address 6421 Bixby Hill Road

City State Zip Code  
Long Beach CA 90815

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

Name of Employer Occupation Owner  
Price Transfer Inc

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8762**

Amount of Each Receipt this Period  
 400.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 6421 Bixby Hill Road

City State Zip Code  
Long Beach CA 90815

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

Name of Employer Occupation  
Price Transfer Inc Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8761**

Amount of Each Receipt this Period  
2200.00

**B.** Full Name (Last, First, Middle Initial)  
**Bogdan Maglich**

Mailing Address 2785 Vista Umbrosa

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Cal. Sci. & Engineering Chairman & CTO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8756**

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
**Mayumi Murakami**

Mailing Address 5858 Engineer Drive

City State Zip Code  
Huntington Beach CA 92649

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

Name of Employer Occupation  
Women's Major League Softball VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8923**

Amount of Each Receipt this Period  
2000.00

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

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

4400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 1040 Bishop Ln

City San Dimas State CA Zip Code 91773

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

Name of Employer Southland Civic Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8728**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**Lyle Overby**

Mailing Address 27441 Grassland Dr

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer Self Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8730**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Kyle Pattison**

Mailing Address 1303 E Webster St

City Prairie Du Chien State WI Zip Code 53821

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8758**

Amount of Each Receipt this Period  
1000.00

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

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

1450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Diana Pipaloff**

Mailing Address 19744 Beach blvd

City: Huntington Beach State: CA Zip Code: 92648

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

Name of Employer: Self Occupation: Business Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 4000.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8770**

Amount of Each Receipt this Period: 2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Ralph Scriba**

Mailing Address 2055 Via Visalia

City: Palos Verdes est. State: CA Zip Code: 90274

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8754**

Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
**Sean Singleton**

Mailing Address 622 Norvell Street

City: El Cerrito State: CA Zip Code: 94530

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

Name of Employer: NewCap Partner Occupation: Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 25 / 2014

**Transaction ID : INCA8926**

Amount of Each Receipt this Period: 250.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 135	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Theresa Smith**

Mailing Address 2166 W. Broadway  
#100

City Anaheim State CA Zip Code 92804

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

Name of Employer Idrasil, Cannabis in a Pill Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : INCA8931**

Amount of Each Receipt this Period  
2200.00

**B.** Full Name (Last, First, Middle Initial)  
**Frank Tee**

Mailing Address 3552 Venture Dr

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : INCA8760**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**A. Omar Turbi**

Mailing Address 2516 Temple Hills Dr

City Laguna Hills State CA Zip Code 92651

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

Name of Employer Orbit Systems, Inc. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 25 / 2014

**Transaction ID : INCA8757**

Amount of Each Receipt this Period  
2000.00

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

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

4700.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Willard S. Voit**

Mailing Address P.O. boxn 600

City Newport Beach State CA Zip Code 92661

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

Name of Employer Voit-Nelson Corp Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8750**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address P.O, Box 17718

City Irvine State CA Zip Code 92623

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

Name of Employer Info Requested Occupation Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8746**

Amount of Each Receipt this Period  
**200.00**

**C.** Full Name (Last, First, Middle Initial)  
**Theresa Wilkes**

Mailing Address 4851 King Circle Unit B

City Huntington Beach State CA Zip Code 92649

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

Name of Employer Travelin with Theresa Occupation Travel Industry

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 25 / 2014**

**Transaction ID : INCA8934**

Amount of Each Receipt this Period  
**250.00**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Brian Willis**

Mailing Address 1 Gallery Place

City Newport Coast State CA Zip Code 92657

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

Name of Employer Occupation  
Brockstar - Royal Live Group Financier

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8932**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Jules Zeman**

Mailing Address 555 South Flower  
45th Floor

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation  
Haight Brown & Bonesteel Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8925**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jules Zeman**

Mailing Address 555 South Flower  
45th Floor

City Los Angeles State CA Zip Code 90071

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

Name of Employer Occupation  
Haight Brown & Bonesteel Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1700.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8924**

Amount of Each Receipt this Period  
700.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 316 Olive Ave  
#619

City State Zip Code  
Huntington Beach CA 92648

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

Name of Employer Occupation Info Requested  
Info Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
20.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : INCA8775**

Amount of Each Receipt this Period  
20.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Juan Y. Forster**

Mailing Address 1748 W. Business Center Dr

City State Zip Code  
Orange CA 92867

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : INCA8773**

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
**Maya Nicole Mayer**

Mailing Address

City State Zip Code  
Newport Coast CA 92657

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

Name of Employer Occupation  
Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 26 / 2014

**Transaction ID : INCA8776**

Amount of Each Receipt this Period  
1600.00

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

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

2020.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Maya Nicole Mayer**

Mailing Address

City State Zip Code  
Newport Coast CA 92657

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

Name of Employer Occupation  
Retired

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : INCA8777**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**Nedrick R McCune**

Mailing Address 424 E. 16th St

City State Zip Code  
Costa CA 92627

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

Name of Employer Occupation  
Self Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : INCA8774**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Loretta A. Molino**

