

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines.

12FE4M5

DEVIN NUNES CAMPAIGN COMMITTEE

ADDRESS (number and street)

PO BOX 6545

Check if different than previously reported. (ACC)

VISALIA

CA

93290-6545

2. **FEC IDENTIFICATION NUMBER**

C C00370056

CITY

STATE

ZIP CODE

STATE DISTRICT

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

CA

22

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

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

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

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

Election on / / in the State of

5. Covering Period

/ /

through

/ /

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

Type or Print Name of Treasurer TONI DIAN NUNES

Signature of Treasurer TONI DIAN NUNES

[Electronically Filed]

Date

/ /

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

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

DEVIN NUNES CAMPAIGN COMMITTEE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	<input type="text" value="123675.00"/>	<input type="text" value="136175.00"/>
(b) Total Contribution Refunds (from Line 20(d))	<input type="text" value="0.00"/>	<input type="text" value="500.00"/>
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	<input type="text" value="123675.00"/>	<input type="text" value="135675.00"/>
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	<input type="text" value="34317.94"/>	<input type="text" value="66614.10"/>
(b) Total Offsets to Operating Expenditures (from Line 14).....	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	<input type="text" value="34317.94"/>	<input type="text" value="66614.10"/>
8. Cash on Hand at Close of Reporting Period (from Line 27).....	<input type="text" value="2174946.79"/>	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DEVIN NUNES CAMPAIGN COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	25100.00	34850.00
(ii) Unitemized.....	75.00	825.00
(iii) TOTAL of contributions from individuals ▶	25175.00	35675.00
(b) Political Party Committees.....	2500.00	2500.00
(c) Other Political Committees (such as PACs).....	96000.00	98000.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	123675.00	136175.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	333.97	638.68
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	124008.97	136813.68

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	34317.94	66614.10
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	500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	500.00
21. OTHER DISBURSEMENTS	1717.50	8217.50
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	36035.44	75331.60

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2086973.26
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	124008.97
25. SUBTOTAL (add Line 23 and Line 24).....	2210982.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	36035.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2174946.79

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

Form/Schedule: F3A

Transaction ID :

In response to FEC request for additional information. FEC letter dated 8/20/15. A clerical error was made in posting of contribution from Tony A Nunes Dairy. Correction was made and report amended.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
MARK A AVEDIAN

Mailing Address 309 W OAK ST

City VISALIA State CA Zip Code 94391

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

Name of Employer SELF EMPLOYED Occupation REAL ESTATE SALES

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2015

Transaction ID : SA11AI.25060

Amount of Each Receipt this Period
500.00

EARMARKED CONTRIBUTION THROUGH VOTESANE PAC

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

Mailing Address PO BOX 2713

City ALEXANDRIA State VA Zip Code 22301

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **475.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
01 / 22 / 2015

Transaction ID : SA11AI.25060.0

Amount of Each Receipt this Period
475.00

CONTRIBUTION EARMARKED THROUGH THIS ORGANIZATION [MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RONALD A BALLOU

Mailing Address 5536 W SWEET DR

City VISALIA State CA Zip Code 93291

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2015

Transaction ID : SA11AI.25007

Amount of Each Receipt this Period
1000.00

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

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

1500.00

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

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

FOR LINE NUMBER: PAGE 7 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
LEONARD A BLONDER

Mailing Address 5732 BASIL LANE

City State Zip Code
LOS ANGELES CA 90077

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

Name of Employer Occupation
EPS SETTLEMENTS GROUP INC STRUCTURED SETTLEMENT EXPERT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11AI.24974

Amount of Each Receipt this Period
1000.00

DATED: 12/17/14 REC'VD: 1/21/15

B. Full Name (Last, First, Middle Initial)
WILLAM D CARVALHO

Mailing Address 24741 W CENTRAL

City State Zip Code
TRANQUILLITY CA 93668

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2015

Transaction ID : SA11AI.24987

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
TONY (JR) CUNHA

Mailing Address 3939 W WOOD AVE

City State Zip Code
LATON CA 93242

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

Name of Employer Occupation
SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2015

Transaction ID : SA11AI.24992

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
MIKE FISTOLERA

Mailing Address 210 SO. MOONEY BLVD, SUITE F

City VISALIA State CA Zip Code 93291

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

Name of Employer SELF EMPLOYED Occupation FISTOLERA CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2015

Transaction ID : SA11AI.24966

Amount of Each Receipt this Period
375.00

In-kind - OFFICE SPACE RENTAL

B. Full Name (Last, First, Middle Initial)
MIKE FISTOLERA

Mailing Address 210 SO. MOONEY BLVD, SUITE F

City VISALIA State CA Zip Code 93291

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

Name of Employer SELF EMPLOYED Occupation FISTOLERA CONSTRUCTION

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA11AI.24970

Amount of Each Receipt this Period
375.00

In-kind - OFFICE SPACE RENTAL

C. Full Name (Last, First, Middle Initial)
NADEEN FISTOLERA

Mailing Address 210 S MOONEY BLVD

City VISALIA State CA Zip Code 93291

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

Name of Employer FISTOLERA CONSTRUCTION Occupation GENERAL CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 01 / 2015

Transaction ID : SA11AI.24968

Amount of Each Receipt this Period
375.00

In-kind - OFFICE SPACE RENTAL

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

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

1125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
NADEEN FISTOLERA

Mailing Address 210 S MOONEY BLVD

City VISALIA State CA Zip Code 93291

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

Name of Employer FISTOLERA CONSTRUCTION Occupation GENERAL CONTRACTOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2015

