

**FEC  
FORM 3**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (In full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Friends of Lois Capps

ADDRESS (number and street)

PO Box 23840

Check if different than previously reported. (ACC)

Santa Barbara

CA

93121

2. **FEC IDENTIFICATION NUMBER**

C00331389

CITY

STATE

ZIP CODE

STATE DISTRICT

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

CA 23

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X 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 04 01 2005 through 06 30 2005

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 David Powdrell

Signature of Treasurer Electronically Filed by David Powdrell Date 09 19 2005

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

Office Use Only

**FEC FORM 3**  
(Revised 02/2005)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Friends of Lois Capps

Report Covering the Period: From: <sup>M</sup> 0 <sup>M</sup> 4 <sup>D</sup> 0 <sup>D</sup> 1 <sup>Y</sup> 2 <sup>Y</sup> 0 <sup>Y</sup> 0 <sup>Y</sup> 5 To: <sup>Y</sup> 0 <sup>M</sup> 6 <sup>D</sup> 3 <sup>D</sup> 0 <sup>Y</sup> 2 <sup>Y</sup> 0 <sup>Y</sup> 0 <sup>Y</sup> 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(a)).....	78026.00	193629.00
(b) Total Contribution Refunds (from Line 20(d)).....	2000.00	2000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	76026.00	191629.00
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	46871.98	215338.36
(b) Total Offsets to Operating Expenditures (from Line 14).....	305.66	19169.45
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46566.32	196168.91
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	379924.90	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	157000.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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 02/2005)

Page 3

Write or Type Committee Name  
Friends of Lois Capps

Report Covering the Period: From: <sup>M M</sup> D 4 <sup>Y Y</sup> 0 1 <sup>Y Y</sup> 2 0 0 5 To: <sup>Y M</sup> 0 8 <sup>Y Y</sup> 3 0 <sup>Y Y</sup> 2 0 0 5

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	20211.00	76401.00
(ii) Unitemized.....	8565.00	31728.00
(iii) TOTAL of contributions	28776.00	108129.00
from Individuals..... ▶		
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	49250.00	85500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans)	78026.00	193629.00
(add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	<b>0.00</b>	<b>0.00</b>
<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</b> (Refunds, Rebates, etc.).....	<b>305.66</b>	<b>19169.45</b>
<b>15. OTHER RECEIPTS</b> (Dividends, Interest, etc.).....	<b>6693.52</b>	<b>16335.09</b>
<b>16. TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	<b>85025.18</b>	<b>229133.54</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	46871.98	215338.36
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	2000.00	2000.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2000.00	2000.00
21. OTHER DISBURSEMENTS.....	26115.00	31328.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>74986.98</b>	<b>248666.36</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	369886.70
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	85025.18
25. SUBTOTAL (add Line 23 and Line 24).....	454911.88
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	74986.98
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	379924.90

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)**  
**(Millionaires' Amendment)**

<b>Name of Candidate</b> LOIS G CAPPS		<b>Candidate ID Number</b> H8CA22089
<b>Name of Principal Campaign Committee</b> Friends of Lois Capps		<b>Committee ID Number</b> <b>C</b> C00331389
<b>Committee Address</b> PO Box 23940		
<b>City</b> Santa Barbara	<b>State</b> CA	<b>ZIP</b> 93121
<b>Report Covering Period (check one)</b> <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election		
	<b>Primary</b>	<b>General</b>
1. Gross receipts of authorized committees .....	191629.00	0.00
2. Aggregate amount of contributions from personal funds of the candidate .....	0.00	0.00
3. Gross receipts minus the candidate's personal contributions .....	191629.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	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)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. Christina Alison		Date of Receipt M / D / Y 04 / 28 / 2005
Mailing Address 1385 School House Rd		Transaction ID: SA11A1.27093
City Montecito	State CA	Zip Code 93108-1236
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Singer/Actress	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. David H. Anderson		Date of Receipt M / D / Y 04 / 28 / 2005
Mailing Address PO Box 21757		Transaction ID: SA11A1.27206
City Santa Barbara	State CA	Zip Code 93121
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self	Occupation Retired Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Bethna Barrett		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 128 W. Arrellaga Street Apt. D		Transaction ID: SA11A1.27082
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 111.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 363.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1361.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 7 / 61  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Bettina Barrett</b>		Date of Receipt M / D / Y 06 / 14 / 2005
Mailing Address 128 W. Arrellaga Street Apt. D		Transaction ID: SA11A1.27280
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 413.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) <b>B. Dr. Carol Behman</b>		Date of Receipt M / D / Y 04 / 28 / 2005
Mailing Address 193D Jelinda Dr.		Transaction ID: SA11A1.27095
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Anullaria Associates Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation Anesthesiologist Election Cycle-to-Date ▼ 1000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) <b>C. Judith Bennett</b>		Date of Receipt M / D / Y 04 / 28 / 2005
Mailing Address 530 Plaza Rubio		Transaction ID: SA11A1.27202
City Santa Barbara	State CA	Zip Code 93103
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Occupation reired Election Cycle-to-Date ▼ 250.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 61  
 (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. Jeffrey C. Berman		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address 5383 Hollister Ave. Suite 150		Transaction ID: SA11A1.27111
City Santa Barbara	State CA	Zip Code 93111
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Berman Development Co.	Occupation Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Andrew Davis		Date of Receipt M / D / Y 04 / 25 / 2005
Mailing Address 1437 Hillcrest Road		Transaction ID: SA11A1.27198
City Santa Barbara	State CA	Zip Code 93109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Chicago Pacific	Occupation Film Director	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Nancy Edebo		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address 518 Braemar Ranch Lane		Transaction ID: SA11A1.27102
City Santa Barbara	State CA	Zip Code 93109
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	2000.00
TOTAL This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 9 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Mercedes Eichholz</b>		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address 194D Mission Ridge Road		Transaction ID: SA11A1.27192
City Santa Barbara	State CA	Zip Code 93103
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Investor-retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Steven Feinberg</b>		Date of Receipt M / D / Y 05 / 17 / 2005
Mailing Address 5383 Hollister Ave Ste. 140		Transaction ID: SA11A1.27147
City Santa Barbara	State CA	Zip Code 93111
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Century Equipment Sales	Occupation Vice President	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Patricia S. Foley</b>		Date of Receipt M / D / Y 04 / 07 / 2005
Mailing Address 515 Braemar Ranch Lane		Transaction ID: SA11A1.27090
City Santa Barbara	State CA	Zip Code 93109
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-Foley, Bezek & Komar- oska	Occupation Homemaker	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 10 / 61