Mailing Address 6201 Point Loma Drive

City State Zip Code  
Huntington Beach CA 92647

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 26 / 2014

**Transaction ID : INCA8772**

Amount of Each Receipt this Period  
250.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Tracy Price</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address 25241 Rockridge Road		<b>Transaction ID : INCA8956</b>	
City Laguna Hills	State CA	Amount of Each Receipt this Period 500.00	
Zip Code 92653			
FEC ID number of contributing federal political committee. C			
Name of Employer ABM	Occupation President & EVP		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>B. R&amp;S Harris</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014	
Mailing Address 500 Newport Center Dr. 7th FL		<b>Transaction ID : INCA8780</b>	
City Newport Beach	State CA	Amount of Each Receipt this Period 2000.00	
Zip Code 92660			
FEC ID number of contributing federal political committee. C			
Name of Employer Information Requested	Occupation trustee		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4600.00		

Full Name (Last, First, Middle Initial) <b>C. Laura Khouri</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 27 / 2014	
Mailing Address 8 Executive Cir		<b>Transaction ID : INCA8781</b>	
City Irvine	State CA	Amount of Each Receipt this Period 2000.00	
Zip Code 92614			
FEC ID number of contributing federal political committee. C			
Name of Employer Western National Group	Occupation Real Estate Executive		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 54 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin Cartwright**

Mailing Address 24302 Fairway Ln

City State Zip Code  
Coto De Caza CA 92679

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

Name of Employer Occupation  
Laguna College of Art & Design Dir, Development

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : INCA8974**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
**Donald J. Crevier**

Mailing Address 365-B Clinton St

City State Zip Code  
Costa Mesa CA 92626

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

Name of Employer Occupation  
Crevier Bmw Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : INCA8970**

Amount of Each Receipt this Period  
1600.00

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

Mailing Address 365-B Clinton St

City State Zip Code  
Costa Mesa CA 92626

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

Name of Employer Occupation  
Crevier Bmw Executive

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : INCA8971**

Amount of Each Receipt this Period  
400.00

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

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

2300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 135
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Halliburton, Erle</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 757 Domingo Dr Ste B		<b>Transaction ID : INCA8968</b>	
City Newport Beach	State CA	Zip Code 92660	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Halliburton	Occupation Trustee		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 100.00		

Full Name (Last, First, Middle Initial) <b>B. Gail Hutton</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 16761 Coral Cay Lane		<b>Transaction ID : INCA8972</b>	
City Huntington Beach	State CA	Zip Code 92649	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer Former HB City Attorney	Occupation Retired		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. Sarah Kiani</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 1 Point Catalina		<b>Transaction ID : INCA8958</b>	
City Laguna Niguel	State CA	Zip Code 92653	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00	
Name of Employer Self	Occupation Homemaker		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2800.00
<b>TOTAL</b> This Period (last page this line number only).....	2800.00

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

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

FOR LINE NUMBER: PAGE 56 OF 135  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Debra Klein-Sanner**

Mailing Address 440 Mendoza Terrace

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Self Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8959**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

**B.** Full Name (Last, First, Middle Initial)  
**Phyllis Morrison**

Mailing Address 908 S Bayfront

City Newport Beach State CA Zip Code 92662

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8973**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 50.00

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

Mailing Address 2446 Nautilus Ct.

City San Jose State CA Zip Code 95128

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

Name of Employer Self Occupation Self

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8962**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1400.00

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

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

\_\_\_\_\_ 1850.00

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

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

Mailing Address 2446 Nautilus Ct.

City San Jose State CA Zip Code 95128

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8961**

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
**Tom Pollack**

Mailing Address 600 E. Bay Ave

City Newport Beach State CA Zip Code 92661

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

Name of Employer Fun Zone Entertainment Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8966**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**James Schmachtenberger**

Mailing Address 315 S. Coast Hwy, #34

City Encinitas State CA Zip Code 92024

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

Name of Employer Science of Weed Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
150.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8969**

Amount of Each Receipt this Period  
150.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Cecil Spearman**

Mailing Address 23500 Club House

City Laguna Niguel State CA Zip Code 92677

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

Name of Employer Spearman Clubs Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8963**

Amount of Each Receipt this Period  
 350.00

**B.** Full Name (Last, First, Middle Initial)  
**Patricia Stern**

Mailing Address 25502 Nellie Gail

City Laguna Hills State CA Zip Code 92653

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

Name of Employer Self Occupation Self

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8960**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Philip Stump**

Mailing Address 1314 West Bay Avenue

City Newport Beach State CA Zip Code 92661

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

Name of Employer Allied Professional Insurance Occupation Insurance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8964**

Amount of Each Receipt this Period  
 2600.00

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

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

3150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Philip Stump**

Mailing Address 1314 West Bay Avenue

City State Zip Code  
Newport Beach CA 92661

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

Name of Employer Occupation  
Allied Professional Insurance Insurance

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8965**

Amount of Each Receipt this Period  
1800.00

**B.** Full Name (Last, First, Middle Initial)  
**Nicole Whyte**

Mailing Address 20320 S.W. Birch St.

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Brewer Whyte Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014

**Transaction ID : INCA8967**

Amount of Each Receipt this Period  
200.00

**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).....

2000.00

175135.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 135
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

**A.** Full Name (Last, First, Middle Initial)  
**Drug Policy Reform Fund**

Mailing Address 131 WEST 33RD STREET 15TH FLOOR

City State Zip Code  
New York NY 10001

FEC ID number of contributing federal political committee. **C** C00461236

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8743**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Salem Communications Corporation**