Transaction ID : SA11AI.24972

Amount of Each Receipt this Period
375.00

In-kind - OFFICE SPACE RENTAL

B. Full Name (Last, First, Middle Initial)
JACK RANCH

Mailing Address P.O. BOX 146

City STRATFORD State CA Zip Code 93266

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.25003

Amount of Each Receipt this Period
2400.00

PARTNERSHIP

C. Full Name (Last, First, Middle Initial)
JACK G G STONE

Mailing Address 20500 LACEY BLVD

City LEMOORE State CA Zip Code 93245

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

Name of Employer STONE RANCH Occupation SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11AI.25003.0

Amount of Each Receipt this Period
2400.00

PARTNER
[MEMO ITEM]

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

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

2775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
KCD RANCH

Mailing Address P.O. BOX 146

City: STRATFORD State: CA Zip Code: 93266

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

Name of Employer: Occupation:

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2400.00

Date of Receipt: 03 / 04 / 2015

Transaction ID : SA11AI.25000

Amount of Each Receipt this Period: 2400.00

PARTNERSHIP

B. Full Name (Last, First, Middle Initial)
ANN STONE

Mailing Address P.O. BOX 146

City: STRATFORD State: CA Zip Code: 93266

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

Name of Employer: Occupation:
SELF EMPLOYED FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2400.00

Date of Receipt: 03 / 04 / 2015

Transaction ID : SA11AI.25000.0

Amount of Each Receipt this Period: 2400.00

PARTNER

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
KENNETH J KIES

Mailing Address 6109 FRANKLIN PARK RD

City: MCLEAN State: VA Zip Code: 22101

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

Name of Employer: Occupation:
PRICEWATERHOUSE COOPER LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 01 / 19 / 2015

Transaction ID : SA11AI.24991

Amount of Each Receipt this Period: 2500.00

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

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

4900.00

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

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

FOR LINE NUMBER: PAGE 11 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
ANDREW K MALONEY

Mailing Address 3020 MACOMB STREET, NW

City State Zip Code
WASHINGTON DC 20008

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

Name of Employer Occupation
HESS CORPORATION VP OF GOVERNMENT & EXTERNAL AFFAIR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 27 / 2015

Transaction ID : SA11AI.25055

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JANA McKEAG

Mailing Address 315 QUEEN ST

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation
LOWRY STRATEGIES CONSULTANT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : SA11AI.25009

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN D MILNE

Mailing Address P.O. BOX 45

City State Zip Code
FARINA IL 62838

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

Name of Employer Occupation
SELF EMPLOYED LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11AI.25052

Amount of Each Receipt this Period
1500.00

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 12 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
MORONGO BAND OF MISSION INDIANS

Mailing Address P.O. BOX 366

City State Zip Code
CABAZON CA 92230

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 09 / 2015

Transaction ID : SA11AI.24999

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
ANTHONY RATEKIN

Mailing Address 1967 WAGON WHEEL PL

City State Zip Code
TULARE CA 93274

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

Name of Employer Occupation
PARAMOUNT FARMING FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : SA11AI.24989

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
CINDY SCHUIL

Mailing Address 5901 W BEECH CT

City State Zip Code
VISALIA CA 93277

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

Name of Employer Occupation
SCHUIL & ASSOCIATES OFFICE MANAGER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11AI.25017

Amount of Each Receipt this Period
 1000.00

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
MURAD A SUNALP

Mailing Address 615 W VICTOR AVE

City VISALIA State CA Zip Code 93277

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

Name of Employer SUNALP LASER VISION Occupation OPHTHALMOLOGIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.25006

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
TONY A NUNES DAIRY

Mailing Address 12750 AVE 336

City VISALIA State CA Zip Code 93291

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.25011

Amount of Each Receipt this Period
300.00

PARTNERSHIP - Amended to correct clerical error

C. Full Name (Last, First, Middle Initial)
LENO NUNES

Mailing Address 12750 AVE 336

City VISALIA State CA Zip Code 93291

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

Name of Employer TONY A NUNES DAIRY Occupation PARTNER/OPERATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.25011.0

Amount of Each Receipt this Period
300.00

PARTNER - AMENDED TO CORRECT CLERICAL ERROR
[MEMO ITEM]

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

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

1300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 59
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
TONY A NUNES DAIRY

Mailing Address 12750 AVE 336

City VISALIA State CA Zip Code 93291

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.25434

Amount of Each Receipt this Period
1700.00

PARTNERSHIP - Amended to correct clerical error.

B. Full Name (Last, First, Middle Initial)
LENO NUNES

Mailing Address 12750 AVE 336

City VISALIA State CA Zip Code 93291

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

Name of Employer Occupation
TONY A NUNES DAIRY PARTNER/OPERATOR

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11AI.25434.0

Amount of Each Receipt this Period
1700.00

PARTNER: Amended to correct clerical error.