(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Deirdre Frank</b>		Date of Receipt M / D / Y 06 / 15 / 2005
Mailing Address 5244 Seabreeze Way		Transaction ID: SA11A1.27279
City Oxnard Shores	State CA	Zip Code 93035
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer Law Offices	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. George Gaynes</b>		Date of Receipt M / D / Y 06 / 04 / 2005
Mailing Address 3344 Campanil Drive		Transaction ID: SA11A1.27125
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer McLerie-Gaynes, Inc.	Occupation Actor	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>1500.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Matlyn Gevitz</b>		Date of Receipt M / D / Y 04 / 20 / 2005
Mailing Address 2929 E. Valley Road		Transaction ID: SA11A1.27191
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ <b>2000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 11 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Frank Gibney</b>		Date of Receipt M / D / Y 04 / 20 / 2005
Mailing Address 1901 East Las Tunas Road		Transaction ID: SA11A1.27214
City Santa Barbara	State CA	Zip Code 93103
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Romana College	Occupation Professor-Politics	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Andrea Gross</b>		Date of Receipt M / D / Y 04 / 04 / 2005
Mailing Address 1833 Santa Barbara St.		Transaction ID: SA11A1.27205
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer self	Occupation physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Mark Hamilton</b>		Date of Receipt M / D / Y 04 / 22 / 2005
Mailing Address 820 Coronel Street		Transaction ID: SA11A1.27193
City Santa Barbara	State CA	Zip Code 93109
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer SB School District	Occupation Teacher	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1500.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 12 / 61  
(check only one)  
 11a     11b     11c     11d  
           12       13a       13b       14       15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Eleanor Hariman</b>		Date of Receipt M / D / Y 04 / 30 / 2005
Mailing Address 4167 Cresta Ave.		Transaction ID: SA11A1.27107
City Santa Barbara	State CA	Zip Code 93110
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Self-employed	Occupation Retired Advocate	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B. Dr. Ursula E. Henderson Draw</b>		Date of Receipt M / D / Y 04 / 26 / 2005
Mailing Address 131 La Vereda Road		Transaction ID: SA11A1.27180
City Montecito	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self-employed	Occupation Physician- Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. James Karta</b>		Date of Receipt M / D / Y 05 / 06 / 2005
Mailing Address 2229 Vista del Campo		Transaction ID: SA11A1.27188
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation reired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

SUBTOTAL of Receipts THs Page (optional) .....	▶	550.00
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 13 / 61

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. Louise Latham		Date of Receipt M / D / Y 04 / 22 / 2005
Mailing Address 2125 Piedras Drive		Transaction ID: SA11A1.27189
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Actress	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. Daniel Lashy		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address 2036 1/2 Oak Avenue		Transaction ID: SA11A1.27235
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer information requested	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Lillian Lovelace		Date of Receipt M / D / Y 04 / 26 / 2005
Mailing Address 780 El Bosque Road		Transaction ID: SA11A1.27198
City Montecito	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2750.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 14 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. George Mathasi</b>		Date of Receipt M / D / Y 04 / 23 / 2005
Mailing Address 2881 Tallant Road Apt. 60B		Transaction ID: SA11A1.27197
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Superconductor Technologies	Occupation Engineer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Sara Miller McCune</b>		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address 2979 Eucalyptus Hill Road		Transaction ID: SA11A1.27097
City Montecito	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Sage Publishing, Inc.	Occupation CEO/Publisher	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Don McDermott</b>		Date of Receipt M / D / Y 08 / 03 / 2005
Mailing Address 251D Las Positas Road		Transaction ID: SA11A1.27135
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Verizon California	Occupation Technician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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

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

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

FOR LINE NUMBER: PAGE 15 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. Of Mission Indians Marango Band		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address PD BOX 388		Transaction ID: SA11A1.27398
City Cabazon	State CA	Zip Code 92230
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Tital Government	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Kate Moss		Date of Receipt M / D / Y 06 / 27 / 2005
Mailing Address 1626 Foxhall Rd. NW		Transaction ID: SA11A1.27255
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer self-employed	Occupation consultant	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Orson Mozes		Date of Receipt M / D / Y 05 / 16 / 2005
Mailing Address 1373 School House Rd		Transaction ID: SA11A1.27158
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer Self-employed	Occupation Businessman	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>2250.00</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 16 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Donald Murray</b>		Date of Receipt M / D / Y 05 / 13 / 2005
Mailing Address 1201 La Patena Canyon Road		Transaction ID: SA11A1.27123
City Goleta	State CA	Zip Code 93117
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Actor/Producer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Lessie Sinclair Nixon</b>		Date of Receipt M / D / Y 04 / 22 / 2005
Mailing Address 129D Mountain View Road		Transaction ID: SA11A1.27195
City Santa Barbara	State CA	Zip Code 93106
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Billy Norris</b>		Date of Receipt M / D / Y 08 / 11 / 2005
Mailing Address 3115 Courtney Drive		Transaction ID: SA11A1.27259
City Santa Maria	State CA	Zip Code 93455
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer self- www.daymakers.com	Occupation Owner	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1000.00</b>
TOTAL This Period (last page this line number only) .....	▶	



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

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

FOR LINE NUMBER: PAGE 17 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Thu Pham</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 331 A. Street N.E.		Transaction ID: SA11A1.27256
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Self	Occupation Government relations	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Carmen Ramirez</b>		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address 150D Colonia Rd. #20		Transaction ID: SA11A1.27294
City Oxnard	State CA	Zip Code 93030
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Superior Court, Ventura County	Occupation Attorney	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Jane Riattel</b>		Date of Receipt M / D / Y 04 / 04 / 2005
Mailing Address 721-A Mas Amigas		Transaction ID: SA11A1.27175
City Santa Barbara	State CA	Zip Code 93105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 18 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Brian Roberts, M.D.</b>		Date of Receipt M / D / Y Y Y Y 04 / 05 / 2005
Mailing Address 2700 Prefumo Canyon Rd.		Transaction ID: SA11A1.27086
City	State	Zip Code
San Luis Obispo	CA	93405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Central Coast Emergency Physicians	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Brian Roberts, M.D.</b>		Date of Receipt M / D / Y Y Y Y 04 / 25 / 2005
Mailing Address 2700 Prefumo Canyon Rd.		Transaction ID: SA11A1.27086
City	State	Zip Code
San Luis Obispo	CA	93405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Central Coast Emergency Physicians	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Kathleen Scott</b>		Date of Receipt M / D / Y Y Y Y 04 / 28 / 2005
Mailing Address 3412 Calle Noguerra		Transaction ID: SA11A1.27209
City	State	Zip Code
Santa Barbara	CA	93105
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation Community Volunteer	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 10 / 61