Mailing Address 4880 Santa Rosa Dr

City State Zip Code  
Camarillo CA 93012

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014

**Transaction ID : INCA8736**

Amount of Each Receipt this Period  
1000.00

**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).....

3000.00

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sobeida Butchko</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 3441 wimbledon way		Amount of Each Disbursement this Period 175.94 <b>Transaction ID : EXPB9040</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Reception Food Reimbursement	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB9038</b>
City Laguna Niguel	State CA	
Zip Code 92677	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 410.94 <b>Transaction ID : EXPB9039</b>
City Laguna Niguel	State CA	
Zip Code 92677	Purpose of Disbursement Expense Reimbursement	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2086.88
<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 62 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 31.89
City Austin	State CA	Zip Code 78701	
Purpose of Disbursement Credit Card Processing		Candidate Name	Transaction ID : EXPB8594
Category/Type 003			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Jonathan Adamany</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 41 Via Di Nola			Amount of Each Disbursement this Period 1000.00
City Laguna Niguel	State CA	Zip Code 92677	
Purpose of Disbursement HQ Salary		Candidate Name	Transaction ID : EXPB9042
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Rhonda Rohrabacher</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 447 Costa Mesa Street			Amount of Each Disbursement this Period 2170.09
City Costa Mesa	State CA	Zip Code 92627	
Purpose of Disbursement Salary		Candidate Name	Transaction ID : EXPB8606
Category/Type 001			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3201.98
<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 63 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. 3DNA</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 448 S. Hill St. Suite 200		Amount of Each Disbursement this Period 246.00
City Los Angeles	State CA Zip Code 90013	
Purpose of Disbursement Web/Online Services	Category/Type 004	<b>Transaction ID : EXPB8647</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bluehost.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 1270 Pacific Avenue		Amount of Each Disbursement this Period 51.96
City Laguna Beach	State CA Zip Code 92651	
Purpose of Disbursement Web Host	Category/Type 001	<b>Transaction ID : EXPB8670</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bluehost.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 1270 Pacific Avenue		Amount of Each Disbursement this Period 14.99
City Laguna Beach	State CA Zip Code 92651	
Purpose of Disbursement Web Host	Category/Type 001	<b>Transaction ID : EXPB8669</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	312.95
<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 64 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Alpine Fresh</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 433 E Columbine Ave		Amount of Each Disbursement this Period 192.00
City Santa Ana State CA Zip Code 92707	Purpose of Disbursement HQ Supplies	
Candidate Name	Category/Type 001	Transaction ID : EXPB9044
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 159.49
City Carol Stream State IL Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	
Candidate Name	Category/Type 001	Transaction ID : EXPB8646
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City of Fountain Valley</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 10200 Slater Ave		Amount of Each Disbursement this Period 43.00
City Fountain Valley State CA Zip Code 92708-4794	Purpose of Disbursement Utilities	
Candidate Name	Category/Type 001	Transaction ID : EXPB9045
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	394.49
<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 65 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Seacliff Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 18100 Kovacs Lane		Amount of Each Disbursement this Period 134.00 <b>Transaction ID : EXPB8645</b>
City Huntington Beach	State CA	
Zip Code 92648	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Southern California Edison</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 1325 S Grand Ave		Amount of Each Disbursement this Period 155.64 <b>Transaction ID : EXPB9037</b>
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. United States Postal Service</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2014
Mailing Address 6771 Warner Avenue		Amount of Each Disbursement this Period 128.00 <b>Transaction ID : EXPB9043</b>
City Huntington Beach	State CA	
Zip Code 92647-9000	Purpose of Disbursement PO Box Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	417.64
<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 66 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 818.34 <b>Transaction ID : EXPB8994</b>
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Ning Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 285 Hamilton St.Fourth Floor		Amount of Each Disbursement this Period 524.85 <b>Transaction ID : EXPB8644</b>
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Web/Online Services	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Seacliff Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2014
Mailing Address 18100 Kovacs Lane		Amount of Each Disbursement this Period 134.00 <b>Transaction ID : EXPB8995</b>
City Huntington Beach	State CA	
Zip Code 92648	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	818.34
<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 67 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Chevron</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 6972 Warner Avenue		Amount of Each Disbursement this Period 100.79
City Huntington Beach	State CA	
Zip Code 92647	Purpose of Disbursement Campaign Staff Fuel	<b>Transaction ID : EXPB8997</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ning Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 285 Hamilton St.Fourth Floor		Amount of Each Disbursement this Period 524.85
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Web/Online Services	<b>Transaction ID : EXPB8996</b>
Candidate Name	004 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Processing	<b>Transaction ID : EXPB8765</b>
Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	642.64
<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 68 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. LinkedIn</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2014
Mailing Address 2029 Stierlin Court		Amount of Each Disbursement this Period 49.95 <b>Transaction ID : EXPB8998</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Online/Web Services	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 888 7th Street		Amount of Each Disbursement this Period 45.00 <b>Transaction ID : EXPB9070</b>
City Los Angeles	State CA	
Zip Code 90017	Purpose of Disbursement Wire Transfer Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : EXPB9036</b>
City Whitemoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1594.95
<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 69 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Mike Hancock</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014		
Mailing Address 3419 Via Lido #183			Amount of Each Disbursement this Period 240.00		
City Newport Beach	State CA	Zip Code 92663	Transaction ID : EXPB9046		
Purpose of Disbursement HQ Salary		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Registrar of Voters</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2014		
Mailing Address 1300 S Grand Ave # C			Amount of Each Disbursement this Period 203.65		
City Santa Ana	State CA	Zip Code 92705	Transaction ID : EXPB9058		
Purpose of Disbursement Voter Data Reimbursement		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Mail Chimp</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2014		
Mailing Address 512 Means St Suite 404			Amount of Each Disbursement this Period 127.50		
City Atlanta	State GA	Zip Code 30318	Transaction ID : EXPB8999		
Purpose of Disbursement Web/Online Services		Category/ Type 004			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	571.15
<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 70 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Fountain Plaza</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 18633 Brookhurst St		Amount of Each Disbursement this Period 400.00
City Fountain Valley	State CA	
Zip Code 92708	Purpose of Disbursement FV/HB Rent	Transaction ID : EXPB9079
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Harris, Robert 'Chip'</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 46 Old Course Drive		Amount of Each Disbursement this Period 2600.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Fundraising Event	Transaction ID : NONB9082
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shawn Harris</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 46 Old Course Drive		Amount of Each Disbursement this Period 2600.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Fundraising Event	Transaction ID : NONB9081
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5600.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sandra Larkin</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB9075</b>
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Registrar of Voters</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 1300 S Grand Ave # C		Amount of Each Disbursement this Period 103.77 <b>Transaction ID : EXPB9057</b>
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement AV Update	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Rhonda Rohrabacher</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2014
Mailing Address 447 Costa Mesa Street		Amount of Each Disbursement this Period 2170.08 <b>Transaction ID : EXPB8718</b>
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3273.85
<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 72 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Rallycongress.com</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 02 / 2014</b>
Mailing Address <b>2200 Wilson Blvd. #102-299</b>		Amount of Each Disbursement this Period <b>149.00</b> <b>Transaction ID : EXPB9001</b>
City <b>Arlington</b> State <b>VA</b> Zip Code <b>22201</b>	Purpose of Disbursement <b>Web/Online Services</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period <b>10.00</b> <b>Transaction ID : EXPB9003</b>
Disbursement For: <b>2014</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. Map Large Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 03 / 2014</b>
Mailing Address <b>1201 Peachtree St NE #200</b>		Amount of Each Disbursement this Period <b>10.00</b> <b>Transaction ID : EXPB9003</b>
City <b>Atlanta</b> State <b>GA</b> Zip Code <b>30361</b>	Purpose of Disbursement <b>Precinct map</b> Category/Type <b>001</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period <b>6.38</b> <b>Transaction ID : EXPB8767</b>
Disbursement For: <b>2014</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. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 03 / 2014</b>
Mailing Address <b>401 W 15th Street. Suite 520</b>		Amount of Each Disbursement this Period <b>6.38</b> <b>Transaction ID : EXPB8767</b>