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
RYAN L TRIPLETTE

Mailing Address 1512 KINGMAN PL, NW

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation
FRANKLIN SQUARE GROUP LOBBYIST

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : SA11AI.25054

Amount of Each Receipt this Period
500.00

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

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

2200.00

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

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

FOR LINE NUMBER: PAGE 15 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
LARRY A WILKINSON

Mailing Address 32161 RIVER ISLAND DRIVE

City State Zip Code
SPRINGVILLE CA 93265

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

Name of Employer Occupation
J POONIAN, LP PRESIDENT

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11AI.25018

Amount of Each Receipt this Period
2700.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2700.00

25100.00

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

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

FOR LINE NUMBER: PAGE 16 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
BLUE DIAMOND GROWERS POLITICAL ACTION COMMITTEE (FKA CALIF ALMOND GROWERS EXCHANGE PAC)

Mailing Address 1802 C STREET

City State Zip Code
SACRAMENTO CA 95814

FEC ID number of contributing federal political committee. **C** C00080135

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA11B.24977

Amount of Each Receipt this Period
2500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2500.00

2500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
ACTION COMMITTEE FOR RURAL ELECTRIFICATION (ACRE) NATIONAL RURAL ELECTRIC COOP. ASSOC.

A. Mailing Address 4301 Wilson Boulevard

City State Zip Code
Arlington VA 22203

FEC ID number of contributing federal political committee. **C C00002972**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 25 2015

Transaction ID : SA11C.25008

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLAC PAC

B. Mailing Address WORLDWIDE HEADQUARTERS

City State Zip Code
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C C00034157**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 01 2015

Transaction ID : SA11C.25010

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
ALLERGAN INC POLITICAL ACTION COMM FOR EMPLOYEES (APACE)

C. Mailing Address 2525 DUPONT DRIVE

City State Zip Code
IRVINE CA 92715

FEC ID number of contributing federal political committee. **C C00292102**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 05 2015

Transaction ID : SA11C.25023

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 18 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)

Mailing Address 8201 GREENSBORO DRIVE
SUITE 300

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00168070**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11C.24981

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION PAC (BANKPAC)

Mailing Address 1120 Connecticut Avenue NW
Suite 600

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004275**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 23 / 2015

Transaction ID : SA11C.25051

Amount of Each Receipt this Period
 2000.00

DATED: 3/17/15 REC'VD: 3/23/15

C. Full Name (Last, First, Middle Initial)
AMERICAN EXPRESS COMPANY POLITICAL ACTION COMMITTEE (AXPPAC)

Mailing Address 801 Pennsylvania Ave. NW Suite 650

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C C00040535**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25044

Amount of Each Receipt this Period
 1000.00

DATED: 3/23/15 REC'VD: 3/30/15

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN HOSPITAL ASSN PAC

Mailing Address 325 7TH ST NW

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00106146

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : SA11C.25053

Amount of Each Receipt this Period
 2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN PETROLEUM INSTITUTE POLITICAL ACTION COMMITTEE (API PAC)

Mailing Address 1220 L STREET, NW

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00483677

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25034

Amount of Each Receipt this Period
 1000.00

DATED: 3/23/14 REC'VD: 3/30/15

C. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES APAC

Mailing Address 1575 I Street, NW

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00041566

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25039

Amount of Each Receipt this Period
 1000.00

DATED: 3/26/15 REC'VD: 3/30/15

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
AMERICAN VETERINARY MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE (AVMAPAC)

Mailing Address 1101 VERMONT AVENUE, NW SUITE 710
SUITE 710

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00114132

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 01 / 2015

Transaction ID : SA11C.25013

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING

Mailing Address 1922 F STREET N W

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C70002407

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 01 / 23 / 2015

Transaction ID : SA11C.24983

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
ASSURANT INC. POLITICAL ACTION COMMITTEE

Mailing Address 501 W. Michigan St.
PO BOX 3050

City Milwaukee State WI Zip Code 53203

FEC ID number of contributing federal political committee. **C** C00185694

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25047

Amount of Each Receipt this Period
1000.00

DATED: 3/19/15 REC'VD: 3/30/15

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
BAE SYSTEMS INC. POLITICAL ACTION COMMITTEE (BAE SYSTEMS USA PAC)

Mailing Address 1101 WILSON BLVD.

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25045

Amount of Each Receipt this Period
 1000.00

DATED: 3/25/15 REC'VD: 3/30/15

B. Full Name (Last, First, Middle Initial)
BIOMARIN PHARMACEUTICAL INC. POLITICAL ACTION COMMITTEE AKA BIOMARIN PAC

Mailing Address 2350 KERNER BLVD., SUITE 250

City SAN RAFAEL State CA Zip Code 94901

FEC ID number of contributing federal political committee. **C** C00543371

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 23 / 2015

Transaction ID : SA11C.24997

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
BLUE DIAMOND GROWERS POLITICAL ACTION COMMITTEE (FKA CALIF ALMOND GROWERS EXCHANGE PAC)

Mailing Address 1802 C STREET

City SACRAMENTO State CA Zip Code 95814

FEC ID number of contributing federal political committee. **C** C00080135

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2015

Transaction ID : SA11C.24984

Amount of Each Receipt this Period
 2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address **PO BOX 2198**

City **LOS BANOS** State **CA** Zip Code **93635**

FEC ID number of contributing federal political committee. **C C00349746**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 02 / 2015

Transaction ID : SA11C.25032

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
CHEVRON EMPLOYEES POLITICAL ACTION COMMITTEE - CHEVRON CORPORATION

Mailing Address **6001 Bollinger Canyon Road
Building A2114**

City **San Ramon** State **CA** Zip Code **94583**

FEC ID number of contributing federal political committee. **C C00035006**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 12 / 2015

Transaction ID : SA11C.25020

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
CME GROUP, INC. PAC (CME/CBOT/NYMEX PAC)

Mailing Address **20 South Wacker Drive**

City **Chicago** State **IL** Zip Code **60606**

FEC ID number of contributing federal political committee. **C C00076299**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 04 / 2015