(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Gerald Shapiro</b>		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address 4955 Corbin Avenue		Transaction ID: SA11A1.27177
City Tarzana	State CA	Zip Code 91356
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Uptown Drug	Occupation Pharmacist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 352.00	

Full Name (Last, First, Middle Initial) <b>B. Gerald Shapiro</b>		Date of Receipt M / D / Y 05 / 09 / 2005
Mailing Address 4955 Corbin Avenue		Transaction ID: SA11A1.27218
City Tarzana	State CA	Zip Code 91356
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Uptown Drug	Occupation Pharmacist	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 452.00	

Full Name (Last, First, Middle Initial) <b>C. Cheryl Siemens</b>		Date of Receipt M / D / Y 05 / 10 / 2005
Mailing Address 3030 Hidden Valley Lane		Transaction ID: SA11A1.27142
City Santa Barbara	State CA	Zip Code 93108
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 20 / 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. <u>Betty Stephens</u>		Date of Receipt M / D / Y 05 / 02 / 2005
Mailing Address <u>4400 Via Abrigada</u>		Transaction ID: SA11A1.27109
City	State	Zip Code
<u>Santa Barbara</u>	<u>CA</u>	<u>93110</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation Retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. <u>Cairne Underwood</u>		Date of Receipt M / D / Y 04 / 28 / 2005
Mailing Address <u>1553 Oramas Road</u>		Transaction ID: SA11A1.27181
City	State	Zip Code
<u>Santa Barbara</u>	<u>CA</u>	<u>93103</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation retired	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. <u>Dr. Thomas Van Meter</u>		Date of Receipt M / D / Y 04 / 21 / 2005
Mailing Address <u>3865 Sunset Road</u>		Transaction ID: SA11A1.27098
City	State	Zip Code
<u>Santa Barbara</u>	<u>CA</u>	<u>93110</u>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer Self-Employed	Occupation Physician	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>1750.00</b>
TOTAL This Period (last page this line number only) .....	▶	<b>20211.00</b>

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. AMERICAN ASSOCIATION OF NURSE ANESTHETISTS SEPARATE SEGREGATED FUND (CRNA-PAC)</b>		Date of Receipt M / D / Y 06 / 22 / 2005
Mailing Address 222 S PROSPECT AVENUE C/O FINANCE DEPT		Transaction ID: SA11C.27226
City PARK RIDGE	State IL	Zip Code 60068
FEC ID number of contributing federal political committee. <b>C C00173153</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 22 / 2005
Mailing Address 1201 L Street NW		Transaction ID: SA11C.27222
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <b>C CD00068080</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN HOSPITAL ASSOCIATION PAC</b>		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address 325 Seventh Street NW Suite 700		Transaction ID: SA11C.27225
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. <b>C CD0106148</b>		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. AMERICAN NURSES ASSOCIATION PAC</b>		Date of Receipt M / D / Y 06 / 01 / 2005
Mailing Address 8515 Georgia Avenue Suite 400		Transaction ID: SA11C.27228
City State Zip Code Silver Spring MD 20910	FEC ID number of contributing federal political committee. <b>C C00017525</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN OCCUPATIONAL THERAPY ASSOCIATION INC. POLITICAL ACTION COMMITTEE (AOPTAC)</b>		Date of Receipt M / D / Y 06 / 29 / 2005
Mailing Address 4720 Montgomery Lane PO Box 31220		Transaction ID: SA11C.27244
City State Zip Code Bethesda MD 20824	FEC ID number of contributing federal political committee. <b>C C00089088</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. AMERICAN POSTAL WORKERS UNION COMMITTEE ON POLITICAL ACTION</b>		Date of Receipt M / D / Y 06 / 17 / 2005
Mailing Address 1300 L Street NW		Transaction ID: SA11C.27227
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. <b>C C00010322</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. AMERICAN PSYCHIATRIC ASSOCIATION POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 21 / 2005
Mailing Address 1000 Wilson Boulevard Suite 1825		Transaction ID: SA11C.27385
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. <b>C C00373696</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. ASSOCIATION OF PROFESSIONAL FLIGHT ATTENDANTS (APFA PAC) POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 09 / 2005
Mailing Address 1004 W EULESS BLVD		Transaction ID: SA11C.27384
City EULESS	State TX	Zip Code 76040
FEC ID number of contributing federal political committee. <b>C CD0246421</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. ASSOCIATION OF TRIAL LAWYERS OF AMERICA POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 22 / 2005
Mailing Address 1050 31st Street N.W.		Transaction ID: SA11C.27231
City Washington	State DC	Zip Code 20007
FEC ID number of contributing federal political committee. <b>C CD0024521</b>		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

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

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

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

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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. AT&T PAC		Date of Receipt M / D / Y 05 / 25 / 2005
Mailing Address 32 Avenue of the Americas		Transaction ID: SA11C.27233
City New York	State NY	Zip Code 10013
FEC ID number of contributing federal political committee. C C00185124		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. CAREMARK RX INC EMPLOYEES POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 04 / 18 / 2005
Mailing Address 2211 Sanders Road		Transaction ID: SA11C.27386
City Northbrook	State IL	Zip Code 60062
FEC ID number of contributing federal political committee. C CD0384818		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. CLEAR CHANNEL COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE		Date of Receipt M / D / Y 08 / 09 / 2005
Mailing Address 200 E. Basse Road		Transaction ID: SA11C.27237
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee. C CD0279218		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	3000.00
TOTAL This Period (last page this line number only) .....	▶	