City <b>Austin</b> State <b>CA</b> Zip Code <b>78701</b>	Purpose of Disbursement <b>Credit Card Processing</b> Category/Type <b>003</b>	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Amount of Each Disbursement this Period <b>165.38</b>
Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>165.38</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 73 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. The Wild Goose Tavern</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2014
Mailing Address 436 E 17th Street		Amount of Each Disbursement this Period 58.84
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Fundraiser Food	Transaction ID : EXPB9002
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Pacific Fundraising Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 3501 Jamboree Road		Amount of Each Disbursement this Period 2000.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Fundraiser	Transaction ID : EXPB9056
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	Transaction ID : EXPB8880
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2169.34
<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 74 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8789	
Purpose of Disbursement Credit Card Proccesing		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 21.25	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8790	
Purpose of Disbursement Credit Card Proccesing		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8844	
Purpose of Disbursement Credit Card Proccesing		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	242.25
<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 75 OF 135		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Radio Shack</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 2075 Newport Boulevard		Amount of Each Disbursement this Period 75.57
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : EXPB9006</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Smart &amp; Final</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 707 West 19th Street		Amount of Each Disbursement this Period 271.62
City Costa Mesa	State CA	
Zip Code 92627	Purpose of Disbursement Fundraiser Food	<b>Transaction ID : EXPB9005</b>
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 195.47
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : EXPB9004</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	542.66
<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 76 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Bluehost.Com</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 1270 Pacific Avenue		Amount of Each Disbursement this Period 71.94
City Laguna Beach	State CA Zip Code 92651	
Purpose of Disbursement Web Host	Category/Type 001	<b>Transaction ID : EXPB9012</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cafe Rio</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 253 E 17th St		Amount of Each Disbursement this Period 24.79
City Costa Mesa	State CA Zip Code 92626	
Purpose of Disbursement Campaign Meal	Category/Type 007	<b>Transaction ID : EXPB9008</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 418.12
City Laguna Niguel	State CA Zip Code 92677	
Purpose of Disbursement Expense Reimbursement	Category/Type 007	<b>Transaction ID : EXPB9078</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	514.85
<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 77 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00
City Laguna Niguel	State CA Zip Code 92677	
Purpose of Disbursement Salary	Category/Type 001	<b>Transaction ID : EXPB9047</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nimble</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 2043 Colorado Avenue, Suite B		Amount of Each Disbursement this Period 45.00
City Santa Monica	State CA Zip Code 90404	
Purpose of Disbursement Online/Web Services	Category/Type 001	<b>Transaction ID : EXPB9011</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Bill Perkins</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 30 MIDTOWN DR		Amount of Each Disbursement this Period 41.00
City Aliso Viejo	State CA Zip Code 92656	
Purpose of Disbursement Phone Reimbursement	Category/Type 001	<b>Transaction ID : EXPB9048</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1586.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 7000 Central Ave SW		Amount of Each Disbursement this Period 5.00 <b>Transaction ID : EXPB9010</b>
City Albuquerque	State NM	
Zip Code 87121	Purpose of Disbursement Campaign Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 7000 Central Ave SW		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : EXPB9009</b>
City Albuquerque	State NM	
Zip Code 87121	Purpose of Disbursement Campaign Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 7000 Central Ave SW		Amount of Each Disbursement this Period 5.00 <b>Transaction ID : EXPB9007</b>
City Albuquerque	State NM	
Zip Code 87121	Purpose of Disbursement Campaign Telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	40.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Zinc Cafe</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2014
Mailing Address 3222 East Coast Hwy		Amount of Each Disbursement this Period 35.49
City Corona Del Mar	State CA	
Zip Code 92625	Purpose of Disbursement Campaign Meal	<b>Transaction ID : EXPB9013</b>
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Libby Huyck</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 963 Sandcastle Dr.		Amount of Each Disbursement this Period 500.00
City Corona Del Mar	State CA	
Zip Code 92625	Purpose of Disbursement HQ Salary	<b>Transaction ID : EXPB9054</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Libby Huyck</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014
Mailing Address 963 Sandcastle Dr.		Amount of Each Disbursement this Period 133.91
City Corona Del Mar	State CA	
Zip Code 92625	Purpose of Disbursement Expense Reimbursement	<b>Transaction ID : EXPB9055</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	669.40
<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 80 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 12.75		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8792		
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B. DMH Meyer Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014		
Mailing Address 1560-1 Newbury Road #212			Amount of Each Disbursement this Period 3500.00		
City Newbury Park	State CA	Zip Code 91320	Transaction ID : EXPB9066		
Purpose of Disbursement Campaign Event Printing		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 21.25		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8794		
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3534.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Ustream TV</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2014
Mailing Address 410 Townsend Street, Ste 400		Amount of Each Disbursement this Period 99.00
City San Francisco State CA Zip Code 94107	Category/Type 004	
Purpose of Disbursement Web/Online Services	Candidate Name	<b>Transaction ID : EXPB9014</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Jonathan Adamany</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 41 Via Di Nola		Amount of Each Disbursement this Period 500.00
City Laguna Niguel State CA Zip Code 92677	Category/Type 001	
Purpose of Disbursement HQ Salary	Candidate Name	<b>Transaction ID : EXPB9065</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Jonathan Adamany</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 41 Via Di Nola		Amount of Each Disbursement this Period 500.00
City Laguna Niguel State CA Zip Code 92677	Category/Type 001	
Purpose of Disbursement HQ Salary	Candidate Name	<b>Transaction ID : EXPB9063</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1099.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 290.15 <b>Transaction ID : EXPB9016</b>
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Sandra Larkin</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 2706 Hillside Drive		Amount of Each Disbursement this Period 130.00 <b>Transaction ID : EXPB9064</b>
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Expense Reimbursement	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. MyFonts Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 10 / 2014
Mailing Address 500 Unicorn Park Drive		Amount of Each Disbursement this Period 37.00 <b>Transaction ID : EXPB9015</b>
City Woburn	State MA	
Zip Code 01801	Purpose of Disbursement Online/Web Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	457.15
<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 83 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 42.50 <b>Transaction ID : EXPB8796</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Adobe Systems Incorporated</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 29.99 <b>Transaction ID : EXPB9017</b>
City San Jose State CA Zip Code 95110-2704	Purpose of Disbursement Web/Online Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 21.25 <b>Transaction ID : EXPB8801</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	93.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 2.13 <b>Transaction ID : EXPB8802</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 12.75 <b>Transaction ID : EXPB8800</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 12.75 <b>Transaction ID : EXPB8886</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 135		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Ning Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 285 Hamilton St.Fourth Floor		Amount of Each Disbursement this Period 52.85
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Web/Online Services	<b>Transaction ID : EXPB9018</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Seacliff Self Storage</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 18100 Kovacs Lane		Amount of Each Disbursement this Period 94.00
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Storage	<b>Transaction ID : EXPB9019</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Toll Roads</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2014
Mailing Address 9 Avenida Del Mar		Amount of Each Disbursement this Period 60.00
City San Clemente	State CA	
Zip Code 92672	Purpose of Disbursement District Travel	<b>Transaction ID : EXPB9000</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	206.85
<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 86 OF 135		
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Balboa Bay Club</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 620 Temple Hills Drive		Amount of Each Disbursement this Period 8.00
City Laguna Beach	State CA	
Zip Code 92651	Purpose of Disbursement Parking	<b>Transaction ID : EXPB9020</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jonvieve Grist</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2014
Mailing Address 1 Tolcarne Villas		Amount of Each Disbursement this Period 1000.00
City Whitemoor Cornwall	State UK	
Zip Code 267	Purpose of Disbursement Database Management	<b>Transaction ID : EXPB9071</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Nazanin Namazi</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1500.00
City Laguna Niguel	State CA	