Transaction ID : SA11C.25031

Amount of Each Receipt this Period

2500.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. CRUISE LINES INTERNATIONAL ASSOCIATION PAC (CLIA PAC)

Full Name (Last, First, Middle Initial)
Mailing Address 2111 WILSON BOULEVARD
8TH FLOOR

City ARLINGTON State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00432393

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25042

Amount of Each Receipt this Period
2500.00

DATED: 3/25/15 REC'VD: 3/30/15

B. EMERGENT BIOSOLUTIONS INC EMPLOYEES PAC

Full Name (Last, First, Middle Initial)
Mailing Address 2273 RESEARCH BLVD SUITE 400

City ROCKVILLE State MD Zip Code 20850

FEC ID number of contributing federal political committee. **C** C00380303

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 23 / 2015

Transaction ID : SA11C.25050

Amount of Each Receipt this Period
2000.00

C. EMERSON ELECTRIC CO. RESPONSIBLE GOVERNMENT FUND

Full Name (Last, First, Middle Initial)
Mailing Address 8000 W FLORISSANT AVE
STATION 2310

City ST. LOUIS State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 13 / 2015

Transaction ID : SA11C.25024

Amount of Each Receipt this Period
5000.00

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

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

9500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 59
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 3699 WILSHIRE BLVD., #1290

City LOS ANGELES State CA Zip Code 90010

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 11 / 2015

Transaction ID : SA11C.25028

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
EXXON MOBIL CORPORATION POLITICAL ACTION COMMITTEE (EXXONMOBIL PAC)

Mailing Address 1301 FANNIN ST., SUITE 2215

City HOUSTON State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00121368

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11C.25029

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
HALLIBURTON COMPANY PAC

Mailing Address 1150 18th St., NW Suite 200

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00035691

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25040

Amount of Each Receipt this Period
 2500.00

DATED: 3/20/15 REC'VD: 3/30/15

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

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

7500.00

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

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

FOR LINE NUMBER: PAGE 25 OF 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
HARRIS CORPORATION-FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1025 W NASA BLVD

City State Zip Code
MELBOURNE FL 32919

FEC ID number of contributing federal political committee. **C C00100321**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 12 / 2015

Transaction ID : SA11C.25026

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
HEARPAC OF HEARING INDUSTRIES ASSOCIATION

Mailing Address 1444 I St., NW, Suite 700

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C C00437798**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 02 / 2015

Transaction ID : SA11C.24996

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
HEARPAC OF HEARING INDUSTRIES ASSOCIATION

Mailing Address 1444 I St., NW, Suite 700

City State Zip Code
Washington DC 20005

FEC ID number of contributing federal political committee. **C C00437798**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify) Election Cycle-to-Date
 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 16 / 2015

Transaction ID : SA11C.24995

Amount of Each Receipt this Period
 1000.00

SUBTOTAL of Receipts This Page (optional)..... 4500.00
TOTAL This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
HONEYWELL INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 101 Constitution Avenue NW
Suite 500 West

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 26 / 2015

Transaction ID : SA11C.24979

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address ONE THOMAS CIRCLE NW SUITE 400

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25036

Amount of Each Receipt this Period
1000.00

DATED: 3/25/15 REC'VD: 3/30/15

C. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00105981**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 07 / 2015

Transaction ID : SA11C.24985

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

Mailing Address 1401 H STREET NW SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00105981**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 12 / 2015

Transaction ID : SA11C.25022

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW SUITE 300

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00246306**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 17 / 2015

Transaction ID : SA11C.25033

Amount of Each Receipt this Period
1000.00

DATED: 3/17/15 REC'VD: 3/30/15

C. Full Name (Last, First, Middle Initial)
J.G. BOSWELL COMPANY EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 101 WEST WALNUT STREET

City PASADENA State CA Zip Code 91103

FEC ID number of contributing federal political committee. **C C00082677**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 27 / 2015

Transaction ID : SA11C.24980

Amount of Each Receipt this Period
2000.00

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

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

5500.00

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

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

FOR LINE NUMBER: PAGE 28 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
L-3 COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 600 THIRD AVENUE

City NEW YORK State NY Zip Code 10016

FEC ID number of contributing federal political committee. **C** C00338087

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 09 / 2015

Transaction ID : SA11C.24998

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 1550 Crystal Drive Suite 300

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 18 / 2015

Transaction ID : SA11C.25027

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
MORGAN STANLEY POLITICAL ACTION COMMITTEE

Mailing Address 1585 Broadway 39th Floor

City New York State NY Zip Code 10036

FEC ID number of contributing federal political committee. **C** C00337626

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 13 / 2015

Transaction ID : SA11C.25030

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 29 OF 59
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1331 L St NW
8th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25037

Amount of Each Receipt this Period
1000.00

DATED: 3/24/15 REC'VD: 3/30/15

B. Full Name (Last, First, Middle Initial)
NATIONAL THOROUGHBRED RACING ASSOCIATION POLITICAL ACTION COMMITTEE/HORSE PAC

Mailing Address 2525 Harrodsburg Road

City LEXINGTON State KY Zip Code 40504

FEC ID number of contributing federal political committee. **C C00360008**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 24 / 2015

Transaction ID : SA11C.25021

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
NORFOLK SOUTHERN CORPORATION GOOD GOVERNMENT FUND

Mailing Address 3 Commercial Place
Suite 375

City Norfolk State VA Zip Code 23510

FEC ID number of contributing federal political committee. **C C00009282**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25048