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

Use separate schedule(s)  
or each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. COMMITTEE FOR GOOD GOVERNMENT INTERNATIONAL UNION UAW</b>		Date of Receipt M / D / Y 05 / 25 / 2005
Mailing Address 8000 EAST JEFFERSON AVENUE		Transaction ID: SA11C.27236
City	State	Zip Code
DETROIT	MI	48214
FEC ID number of contributing federal political committee. <b>C</b> C00002832		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA</b>		Date of Receipt M / D / Y 04 / 13 / 2005
Mailing Address 601 Pennsylvania Avenue NW South Building Suite 600B		Transaction ID: SA11C.27172
City	State	Zip Code
Washington	DC	20004
FEC ID number of contributing federal political committee. <b>C</b> C00007880		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE</b>		Date of Receipt M / D / Y 08 / 13 / 2005
Mailing Address 501 Third Street NW		Transaction ID: SA11C.27242
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. <b>C</b> C00002059		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. DRIVE - DEMOCRAT REPUBLICAN INDEPENDENT VOTER EDUCATION - PAC FOR INT'L BROTHERHOOD		Date of Receipt M / D / Y 04 / 01 / 2005
Mailing Address 25 Louisiana Ave. NW		Transaction ID: SA11C.27067
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. <b>C</b> C00032879		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. EDISON INTERNATIONAL PAC		Date of Receipt M / D / Y 06 / 14 / 2005
Mailing Address 520 S GRAND AVENUE SUITE 700		Transaction ID: SA11C.27232
City	State	Zip Code
LOS ANGELES	CA	90071
FEC ID number of contributing federal political committee. <b>C</b> CD0019853		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC		Date of Receipt M / D / Y 04 / 18 / 2005
Mailing Address 520 S. GRAND AVE. STE. 700		Transaction ID: SA11C.27074
City	State	Zip Code
LOS ANGELES	CA	90071
FEC ID number of contributing federal political committee. <b>C</b> CD0098591		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	7000.00
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
or each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. HCA INC. GOOD GOVERNMENT FLND		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address PD BOX 550 ONE PARK PLAZA		Transaction ID: SA11C.27382
City	State	Zip Code
NASHVILLE	TN	37203
FEC ID number of contributing federal political committee. <b>C</b> C00067231		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS		Date of Receipt M / D / Y 06 / 30 / 2005
Mailing Address 175D NEW YORK NW		Transaction ID: SA11C.27293
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee. <b>C</b> C70003108		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS COMMITTEE ON POLITICAL EDUCATION		Date of Receipt M / D / Y 06 / 17 / 2005
Mailing Address 900 Seventh St. N.W.		Transaction ID: SA11C.27223
City	State	Zip Code
Washington	DC	20001
FEC ID number of contributing federal political committee. <b>C</b> CD0027342		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

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

**SCHEDULE A (FEC Form 3 )**  
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Use separate schedule(s)  
or each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. IUPAT MEMBER AND FAMILY FUNDRAISING PC ACCOUNT</b>		Date of Receipt M / D / Y 04 / 12 / 2005
Mailing Address 175D New York Ave		Transaction ID: SA11C.27069
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. <b>C C00349035</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF NA</b>		Date of Receipt M / D / Y 05 / 09 / 2005
Mailing Address 905 16th Street NW Second Floor		Transaction ID: SA11C.27154
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. <b>C CD0007822</b>		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>C. MACHINISTS NON PARTISAN POLITICAL LEAGUE</b>		Date of Receipt M / D / Y 06 / 29 / 2005
Mailing Address 9000 Machinists Place		Transaction ID: SA11C.27220
City	State	Zip Code
Upper Marlboro	MD	20772
FEC ID number of contributing federal political committee. <b>C CD0002489</b>		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s)  
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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. MEDTRONIC INC. MEDICAL TECHNOLOGY FUND</b>		Date of Receipt M / D / Y 06 / 23 / 2005
Mailing Address 142D New York Avenue NW Suite 600		Transaction ID: SA11C.27383
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b> C00311878		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA)</b>		Date of Receipt M / D / Y 06 / 10 / 2005
Mailing Address 1325 Massachusetts Ave. NW		Transaction ID: SA11C.27229
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee. <b>C</b> CD0238725		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL ASSOCIATION OF LETTER CARRIERS OF UNITED STATES OF AMERICA BRANCH 8 P.A.L.</b>		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 115B1 ILEX ST NW		Transaction ID: SA11C.27155
City	State	Zip Code
COON RAPIDS	MN	55448
FEC ID number of contributing federal political committee. <b>C</b> CD0114314		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	<b>4000.00</b>
TOTAL This Period (last page this line number only) .....	

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

Use separate schedule(s)  
or each category of the  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. NATIONAL ASSOCIATION OF REALTORS POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 08 / 2005
Mailing Address 430 North Michigan Avenue		Transaction ID: SA11C.27238
City Chicago	State IL	Zip Code 60611
FEC ID number of contributing federal political committee. <b>C C00030718</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. NATIONAL COMMITTEE TO PRESERVE SOCIAL SECURITY</b>		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address 10 G Street NE Suite 600		Transaction ID: SA11C.27234
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. <b>C C70002597</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. NATIONAL EDUCATION ASSOCIATION</b>		Date of Receipt M / D / Y 06 / 29 / 2005
Mailing Address 1201 16TH STREET, N.W.		Transaction ID: SA11C.27221
City WASHINGTON	State DC	Zip Code 20008
FEC ID number of contributing federal political committee. <b>C C70000492</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. PG&amp;E CORPORATION EMPLOYEES ENERGY PAC</b>		Date of Receipt M / D / Y 04 / 06 / 2005
Mailing Address 77 Beale Street Mail Code: B29H		Transaction ID: SA11C.27068
City	State	Zip Code
San Francisco	CA	94105
FEC ID number of contributing federal political committee. <b>C</b> C00177469		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. PG&amp;E CORPORATION EMPLOYEES ENERGY PAC</b>		Date of Receipt M / D / Y 04 / 07 / 2005
Mailing Address 77 Beale Street Mail Code: B29H		Transaction ID: SA11C.27073
City	State	Zip Code
San Francisco	CA	94105
FEC ID number of contributing federal political committee. <b>C</b> C00177469		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. PG&amp;E CORPORATION EMPLOYEES ENERGY PAC</b>		Date of Receipt M / D / Y 06 / 06 / 2005
Mailing Address 77 Beale Street Mail Code: B29H		Transaction ID: SA11C.27230
City	State	Zip Code
San Francisco	CA	94105
FEC ID number of contributing federal political committee. <b>C</b> C00177469		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2500.00	