Zip Code 92677	Purpose of Disbursement HQ Salary	<b>Transaction ID : EXPB9076</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2508.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Rhonda Rohrabacher</b>			Date of Disbursement MM / DD / YYYY 06 / 15 / 2014	
Mailing Address 447 Costa Mesa Street			Amount of Each Disbursement this Period 2170.09	
City Costa Mesa	State CA	Zip Code 92627	Transaction ID : EXPB8719	
Purpose of Disbursement Salary		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Highrise</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2014	
Mailing Address 30 North Racine Avenue #200			Amount of Each Disbursement this Period 49.00	
City Chicago	State IL	Zip Code 60607	Transaction ID : EXPB9023	
Purpose of Disbursement Online/Web Services		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Mail Chimp</b>			Date of Disbursement MM / DD / YYYY 06 / 16 / 2014	
Mailing Address 512 Means St Suite 404			Amount of Each Disbursement this Period 3.83	
City Atlanta	State GA	Zip Code 30318	Transaction ID : EXPB9022	
Purpose of Disbursement Web/Online Services		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2222.92
<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 88 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 10.63	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8806	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 10.63	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8808	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 16 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 10.63	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8807	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	31.89
<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 89 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 7131 Yorktown Ave.		Amount of Each Disbursement this Period 490.00
City Huntington Beach	State CA	
Zip Code 92648	Purpose of Disbursement Campaign Office Supplies	<b>Transaction ID : EXPB9021</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United States Treasury</b>		Date of Disbursement MM / DD / YYYY 06 / 16 / 2014
Mailing Address 324 25th Street		Amount of Each Disbursement this Period 8078.76
City Odgen	State UT	
Zip Code 84201-0039	Purpose of Disbursement Payroll Taxes	<b>Transaction ID : EXPB9072</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 159.49
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Phone and Internet	<b>Transaction ID : EXPB9024</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8728.25
<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 90 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Fountain Plaza</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 18633 Brookhurst St		Amount of Each Disbursement this Period 400.00
City Fountain Valley	State CA	
Zip Code 92708	Purpose of Disbursement FV/HB Rent	<b>Transaction ID : EXPB9077</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Processing	<b>Transaction ID : EXPB8810</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 300 1st St SE		Amount of Each Disbursement this Period 84.31
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraiser Food	<b>Transaction ID : EXPB9025</b>
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	594.81
<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 91 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8830	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8824	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 12.75	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8828	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	208.25
<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 92 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 148.75 <b>Transaction ID : EXPB8825</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50 <b>Transaction ID : EXPB8826</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : EXPB8829</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	148.75
<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 93 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 206.13 <b>Transaction ID : EXPB8827</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8831</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50 <b>Transaction ID : EXPB8885</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	206.13
<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 94 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 34.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8884
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8833
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 119.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8883
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	229.50
<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 95 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 18 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8832
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>B. Nation Builder</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 448 S Hill St Suite 200		Amount of Each Disbursement this Period 189.39
City Loa Angeles State CA Zip Code 90013	Purpose of Disbursement Software	
Candidate Name		Transaction ID : EXPB9026
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 12.75
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8842
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	287.14
<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 96 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 10.63
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8841
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 93.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8843
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8840
Office Sought: House Senate President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	189.13
<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 97 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Baker Party Rentals</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 1151 Baker St			Amount of Each Disbursement this Period 770.00
City Costa Mesa	State CA	Zip Code 92626	
Purpose of Disbursement Fundraising Rentals		Candidate Name	Transaction ID : EXPB9028
Category/Type 003			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Hi Times Cellars</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 250 Ogle Street			Amount of Each Disbursement this Period 3843.05
City Costa Mesa	State CA	Zip Code 92627	
Purpose of Disbursement Fundraiser Food & Beverage		Candidate Name	Transaction ID : EXPB9029
Category/Type 003			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2014
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 250.00
City Austin	State CA	Zip Code 78701	
Purpose of Disbursement Credit Card Processing		Candidate Name	Transaction ID : EXPB9073
Category/Type 003			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4863.05
<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 98 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 20 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 8.50		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8851		
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 20 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 12.75		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8852		
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 20 / 2014		
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00		
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8849		
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	106.25
<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 99 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8850
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 06 / 20 / 2014
Mailing Address 7000 Central Ave SW		Amount of Each Disbursement this Period 260.91
City Albuquerque State NM Zip Code 87121	Purpose of Disbursement Campaign Telephone	
Candidate Name	Category/Type 001	Transaction ID : EXPB9027
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Fariborz Maseeh</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address 4343 Von Karmen Ave		Amount of Each Disbursement this Period 282.00
City Newport Beach State CA Zip Code 92660	Purpose of Disbursement Event Fund-raiser	
Candidate Name	Category/Type	Transaction ID : NONB9069
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	551.41
<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 100 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Fariborz Maseeh</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address 4343 Von Karmen Ave		Amount of Each Disbursement this Period 2600.00
City Newport Beach	State CA	
Zip Code 92660	Purpose of Disbursement Event Fund-raiser	Transaction ID : NONB9068
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Streamline Valet</b>		Date of Disbursement MM / DD / YYYY 06 / 22 / 2014
Mailing Address 16033 Bolsa Chica St. 104-228		Amount of Each Disbursement this Period 350.00
City Huntington Beach	State CA	
Zip Code 92649	Purpose of Disbursement Valet for Event	Transaction ID : EXPB9080
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Bed Bath and Beyond</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 3900 Bristol Street		Amount of Each Disbursement this Period 12.94
City Santa Ana	State CA	
Zip Code 92704	Purpose of Disbursement Campaign Event Supplies	Transaction ID : EXPB9031
Candidate Name	Category/Type 006	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2962.94
<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 101 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Sobeida Butchko</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 3441 wimbledon way		Amount of Each Disbursement this Period 877.80
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Food Reimbursement	Transaction ID : EXPB9067
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ning Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 285 Hamilton St.Fourth Floor		Amount of Each Disbursement this Period 524.85
City Palo Alto	State CA	
Zip Code 94301	Purpose of Disbursement Web/Online Services	Transaction ID : EXPB9030
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin	State CA	
Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	Transaction ID : EXPB8882
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1411.15
<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 102 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8878</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8879</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		<b>Transaction ID : EXPB8876</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	306.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 10.63	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8881	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8875	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 59.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8877	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	155.13
<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 104 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8873</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8868</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8869</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8874	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 12.75	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8870	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 8.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8872	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	131.75