Amount of Each Receipt this Period
2000.00

DATED: 3/9/15 REC'VD: 3/30/15

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 30 OF 59
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
OCCIDENTAL PETROLEUM CORPORATION POLITICAL ACTION COMMITTEE

Mailing Address 10889 WILSHIRE BOULEVARD SUITE 600

City LOS ANGELES State CA Zip Code 90024

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25038

Amount of Each Receipt this Period
1000.00

DATED; 3/24/15 REC'VD: 3/30/15

B. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 Massachusetts Avenue, NE
1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 15 / 2015

Transaction ID : SA11C.24982

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C C00097568**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 18 / 2015

Transaction ID : SA11C.25025

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 22 / 2015

Transaction ID : SA11C.24978

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1200 WILSON BLVD

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25035

Amount of Each Receipt this Period
 1000.00

DATED: 3/23/15 REC'VD: 3/30/15

C. Full Name (Last, First, Middle Initial)
TROUTMAN SANDERS LLP POLITICAL ACTION COMMITTEE

Mailing Address 600 PEACHTREE ST.
SUITE 5200

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00311142

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 30 / 2015

Transaction ID : SA11C.25049

Amount of Each Receipt this Period
 1000.00

DATED: 3/18/15 REC'VD: 3/30/15

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 59
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
UBS AMERICAS INC. POLITICAL ACTION COMMITTEE (UBS PAC)

Mailing Address **400 ATLANTIC STREET**
C/O PER DYRVIK

City **STAMFORD** State **CT** Zip Code **06901**

FEC ID number of contributing federal political committee. **C C00012245**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
01 / 22 / 2015

Transaction ID : SA11C.24976

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
WAL-MART STORES INC PAC FOR RESPONSIBLE GOVERNMENT

Mailing Address **702 SW 8TH STREET**

City **BENTONVILLE** State **AR** Zip Code **72716**

FEC ID number of contributing federal political committee. **C C00093054**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25041

Amount of Each Receipt this Period
1000.00

DATED: 3/26/15 REC'VD: 3/30/15

C. Full Name (Last, First, Middle Initial)
WELLS FARGO AND COMPANY EMPLOYEE PAC (AKA WELLS FARGO EMPLOYEE PAC)

Mailing Address **Sixth and Marquette**
SIXTH AND MARQUETTE

City **Minneapolis** State **MN** Zip Code **55479**

FEC ID number of contributing federal political committee. **C C00034595**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 30 / 2015

Transaction ID : SA11C.25046

Amount of Each Receipt this Period
5000.00

DATED: 3/25/15 REC'VD: 3/30/15

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

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

8500.00

96000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 59
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. Full Name (Last, First, Middle Initial)
SUNCREST BANK

Mailing Address 400 W CENTER AVE

City VISALIA State CA Zip Code 93291

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
292.96

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 31 / 2015

Transaction ID : SA15.25057

Amount of Each Receipt this Period
158.64
INTEREST INCOME ON ACCOUNT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

158.64

158.64

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. CARDMEMBER SERVICES - MC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
EVENT EXP: CATERING/ROOM USAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 07 / 2015

Amount of Each Disbursement this Period
50.00

Transaction ID : SB17.24943

Category/Type
007

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 300 FIRST STREET, S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT EXP: CATERING/ROOM USAGE

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 07 / 2015

Amount of Each Disbursement this Period
50.00

Transaction ID : SB17.24943.0

[MEMO ITEM]

Category/Type
007

C. CARDMEMBER SERVICES - MC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
OFFICE EXP: COMMUNICATIONS/MAILING COSTS

Candidate Name

Office Sought: House Senate President
Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
01 / 07 / 2015