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

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

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

FOR LINE NUMBER: PAGE 32 / 61

(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. PHYSICAL THERAPY PAC</b>		Date of Receipt M / D / Y 05 / 24 / 2005
Mailing Address 1111 North Fairfax Street		Transaction ID: SA11C.27152
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <b>C</b> C00012880		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. QUEST DIAGNOSTICS INCORPORATED POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 04 / 15 / 2005
Mailing Address 815 Connecticut Avenue NW Suite 330		Transaction ID: SA11C.27072
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <b>C</b> CD0329185		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. RAYTHEON POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 08 / 15 / 2005
Mailing Address 1100 Wilson Boulevard Suite 1500		Transaction ID: SA11C.27241
City Arlington	State VA	Zip Code 22209
FEC ID number of contributing federal political committee. <b>C</b> CD0097568		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 33 / 61

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. SPRINT CORPORATION PAC</b>		Date of Receipt M / D / Y 06 / 14 / 2005
Mailing Address 233D Shawnee Mission Parkway		Transaction ID: SA11C.27224
City Westwood	State KS	Zip Code 66205
FEC ID number of contributing federal political committee. <b>C C00089342</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. SUN-MAID GROWERS OF CALIFORNIA POLITICAL ACTION COMMITTEE</b>		Date of Receipt M / D / Y 06 / 20 / 2005
Mailing Address 13525 SOUTH BETHEL AVENUE		Transaction ID: SA11C.27381
City KINGSBURG	State CA	Zip Code 93631
FEC ID number of contributing federal political committee. <b>C C00108001</b>		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1a)-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	2000.00
TOTAL This Period (last page this line number only) .....	▶	49250.00

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) <b>A. Santa Barbara Bank and Trust</b>		Date of Receipt M / D / Y 04 / 20 / 2005
Mailing Address 20 E. Carrillo Street		Transaction ID: SA15.27366
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 203.22
Name of Employer	Occupation	interest income
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 844.79	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) <b>B. Santa Barbara Bank and Trust</b>		Date of Receipt M / D / Y 05 / 27 / 2005
Mailing Address 20 E. Carrillo Street		Transaction ID: SA15.27367
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 248.89
Name of Employer	Occupation	interest income
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1093.68	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

Full Name (Last, First, Middle Initial) <b>C. Santa Barbara Bank and Trust</b>		Date of Receipt M / D / Y 06 / 27 / 2005
Mailing Address 20 E. Carrillo Street		Transaction ID: SA15.27368
City Santa Barbara	State CA	Zip Code 93101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 241.41
Name of Employer	Occupation	interest income
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 1335.09	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional) .....	▶	<b>693.52</b>
TOTAL This Period (last page this line number only) .....	▶	

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

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial) A. Jennifer Severance		Date of Receipt M / D / Y 05 / 01 / 2005
Mailing Address 171B N. Harrison		Transaction ID: SA15.27008
City Boise	State ID	Zip Code 83702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	Loan Repayment Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Jennifer Severance		Date of Receipt M / D / Y 05 / 31 / 2005
Mailing Address 171B N. Harrison		Transaction ID: SA15.27370
City Boise	State ID	Zip Code 83702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	debt repayment Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. Jennifer Severance		Date of Receipt M / D / Y 06 / 27 / 2005
Mailing Address 171B N. Harrison		Transaction ID: SA15.27388
City Boise	State ID	Zip Code 83702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	debt repayment Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2006 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) .....	▶	6000.00
TOTAL This Period (last page this line number only) .....	▶	6693.52

**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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)

**A.** Avenet Solutions

Mailing Address 400 Sibley Street #500

City St. Paul State MN Zip Code 55101

Purpose of Disbursement  
 web hosting

Candidate Name  
 Friends of Lois Capps

Office Sought:  House  
                    Senate  
                    President  
 State: CA District: 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27024

Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

150.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Bromwell Press

Mailing Address 6619-21 Harford Road

City Baltimore State MD Zip Code 21214

Purpose of Disbursement  
 printing

Candidate Name

Office Sought:  House  
                    Senate  
                    President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27308

Date of Disbursement

05 / 18 / 2005

Amount of Each Disbursement this Period

886.64

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** Lois Capps

Mailing Address 1724 Santa Barbara St

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 reimbursement - Travel

Candidate Name  
 Friends of Lois Capps

Office Sought:  House  
                    Senate  
                    President  
 State: CA District: 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27036

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

92.72

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1129.36

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Erickson and Company**

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name Friends of Lois Capps

Office Sought:  House  Senate  President  
 Disbursement For: 2006  Primary  General  
 Other (specify) ▼

State: CA District: 23

Transaction ID: SB17.27015  
 Date of Disbursement 04 / 01 / 2005

Amount of Each Disbursement this Period 3099.02

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Erickson and Company**

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2006  Primary  General  
 Other (specify) ▼

State: District

Transaction ID: SB17.27298  
 Date of Disbursement 05 / 09 / 2005

Amount of Each Disbursement this Period 3081.10

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Erickson and Company**

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2006  Primary  General  
 Other (specify) ▼

State: District

Transaction ID: SB17.27306  
 Date of Disbursement 05 / 18 / 2005

Amount of Each Disbursement this Period 3130.51

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**9310.63**

**TOTAL** 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

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(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Erickson and Company**

Mailing Address 38 Ivy Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement fundraising consulting

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB17.27343  
Date of Disbursement  
06 / 17 / 2005

Amount of Each Disbursement this Period  
9057.85

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Fairfax Mailing**

Mailing Address 10807 Main Street Suite 200

City Fairfax State VA Zip Code 22030

Purpose of Disbursement mailing services

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB17.27304  
Date of Disbursement  
05 / 09 / 2005

Amount of Each Disbursement this Period  
814.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Fairfax Mailing**

Mailing Address 10807 Main Street Suite 200

City Fairfax State VA Zip Code 22030

Purpose of Disbursement mailing services

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/ Type

Transaction ID: SB17.27325  
Date of Disbursement  
05 / 31 / 2005

Amount of Each Disbursement this Period  
221.87

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **4093.32**

**TOTAL** 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)

A. Jennifer Finley

Mailing Address 222 W Anapamu #1

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 reimbursements - event expenses