<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 106 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8871
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 21.25
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8919
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 59.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8906
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	165.75
<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 107 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8907
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8909
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8918
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8904
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8917
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8916
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	229.50
<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 109 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8920</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : EXPB8914</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8908</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	178.50
<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 110 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8921
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8915
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 106.25
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name		Transaction ID : EXPB8910
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 003	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	199.75
<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 111 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 24 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8912	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 24 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8913	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 24 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 110.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8911	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	306.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 112 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8953
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 10.63
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8943
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8940
Office Sought: House Senate President Disbursement For: 2014 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	180.63
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 113 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8950
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 10.63
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8951
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8939
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	104.13
<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 114 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 85.00 <b>Transaction ID : EXPB8952</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 34.00 <b>Transaction ID : EXPB8955</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : EXPB8954</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	136.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 25 / 2014</b>
Mailing Address <b>401 W 15th Street. Suite 520</b>		Amount of Each Disbursement this Period <b>93.50</b>
City <b>Austin</b> State <b>CA</b> Zip Code <b>78701</b>	Purpose of Disbursement <b>Credit Card Proccesing</b> Category/Type <b>003</b>	
Candidate Name		<b>Transaction ID : EXPB8948</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 25 / 2014</b>
Mailing Address <b>401 W 15th Street. Suite 520</b>		Amount of Each Disbursement this Period <b>85.00</b>
City <b>Austin</b> State <b>CA</b> Zip Code <b>78701</b>	Purpose of Disbursement <b>Credit Card Proccesing</b> Category/Type <b>003</b>	
Candidate Name		<b>Transaction ID : EXPB8947</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 25 / 2014</b>
Mailing Address <b>401 W 15th Street. Suite 520</b>		Amount of Each Disbursement this Period <b>12.75</b>
City <b>Austin</b> State <b>CA</b> Zip Code <b>78701</b>	Purpose of Disbursement <b>Credit Card Proccesing</b> Category/Type <b>003</b>	
Candidate Name		<b>Transaction ID : EXPB8949</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>191.25</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 116 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 25 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8945	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 25 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8944	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement MM / DD / YYYY 06 / 25 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 85.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8946	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 42.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8942	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 29.75	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8941	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. LinkedIn</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014	
Mailing Address 2029 Stierlin Court			Amount of Each Disbursement this Period 49.95	
City Mountain View	State CA	Zip Code 94043	Transaction ID : EXPB9032	
Purpose of Disbursement Online/Web Services		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	122.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 26 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 21.25
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8957
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DMH Meyer Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 1560-1 Newbury Road #212		Amount of Each Disbursement this Period 1290.00
City Newbury Park State CA Zip Code 91320	Purpose of Disbursement Doorknob Hangers	
Candidate Name	Category/Type 006	Transaction ID : EXPB9049
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. DMH Meyer Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 1560-1 Newbury Road #212		Amount of Each Disbursement this Period 4847.42
City Newbury Park State CA Zip Code 91320	Purpose of Disbursement Letter Mailings	
Candidate Name	Category/Type 006	Transaction ID : EXPB9050
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6158.67
<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 119 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Fountain Plaza</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 18633 Brookhurst St		Amount of Each Disbursement this Period 400.00 <b>Transaction ID : EXPB9051</b>
City Fountain Valley	State CA	
Zip Code 92708	Purpose of Disbursement FV/HB July August Rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB9052</b>
City Laguna Niguel	State CA	
Zip Code 92677	Purpose of Disbursement HQ Salary	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Nazanin Namazi</b>		Date of Disbursement MM / DD / YYYY 06 / 27 / 2014
Mailing Address 29726 Felton Drive		Amount of Each Disbursement this Period 434.32 <b>Transaction ID : EXPB9053</b>
City Laguna Niguel	State CA	
Zip Code 92677	Purpose of Disbursement Expense Reimbursement	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1834.32
<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 120 OF 135			
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Capital Grille</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 3333 Bristol Street #3802		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB9033</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Campaign Volunteer Meal	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 512 Means St Suite 404		Amount of Each Disbursement this Period 127.50 <b>Transaction ID : EXPB9034</b>
City Atlanta	State GA	
Zip Code 30318	Purpose of Disbursement Web/Online Services	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Mail Chimp</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 512 Means St Suite 404		Amount of Each Disbursement this Period 6.38 <b>Transaction ID : EXPB9035</b>
City Atlanta	State GA	
Zip Code 30318	Purpose of Disbursement Web/Online Services	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	333.88
<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 121 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 17.00	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8988	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 8.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8984	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 4.25	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8989	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	29.75
<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 122 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 4.25 <b>Transaction ID : EXPB8985</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 68.00 <b>Transaction ID : EXPB8987</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : EXPB8983</b>
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	82.88
<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 123 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 6.38	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8986	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 76.50	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8982	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014	
Mailing Address 401 W 15th Street. Suite 520			Amount of Each Disbursement this Period 14.88	
City Austin	State CA	Zip Code 78701	Transaction ID : EXPB8980	
Purpose of Disbursement Credit Card Proccesing		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	97.76
<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 124 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8991
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8975
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8981
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	238.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 125 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 17.00
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8976
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 110.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8978
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 59.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing	
Candidate Name	Category/Type 003	Transaction ID : EXPB8979
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	187.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 126 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 8.50
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8977
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Piryx Inc</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2014
Mailing Address 401 W 15th Street. Suite 520		Amount of Each Disbursement this Period 2.13
City Austin State CA Zip Code 78701	Purpose of Disbursement Credit Card Proccesing 003 Category/Type	
Candidate Name		Transaction ID : EXPB8990
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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 Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10.63
<b>TOTAL</b> This Period (last page this line number only).....	67538.17