Amount of Each Disbursement this Period
1036.74

Transaction ID : SB17.24944

Category/Type
001

SUBTOTAL of Disbursements This Page (optional)..... 1086.74

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)	PAGE 35 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address P.O. BOX 78522		Amount of Each Disbursement this Period 199.53
City PHOENIX	State AZ	
Zip Code 85062	Purpose of Disbursement OFFICE EXP: COMMUNICATION EXP	Transaction ID : SB17.24944.0
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. VERIZON WIRELESS		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address P.O. BOX 96082		Amount of Each Disbursement this Period 654.57
City BELLEVUE	State WA	
Zip Code 98009	Purpose of Disbursement OFFICE EXP: COMMUNICATION EXP	Transaction ID : SB17.24944.2
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. UPS - Shipping Service		Date of Disbursement MM / DD / YYYY 01 / 07 / 2015
Mailing Address 55 Glenlake Parkway, NE		Amount of Each Disbursement this Period 136.69
City Atlanta	State GA	
Zip Code 30328	Purpose of Disbursement OFFICE EXP: MAILING COSTS	Transaction ID : SB17.24944.3
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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)	PAGE 36 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CARDMEMBER SERVICES - MC			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015		
Mailing Address P.O. Box 94014			Amount of Each Disbursement this Period 1194.91		
City Palatine	State IL	Zip Code 60094	Transaction ID : SB17.24924		
Purpose of Disbursement TRAVEL EXP: CONVENTION FEES/MISC MEALS - UNDER LIMIT		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015		
Mailing Address EBAY PARK NORTH 2211 NORTH FIRST STREET			Amount of Each Disbursement this Period 1162.00		
City SAN JOSE	State CA	Zip Code 95131	Transaction ID : SB17.24924.0		
Purpose of Disbursement TRAVEL EXP: CONVENTION LODGING/REGISTRATION		Category/ Type 002	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. CARDMEMBER SERVICES - MC			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015		
Mailing Address P.O. Box 94014			Amount of Each Disbursement this Period 408.73		
City Palatine	State IL	Zip Code 60094	Transaction ID : SB17.24926		
Purpose of Disbursement EVENT EXP: CATERING/FOOD BEV ROOM USAGE		Category/ Type 007			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1603.64
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)	PAGE 37 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015	
Mailing Address 300 FIRST STREET, S.E.			Amount of Each Disbursement this Period 408.73	
City WASHINGTON	State DC	Zip Code 20003	Transaction ID : SB17.24926.0	
Purpose of Disbursement EVENT EXP: CATERING/FOOD/BEV/ROOM USAGE		Category/ Type 007	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. CARDMEMBER SERVICES - MC			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015	
Mailing Address P.O. Box 94014			Amount of Each Disbursement this Period 817.70	
City Palatine	State IL	Zip Code 60094	Transaction ID : SB17.24928	
Purpose of Disbursement OFFICE EXP: COMMUNICATION EXP		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015	
Mailing Address P.O. BOX 78522			Amount of Each Disbursement this Period 239.58	
City PHOENIX	State AZ	Zip Code 85062	Transaction ID : SB17.24928.0	
Purpose of Disbursement OFFICE EXP: TELEPHONE EXP		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	817.70
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)	PAGE 38 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2015
Mailing Address P.O. BOX 96082			Amount of Each Disbursement this Period 532.17
City BELLEVUE	State WA	Zip Code 98009	Transaction ID : SB17.24928.1 [MEMO ITEM]
Purpose of Disbursement OFFICE EXP: PHONE EXP		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. CARDMEMBER SERVICES - MC			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address P.O. Box 94014			Amount of Each Disbursement this Period 869.90
City Palatine	State IL	Zip Code 60094	Transaction ID : SB17.24950
Purpose of Disbursement OFFICE EXP: COMMUNICATION/MAILING COSTS		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address P.O. BOX 78522			Amount of Each Disbursement this Period 282.40
City PHOENIX	State AZ	Zip Code 85062	Transaction ID : SB17.24950.0 [MEMO ITEM]
Purpose of Disbursement OFFICE EXP: COMMUNICATIONS EXP		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	869.90
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)	PAGE 39 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address P.O. BOX 96082		Amount of Each Disbursement this Period 533.02
City BELLEVUE	State WA	
Zip Code 98009	Purpose of Disbursement OFFICE EXP: COMMUNICATIONS EXP	Transaction ID : SB17.24950.1
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 4350 PELL DR		Amount of Each Disbursement this Period 45.95
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement OFFICE EXP: INTERNET SERVICE	Transaction ID : SB17.24950.2
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. UPS - Shipping Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 55 Glenlake Parkway, NE		Amount of Each Disbursement this Period 8.53
City Atlanta	State GA	
Zip Code 30328	Purpose of Disbursement OFFICE EXP; MAILING COSTS	Transaction ID : SB17.24950.3
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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)		PAGE 40 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

A. CARDMEMBER SERVICES - MC

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
EVENT EXP: CATERING/FOOD/BEV/ROOM USAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
1617.09

Transaction ID : SB17.24955

Category/Type
007

B. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 300 FIRST STREET, S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
EVENT EXP: CATERING/FOOD/BEV/ROOM USAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
348.24

Transaction ID : SB17.24955.0

[MEMO ITEM]

Category/Type
007

C. SCHNEIDER'S OF CAPITOL HILL

Full Name (Last, First, Middle Initial)
Mailing Address 300 MASSACHUSETTS AVE, NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
EVENT EXP: CATERING: BEV

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
638.85

Transaction ID : SB17.24955.1

[MEMO ITEM]

Category/Type
007

SUBTOTAL of Disbursements This Page (optional)..... 1617.09

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)		PAGE 41 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial)
A. CAMPAIGN FINANCIAL SERVICE

Mailing Address P.O. BOX 30844

City State Zip Code
BETHESDA MD 20824

Purpose of Disbursement
EVENT EXP: CATERING/FOOD/BEV

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
630.00

Transaction ID : SB17.24955.2

[MEMO ITEM]

Category/Type
007

Full Name (Last, First, Middle Initial)
B. CARDMEMBER SERVICES - MC

Mailing Address P.O. Box 94014

City State Zip Code
Palatine IL 60094

Purpose of Disbursement
SOLICITATION: COINS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
2762.50

Transaction ID : SB17.24960

Category/Type
003

Full Name (Last, First, Middle Initial)
C. HUBER & ASSOCIATES LLC

Mailing Address 2126 HAMILTON DR, STE 450

City State Zip Code
ARGYLE TX 76226

Purpose of Disbursement
SOLICITATION: COINS

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
03 / 09 / 2015

Amount of Each Disbursement this Period
2762.50

Transaction ID : SB17.24960.0

[MEMO ITEM]