Candidate Name  
 Friends of Lois Capps

Office Sought:  House  
                    Senate  
                    President  
 State: CA District: 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025

Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

1386.07

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. US Postmaster

Mailing Address 800 Anacapa Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 Postage

Candidate Name

Office Sought:  House  
                    Senate  
                    President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025.0

Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

111.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Kinkos

Mailing Address PO Box 530257

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
 printing

Candidate Name

Office Sought:  House  
                    Senate  
                    President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025.2

Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

193.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1386.07

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)

A. Kinkos

Mailing Address PO Box 530257

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
 mailing supplies

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27025.6  
 Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

1.07

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US Postmaster

Mailing Address 800 Anacapa Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 postage

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27025.6  
 Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

444.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Staples

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement  
 office supplies

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27025.7  
 Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

184.12

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

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

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50308

Purpose of Disbursement  
 event supplies

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025.9  
 Date of Disbursement  
 04 / 04 / 2005

Amount of Each Disbursement this Period  
 28.83

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

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

Mailing Address PO Box 530257

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
 printing

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025.10  
 Date of Disbursement  
 04 / 04 / 2005

Amount of Each Disbursement this Period  
 284.46

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
 FTD.COM

Mailing Address 3113 Woodcreek Drive

City Downers Grove State IL Zip Code 60515

Purpose of Disbursement  
 flowers

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27025.11  
 Date of Disbursement  
 04 / 04 / 2005

Amount of Each Disbursement this Period  
 56.98

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **0.00**

**TOTAL** 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Jennifer Finley**

Mailing Address 222 W Anapamu #1

City State Zip Code  
 Santa Barbara CA 93101

Purpose of Disbursement  
 reimbursement - event

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27303  
 Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

1240.71

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. US Postmaster**

Mailing Address 800 Anacapa Street

City State Zip Code  
 Santa Barbara CA 93101

Purpose of Disbursement  
 postage

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27303.0  
 Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

289.34

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 530257

City State Zip Code  
 Atlanta GA 30353

Purpose of Disbursement  
 printing

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27303.1  
 Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

457.94

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1240.71

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

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

Use separate schedule(s)  
 for each category of the  
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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. US Postmaster**

Mailing Address 800 Anacapa Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement postage

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27303.2  
 Date of Disbursement  
 05 / 09 / 2005

Amount of Each Disbursement this Period  
 370.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

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

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement mailing supplies

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27303.3  
 Date of Disbursement  
 05 / 09 / 2005

Amount of Each Disbursement this Period  
 54.47

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

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

Mailing Address 3987-B State Street

City Santa Barbara State CA Zip Code 93105

Purpose of Disbursement catering

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27303.4  
 Date of Disbursement  
 05 / 09 / 2005

Amount of Each Disbursement this Period  
 68.96

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53  
**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **0.00**

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

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

Use separate schedule(s)  
 for each category of the  
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 (check only one)

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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Jennifer Finley**

Mailing Address 222 W Anapamu #1

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 reimbursement -- event

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27342  
 Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

145.47

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

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

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50368

Purpose of Disbursement  
 event supplies

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27342.1  
 Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

4.07

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

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

Mailing Address PO Box 530257

City Atlanta State GA Zip Code 30353

Purpose of Disbursement  
 event supplies

Candidate Name

Office Sought: House Senate President  
 Disbursement For: Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB17.27342.2  
 Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

25.86

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

145.47

TOTAL 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

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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

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

Mailing Address PO Box 9020

City Des Moines State IA Zip Code 50388

Purpose of Disbursement office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006

X Primary General

Other (specify) ▼

State: District

Category/Type

Transaction ID: SB17.27342.3  
 Date of Disbursement  
 06 / 17 / 2005

Amount of Each Disbursement this Period  
 69.53

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  
**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
 First Insurance Funding Corp.

Mailing Address 8075 Innovation Way

City Chicago State IL Zip Code 60682

Purpose of Disbursement insurance

Candidate Name Friends of Lois Capps

Office Sought: x House Senate President

Disbursement For: 2006

X Primary General

Other (specify) ▼

State: CA District 23

Category/Type

Transaction ID: SB17.27011  
 Date of Disbursement  
 04 / 01 / 2005

Amount of Each Disbursement this Period  
 1214.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
 Jonathan's Valet Parking

Mailing Address 1482 East Valley Road

City Mantecita State CA Zip Code 95108

Purpose of Disbursement event valet

Candidate Name

Office Sought: House Senate President

Disbursement For: 2006

X Primary General

Other (specify) ▼

State: District

Category/Type

Transaction ID: SB17.27388  
 Date of Disbursement  
 04 / 01 / 2005

Amount of Each Disbursement this Period  
 225.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **1439.24**

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

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

Use separate schedule(s)  
for each category of the  
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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Jonathan's Valet Parking

Mailing Address 1482 East Valley Road

City Montecito State CA Zip Code 93108

Purpose of Disbursement  
event services

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27309  
Date of Disbursement  
05 / 18 / 2005

Amount of Each Disbursement this Period  
450.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
Mindy's Distinctive Catering

Mailing Address 4816 MacArthur Blvd.

City Washington State DC Zip Code 20007

Purpose of Disbursement  
catering

Candidate Name

Office Sought: House Senate President State: District

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27338  
Date of Disbursement  
06 / 17 / 2005

Amount of Each Disbursement this Period  
1147.50

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.** Full Name (Last, First, Middle Initial)  
MPC Computing

Mailing Address 149 Rametto Road

City Santa Barbara State CA Zip Code 93108

Purpose of Disbursement  
computer consulting

Candidate Name  
Friends of Lois Capps

Office Sought:  House Senate President State: CA District 23

Disbursement For: 2006  
 Primary General Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27039  
Date of Disbursement  
04 / 14 / 2005

Amount of Each Disbursement this Period  
245.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **1842.50**

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

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

Use separate schedule(s)  
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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

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

Mailing Address 5290 Overpass Rd. Ste. 227

City Goleta State CA Zip Code 93117

Purpose of Disbursement  
 tax preparation

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27339  
 Date of Disbursement  
 06 / 17 / 2005

Amount of Each Disbursement this Period  
 1255.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Precision Printing**

Mailing Address 14544 Keswick Street

City Van Nuys State CA Zip Code 91405

Purpose of Disbursement  
 printing

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27310  
 Date of Disbursement  
 06 / 18 / 2005