**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 127 OF 135	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Scott Anderson</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 14071 Evening Primrose Place		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB9061</b>
City Chino Hills State CA Zip Code 91709	Purpose of Disbursement Refund of Contribution Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Juan Y. Forster</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 1748 W. Business Center Dr		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB9059</b>
City Orange State CA Zip Code 92867	Purpose of Disbursement Refund of Contribution Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jules Zeman</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2014
Mailing Address 555 South Flower 45th Floor		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB9060</b>
City Los Angeles State CA Zip Code 90071	Purpose of Disbursement Refund of Contribution Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 128 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. Placer County Republican Assembly PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2014
Mailing Address 801 Riverside Ave. Ste 100		Amount of Each Disbursement this Period 500.00 <b>Transaction ID : EXPB9074</b>
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Placer County Republican Assembly PAC</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Pollitt for Board of Education</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2014
Mailing Address 3162 Yukon Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB9041</b>
City Costa Mesa	State CA	
Zip Code 92626	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. REPUBLICAN PARTY OF ORANGE COUNTY</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2014
Mailing Address 1422 Edinger Ave., Ste. 110		Amount of Each Disbursement this Period 50.00 <b>Transaction ID : EXPB8607</b>
City Tustin	State CA	
Zip Code 92780	Purpose of Disbursement Member Dues	Category/ Type 011
Candidate Name <b>REPUBLICAN PARTY OF ORANGE COUNTY</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1550.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 135	
	<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)  
**Committee to Re-Elect Congressman Rohrabacher**