Category/Type
003

SUBTOTAL of Disbursements This Page (optional)..... 2762.50

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)		PAGE 42 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CARDMEMBER SERVICES - MC		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 359.38
City Palatine	State IL	
Zip Code 60094	Purpose of Disbursement TRAVEL: LODGING	Transaction ID : SB17.24962
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. HERSHEY LODGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2015
Mailing Address 325 UNIVERSARY DRIVE		Amount of Each Disbursement this Period 359.38
City HERSHEY	State PA	
Zip Code 17033	Purpose of Disbursement TRAVEL: LODGING	Transaction ID : SB17.24962.0
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CENTRAL VALLEY BUSINESS FORMS		Date of Disbursement M M / D D / Y Y Y Y 01 / 13 / 2015
Mailing Address 7500 W SUNNYVIEW AVE		Amount of Each Disbursement this Period 3246.01
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement SOLICITATION EXP: CARDS/MAILING EXP	Transaction ID : SB17.24941
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3605.39
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)	PAGE 43 OF 59		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CYBER SOURCE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 1295 CHARLESTON ROAD		Amount of Each Disbursement this Period 283.79 Transaction ID : SB17.24885
City MOUNTAIN VIEW State CA Zip Code 94043	Purpose of Disbursement CREDIT CARD PROCESSING FEES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. MIKE FISTOLERA		Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015
Mailing Address 210 SO. MOONEY BLVD, SUITE F		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.24967
City VISALIA State CA Zip Code 93291	Purpose of Disbursement In-kind - OFFICE SPACE RENTAL Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. MIKE FISTOLERA		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address 210 SO. MOONEY BLVD, SUITE F		Amount of Each Disbursement this Period 375.00 Transaction ID : SB17.24971
City VISALIA State CA Zip Code 93291	Purpose of Disbursement In-kind - OFFICE SPACE RENTAL Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1033.79
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)	PAGE 44 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. NADEEN FISTOLERA			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2015		
Mailing Address 210 S MOONEY BLVD			Amount of Each Disbursement this Period 375.00		
City VISALIA	State CA	Zip Code 93291	Transaction ID : SB17.24969		
Purpose of Disbursement In-kind - OFFICE SPACE RENTAL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. NADEEN FISTOLERA			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015		
Mailing Address 210 S MOONEY BLVD			Amount of Each Disbursement this Period 375.00		
City VISALIA	State CA	Zip Code 93291	Transaction ID : SB17.24973		
Purpose of Disbursement In-kind - OFFICE SPACE RENTAL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015		
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 273.34		
City VISALIA	State CA	Zip Code 93291	Transaction ID : SB17.24887		
Purpose of Disbursement OFFICE EXPENSES: SUPPLIES/MAILING COSTS/ BALANCE UNDER LIMIT		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1023.34
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)	PAGE 45 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. OFFICE DEPOT		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 2425 SO MOONEY BLVD		Amount of Each Disbursement this Period 74.10
City VISALIA State CA Zip Code 93291	Purpose of Disbursement OFFICE EXP: SUPPLIES/PAPER/CARDS 001 Category/Type	
Candidate Name		Transaction ID : SB17.24887.0 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. UPS - Shipping Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 55 Glenlake Parkway, NE		Amount of Each Disbursement this Period 23.28
City Atlanta State GA Zip Code 30328	Purpose of Disbursement OFFICE EXP: MAILING COSTS 001 Category/Type	
Candidate Name		Transaction ID : SB17.24887.1 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. USPS - U. S. POSTMASTER - VISALIA		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address GENERAL DELIVERY		Amount of Each Disbursement this Period 73.50
City VISALIA State CA Zip Code 93277	Purpose of Disbursement OFFICE EXP: MAILING COSTS 001 Category/Type	
Candidate Name		Transaction ID : SB17.24887.2 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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)	PAGE 46 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CAMPAIGNER BY PROTUS			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 6922 HOLLYWOOD BLVD			Amount of Each Disbursement this Period 74.98
City HOLLYWOOD	State CA	Zip Code 90028	
Purpose of Disbursement OFFICE EXP: SOFTWARE LIC		Category/ Type 001	Transaction ID : SB17.24887.3 [MEMO ITEM]
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) B. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 266.70
City VISALIA	State CA	Zip Code 93291	
Purpose of Disbursement TRAVEL: MILAGE REIMBURSEMENT		Category/ Type 002	Transaction ID : SB17.24893
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) C. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 3233.40
City VISALIA	State CA	Zip Code 93291	
Purpose of Disbursement ADVERTISING EXP		Category/ Type 004	Transaction ID : SB17.24895
Candidate Name			
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2015 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	3500.10
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)	PAGE 47 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. TWITTER		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 795 FOLSOM ST		Amount of Each Disbursement this Period 964.06
City SAN FRANCISCO	State CA	
Zip Code 94107	Purpose of Disbursement ADVERTISING EXPENSES	Transaction ID : SB17.24895.0
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. FACEBOOK, INC		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address 1601 S CALIFORNIA AVE		Amount of Each Disbursement this Period 2258.78
City PALO ALTO	State CA	
Zip Code 94306	Purpose of Disbursement ADVERTISING EXPENSE	Transaction ID : SB17.24895.1
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 2925.00
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement CONSULTING: OFFICE MANAGEMENT	Transaction ID : SB17.24933
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2925.00
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)	PAGE 48 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 203.12 Transaction ID : SB17.24899
City VISALIA	State CA	Zip Code 93291	
Purpose of Disbursement TRAVEL EXP: LODGING		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. HYATT REGENCY			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address 1333 BAYSHORE HIGHWAY			Amount of Each Disbursement this Period 203.12 Transaction ID : SB17.24899.0 [MEMO ITEM]