Amount of Each Disbursement this Period  
 574.81

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Public Storage**

Mailing Address 5425 Overpass Road

City Goleta State CA Zip Code 93111

Purpose of Disbursement  
 storage unit

Candidate Name  
 Friends of Lois Capps

Office Sought:  House Senate President  
 State: CA District 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27049  
 Date of Disbursement  
 04 / 29 / 2005

Amount of Each Disbursement this Period  
 1632.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **3461.81**

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

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

Use separate schedule(s)  
 for each category of the  
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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
 A. Romo and Associates

Mailing Address 7365 Portola Road

City Atascadero State CA Zip Code 93422

Purpose of Disbursement  
 management consulting

Candidate Name  
 Friends of Lois Capps

Office Sought:  House  
                    Senate  
                    President  
 State: CA District 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

001  
 Category/  
 Type

Transaction ID: SB17.27009  
 Date of Disbursement

04 / 01 / 2005

Amount of Each Disbursement this Period

6081.61

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
 B. Romo and Associates

Mailing Address 7365 Portola Road

City Atascadero State CA Zip Code 93422

Purpose of Disbursement  
 management consulting

Candidate Name  
 Friends of Lois Capps

Office Sought:  House  
                    Senate  
                    President  
 State: CA District 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27044  
 Date of Disbursement

04 / 29 / 2005

Amount of Each Disbursement this Period

6000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
 C. Romo and Associates

Mailing Address 7365 Portola Road

City Atascadero State CA Zip Code 93422

Purpose of Disbursement  
 management consulting

Candidate Name

Office Sought:  House  
                    Senate  
                    President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27295  
 Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

13081.61

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



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

Use separate schedule(s)  
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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
A. Romo and Associates

Mailing Address 7365 Portola Road

City Atascadero State CA Zip Code 93422

Purpose of Disbursement  
management consulting

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27326  
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

7000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
B. Andy Siegel

Mailing Address 450 Meigs Rd.

City Santa Barbara State CA Zip Code 93108

Purpose of Disbursement  
reimbursement - tray

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27321  
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

38.78

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
C. UPS

Mailing Address PO Box 505820

City The Lakes State NV Zip Code 88905

Purpose of Disbursement  
operating expense

Candidate Name  
Friends of Lois Capps

Office Sought:  House Senate President  
State: CA District 23

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27030  
Date of Disbursement

04 / 04 / 2005

Amount of Each Disbursement this Period

44.34

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7083.13

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

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

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Detailed Summary Page

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	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)

A. UPS

Mailing Address PO Box 505820

City The Lakes State NV Zip Code 88905

Purpose of Disbursement  
operating expenses

Candidate Name  
Friends of Lois Capps

Office Sought:  House  
Senate  
President

State: CA District: 23

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27041

Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

22.17

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. UPS

Mailing Address PO Box 505820

City The Lakes State NV Zip Code 88905

Purpose of Disbursement  
operating expense

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27296

Date of Disbursement

05 / 09 / 2005

Amount of Each Disbursement this Period

22.17

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. UPS

Mailing Address PO Box 505820

City The Lakes State NV Zip Code 88905

Purpose of Disbursement  
operating expense

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27320

Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

22.17

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

66.51

TOTAL 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

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. US Postmaster**

Mailing Address 800 Anacapa Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement operating expenses

Candidate Name

Office Sought: House Senate President

State: District

Disbursement For: 2006

X Primary General

Other (specify) ▼

Category/ Type

Transaction ID: SB17.27311  
 Date of Disbursement  
 05 / 18 / 2005

Amount of Each Disbursement this Period  
 68.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Verizon CA**

Mailing Address PO Box 30001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement utilities

Candidate Name Friends of Lois Capps

Office Sought:  House Senate President

State: CA District 23

Disbursement For: 2006

X Primary General

Other (specify) ▼

Category/ Type

Transaction ID: SB17.27040  
 Date of Disbursement  
 04 / 14 / 2005

Amount of Each Disbursement this Period  
 39.40

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Verizon CA**

Mailing Address PO Box 30001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement utilities

Candidate Name

Office Sought: House Senate President

State: District

Disbursement For: 2006

X Primary General

Other (specify) ▼

Category/ Type

Transaction ID: SB17.27307  
 Date of Disbursement  
 05 / 18 / 2005

Amount of Each Disbursement this Period  
 39.39

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

**146.79**

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

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

Use separate schedule(s)  
for each category of the  
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<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Verizon CA**

Mailing Address PO Box 30001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement utilities

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/Type

Transaction ID: SB17.27341  
Date of Disbursement  
06 / 17 / 2005

Amount of Each Disbursement this Period  
37.22

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Verizon Wireless**

Mailing Address PO Box 4001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement administrative

Candidate Name Friends of Lois Capps

Office Sought:  House Senate President  
State: CA District 23

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/Type

Transaction ID: SB17.27010  
Date of Disbursement  
04 / 01 / 2005

Amount of Each Disbursement this Period  
74.82

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Verizon Wireless**

Mailing Address PO Box 4001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement cell phone

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/Type

Transaction ID: SB17.27305  
Date of Disbursement  
05 / 09 / 2005

Amount of Each Disbursement this Period  
75.15

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **187.19**

**TOTAL** 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. Verizon Wireless**

Mailing Address PO Box 4001

City Inglewood State CA Zip Code 90313

Purpose of Disbursement  
 cell phone

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.2731B  
 Date of Disbursement  
 05 / 31 / 2005

Amount of Each Disbursement this Period  
 76.15

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Victor the Florist**

Mailing Address 135 E Anapamu Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 flowers

Candidate Name  
 Friends of Lois Capps

Office Sought:  House Senate President  
 State: CA District 23

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.2703B  
 Date of Disbursement  
 04 / 14 / 2005

Amount of Each Disbursement this Period  
 255.38

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**C. Victor the Florist**

Mailing Address 135 E Anapamu Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
 flowers

Candidate Name

Office Sought: House Senate President  
 State: District

Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

Category/  
 Type

Transaction ID: SB17.27297  
 Date of Disbursement  
 05 / 09 / 2005

Amount of Each Disbursement this Period  
 58.26

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **390.79**

**TOTAL** 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
A. Victor the Florist

Mailing Address 135 E Anapamu Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
flowers

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27319  
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

131.46

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
B. Victor the Florist

Mailing Address 135 E Anapamu Street

City Santa Barbara State CA Zip Code 93101

Purpose of Disbursement  
flowers

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27340  
Date of Disbursement

05 / 17 / 2005

Amount of Each Disbursement this Period

131.46

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
C. Elena Wegner

Mailing Address P.O. Box 140

City Summerland State CA Zip Code 93067

Purpose of Disbursement  
catering

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB17.27315  
Date of Disbursement

05 / 31 / 2005

Amount of Each Disbursement this Period

1028.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1290.92

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

46296.05

**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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. COAST HILLS FEDERAL CREDIT UNION**

Mailing Address P.O. Box 200

City State Zip Code  
 Lompoc CA 93438

Purpose of Disbursement  
 refund of business contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB20B.27346  
 Date of Disbursement

04 / 13 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. INNOVATIVE MICRO TECHNOLOGY**

Mailing Address 75 Robin Hill Rd.