Full Name (Last, First, Middle Initial) <b>A. REPUBLICAN PARTY OF ORANGE COUNTY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>06 / 01 / 2014</b>
Mailing Address 1422 Edinger Ave., Ste. 110		Amount of Each Disbursement this Period <b>5000.00</b> <b>Transaction ID : EXPB9062</b>
City Tustin State CA Zip Code 92780	Purpose of Disbursement 2 Flag Day Tables <b>011</b> Category/Type	
Candidate Name <b>REPUBLICAN PARTY OF ORANGE COUNTY</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B.</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 Candidate Name <b>Category/Type</b>	
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 Candidate Name <b>Category/Type</b>	
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>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>6550.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7312**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Barbara Alby for Assembly, Barbara</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 10415 Folsom Blvd #102	

City	State	ZIP Code
Rancho Cordova	CA	95670

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 06 / D 07 / Y 1993	M / D / Y 12/31/1993	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7314**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Brian Bilbray for Congress</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address c/o Freelove Consulting Group Inc.	

City	State	ZIP Code
San Diego	CA	92171-0187

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
1000.00	0.00	1000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 10 / D 25 / Y 1994	M / D / Y 12/31/1994	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional).....	1000.00
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/>

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC7320

Committee to Re-Elect Congressman Rohrabacher

LOAN SOURCE Full Name (Last, First, Middle Initial)

Tom Bordonaro for Congress

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

5275 Camp Eight Road

City

State

ZIP Code

Paso Robles

CA

93466

Original Amount of Loan

1000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

1000.00

### TERMS

Date Incurred

M 01 / D 06 / Y 1998

Date Due

M / D / Y 12/31/1998

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

1000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7322**

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Tom Bordonaro for Congress

Election:  
 Primary  
 General  
 Other (specify) ▼

Mailing Address  
5275 Camp Eight Road

City State ZIP Code  
Paso Robles CA 93466

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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**TERMS**

Date Incurred: M 03 / D 02 / Y 1998  
Date Due: M / D / Y 12/31/1998  
Interest Rate: 0.00 % (apr)  
Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

**SUBTOTALS** This Period This Page (optional)..... ▶ 1000.00

**TOTALS** This Period (last page in this line only)..... ▶ [ ]

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**

# SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:  
(check only one)

13a  
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : RCVC7316

Committee to Re-Elect Congressman Rohrabacher

LOAN SOURCE Full Name (Last, First, Middle Initial)

Righeimer Assembly 2000

Election:

Primary  
 General  
 Other (specify) ▼

Mailing Address

533 Via Estrada Unit C

City

State

ZIP Code

Laguna Hills

CA

92637

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

### TERMS

Date Incurred

M M / D D / Y Y Y Y  
09 / 29 / 1999

Date Due

M M / D D / Y Y Y Y  
09/28/2000

Interest Rate

0.00 % (apr)

Secured:

Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

**SUBTOTALS** This Period This Page (optional)..... ▶

5000.00

**TOTALS** This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Committee to Re-Elect Congressman Rohrabacher** Transaction ID : **RCVC7318**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>Righeimer Assembly 2000</b>	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 533 Via Estrada Unit C	

City Laguna Hills	State CA	ZIP Code 92637
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Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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**TERMS**

Date Incurred M 03 / D 06 / Y 2000	Date Due M M / D D / Y 03/06/2001	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....	▶	10000.00
<b>TOTALS</b> This Period (last page in this line only).....	▶	19000.00

**Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.**