City State Zip Code  
 Golota CA 93117

Purpose of Disbursement  
 refund of business contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB20B.27346  
 Date of Disbursement

04 / 10 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

2000.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

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

Mailing Address PO Box 828

City Indianola State IA Zip Code 50125

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  
Senate  
President  
State: IA District D3

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB21.27329  
Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
B. BRIAN HIGGINS FOR CONGRESS

Mailing Address PO BOX 28

City BUFFALO State NY Zip Code 14220

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  
Senate  
President  
State: NY District 27

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB21.27332  
Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
C. Campus Democrats

Mailing Address B25 Embarcadero del Norte #1D

City Goleta State CA Zip Code 93117

Purpose of Disbursement contribution

Candidate Name  
Friends of Lois Capps

Office Sought:  House  
Senate  
President  
State: CA District 23

Disbursement For: 2006  
 Primary General  
Other (specify) ▼

Category/  
Type

Transaction ID: SB21.27048  
Date of Disbursement

04 / 14 / 2005

Amount of Each Disbursement this Period

500.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

TOTAL 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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. CHARLIE MELANCON CAMPAIGN COMMITTEE INC**

Mailing Address 511 CONGRESS ST  
PO BOX 549

City NAPOLEONVILLE State LA Zip Code 70390

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President  
State: LA District: D3

Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

Category/ Type

Transaction ID: SB21.27334  
Date of Disbursement  
06 / 17 / 2005

Amount of Each Disbursement this Period  
1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)  
**B. Chet Edwards for Congress**

Mailing Address P.O. Box 23273

City Waco State TX Zip Code 76702

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President  
State: TX District: 11

Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

Category/ Type

Transaction ID: SB21.27330  
Date of Disbursement  
06 / 17 / 2005

Amount of Each Disbursement this Period  
1000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

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

Mailing Address 430 South Capital St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Membership Dues

Candidate Name

Office Sought:  House  Senate  President  
State: District

Disbursement For: 2006  
 Primary  General  
Other (specify) ▼

Category/ Type

Transaction ID: SB21.27054  
Date of Disbursement  
04 / 05 / 2005

Amount of Each Disbursement this Period  
5000.00

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **7000.00**

**TOTAL** 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)

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<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)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)

**A.** DOCC

Mailing Address 430 South Capitol St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB21.27344

Date of Disbursement

06 / 29 / 2005

Amount of Each Disbursement this Period

10000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B.** Democratic Service Club

Mailing Address PO Box 1478

City Santa Barbara State CA Zip Code 93102

Purpose of Disbursement contribution

Candidate Name

Office Sought: House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: District

Category/  
 Type

Transaction ID: SB21.27317

Date of Disbursement

06 / 31 / 2005

Amount of Each Disbursement this Period

250.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**C.** FRIENDS OF JOHN BARROW

Mailing Address 2141 B West Broad St

City Athens State GA Zip Code 30606

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House Senate President  
 Disbursement For: 2006  
 Primary General  
 Other (specify) ▼

State: GA District 12

Category/  
 Type

Transaction ID: SB21.27327

Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

11250.00

TOTAL 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)

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<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)  
 Friends of Lois Capps

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

Mailing Address PO Box 1144

City Aberdeen State SD Zip Code 57402

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: SD District: D1

Category/ Type

Transaction ID: SB21.27331  
 Date of Disbursement  
 06 / 17 / 2005

Amount of Each Disbursement this Period  
 1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.** Full Name (Last, First, Middle Initial)  
 john salazar for congress

Mailing Address 499 S. Capitol Street SW  
 Suite 804

City Washington State DC Zip Code 20003

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: District

Category/ Type

Transaction ID: SB21.27336  
 Date of Disbursement  
 06 / 17 / 2005

Amount of Each Disbursement this Period  
 1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

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

Mailing Address 677 S. 200 W. Ste. A

City Salt Lake City State UT Zip Code 84101

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2006  Primary  General  Other (specify) ▼

State: UT District: 2

Category/ Type

Transaction ID: SB21.27338  
 Date of Disbursement  
 06 / 17 / 2005

Amount of Each Disbursement this Period  
 1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ▶ **3000.00**

**TOTAL** 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)

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

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NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

Full Name (Last, First, Middle Initial)  
**A. MELISSA BEAN FOR CONGRESS**

Mailing Address 203 FRANCES LANE

City BARRINGTON State IL Zip Code 60010

Purpose of Disbursement  
 contribution

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2006  Primary  General  
 Other (specify) ▼

State: IL District: D8

Category/  
 Type

Transaction ID: SB21.2732B

Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

**B. Moore for Congress**

Mailing Address PO Box 14631

City Shawnee Mission State KS Zip Code 66285

Purpose of Disbursement  
 contribution

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2006  Primary  General  
 Other (specify) ▼

State: KS District: D3

Category/  
 Type

Transaction ID: SB21.27335

Date of Disbursement

06 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

25750.00

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)

Friends of Lois Capps

(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)

8  
 10

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

Jennifer Severance

Nature of Debt (Purpose):

Restitution for Unauth.  
Expenditures

Mailing Address 1718 N. Harrison

City	State	ZIP Code
Boise	ID	83702

Outstanding Balance Beginning This Period

169000.00

Transaction ID: SD9.22725

Amount Incurred This Period

0.00

Payment This Period

6000.00

Outstanding Balance at Close of This Period

157000.00

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	▶	<b>157000.00</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	▶	<b>157000.00</b>
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only) .....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	▶	