City BURLINGAME	State CA	Zip Code 94010	
Purpose of Disbursement TRAVEL EXP: LODGING		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) C. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 1062.00 Transaction ID : SB17.24902
City VISALIA	State CA	Zip Code 93291	
Purpose of Disbursement EVENT EXP: CATERING SUPPLIES/FOOD/BEV		Category/ Type 007	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1265.12
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)	PAGE 49 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. COSTCO WHOLESALE		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 3750 S MOONEY BLVD		Amount of Each Disbursement this Period 1062.00
City VISALIA State CA Zip Code 93279	Purpose of Disbursement EVENT EXP: CATERING/FOOD/BEV	
Candidate Name	Category/Type 007	Transaction ID : SB17.24902.0 [MEMO ITEM]
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CLARISSA N HENDERSON		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 177.53
City VISALIA State CA Zip Code 93291	Purpose of Disbursement OFFICE EXP: MAILING COSTS/SOFTWARE LIC	
Candidate Name	Category/Type 001	Transaction ID : SB17.24904
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. CAMPAIGNER BY PROTUS		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 6922 HOLLYWOOD BLVD		Amount of Each Disbursement this Period 74.98
City HOLLYWOOD State CA Zip Code 90028	Purpose of Disbursement OFFICE EXP: SOFTWARE LIC	
Candidate Name	Category/Type 001	Transaction ID : SB17.24904.0 [MEMO ITEM]
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	177.53
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)		PAGE 50 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. USPS - U. S. POSTMASTER - VISALIA		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address GENERAL DELIVERY		Amount of Each Disbursement this Period 92.00
City VISALIA	State CA Zip Code 93277	
Purpose of Disbursement OFFICE EXP: P.O. BOX FEES	Category/Type 001	Transaction ID : SB17.24904.1 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CLARISSA N HENDERSON		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 685.26
City VISALIA	State CA Zip Code 93291	
Purpose of Disbursement ADVERTISING EXPENSE	Category/Type 004	Transaction ID : SB17.24907 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FACEBOOK, INC		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 1601 S CALIFORNIA AVE		Amount of Each Disbursement this Period 450.74
City PALO ALTO	State CA Zip Code 94306	
Purpose of Disbursement ADVERTISING EXP:	Category/Type 004	Transaction ID : SB17.24907.0 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	685.26
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)	PAGE 51 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. TWITTER		Date of Disbursement MM / DD / YYYY 02 / 19 / 2015
Mailing Address 795 FOLSOM ST		Amount of Each Disbursement this Period 1350.33
City SAN FRANCISCO	State CA	
Purpose of Disbursement ADVERTISING EXP	Zip Code 94107	Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. CLARISSA N HENDERSON		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 1350.33
City VISALIA	State CA	
Purpose of Disbursement TRAVEL EXP: LODGING	Zip Code 93291	Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. HYATT REGENCY		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 1333 BAYSHORE HIGHWAY		Amount of Each Disbursement this Period 1350.33
City BURLINGAME	State CA	
Purpose of Disbursement TRAVEL EXP: LODGING	Zip Code 94010	Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1350.33
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)		PAGE 52 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 669.90 Transaction ID : SB17.24914
City VISALIA State CA Zip Code 93291	Purpose of Disbursement EVENT EXP: CATERING SUPPLIES/FOOD/BEV 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. COSTCO WHOLESALE		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 3750 S MOONEY BLVD		Amount of Each Disbursement this Period 513.90 Transaction ID : SB17.24914.0 [MEMO ITEM]
City VISALIA State CA Zip Code 93279	Purpose of Disbursement EVENT EXP: CATERING SUPPLIES/FOOD/BEV 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. SMART & FINAL		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 600 W CENTER		Amount of Each Disbursement this Period 156.00 Transaction ID : SB17.24914.1 [MEMO ITEM]
City VISALIA State CA Zip Code 93291	Purpose of Disbursement EVENT EXP: CATERING SUPPLIES/FOOD/BEV 007 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	669.90
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)		PAGE 53 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 350.16 Transaction ID : SB17.24917
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement OFFICE EXP: COMPUTER/SOFTWARE LIC - BALANCE UNDER LIMIT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CAMPAIGNER BY PROTUS		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 6922 HOLLYWOOD BLVD		Amount of Each Disbursement this Period 74.98 Transaction ID : SB17.24917.0 [MEMO ITEM]
City HOLLYWOOD	State CA	
Zip Code 90028	Purpose of Disbursement OFFICE EXP: SOFTWARE LIC	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. APPLE INC		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 1 INFINITE LOOP		Amount of Each Disbursement this Period 210.97 Transaction ID : SB17.24917.1 [MEMO ITEM]
City CUPERTINO	State CA	
Zip Code 95014	Purpose of Disbursement OFFICE EXP: COMPUTER	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	350.16
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)	PAGE 54 OF 59			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015	
Mailing Address P.O. Box 7474			Amount of Each Disbursement this Period 117.12	
City VISALIA	State CA	Zip Code 93291	Transaction ID : SB17.24921	
Purpose of Disbursement ADVERTISING		Category/ Type 004		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. TWITTER			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015	
Mailing Address 795 FOLSOM ST			Amount of Each Disbursement this Period 114.44	
City SAN FRANCISCO	State CA	Zip Code 94107	Transaction ID : SB17.24921.0	
Purpose of Disbursement ADVERTISING		Category/ Type 004	[MEMO ITEM]	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. FACEBOOK, INC			Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015	
Mailing Address 1601 S CALIFORNIA AVE			Amount of Each Disbursement this Period 2.68	
City PALO ALTO	State CA	Zip Code 94306	Transaction ID : SB17.24921.1	
Purpose of Disbursement ADVERTISING		Category/ Type 004	[MEMO ITEM]	
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	117.12
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)	PAGE 55 OF 59		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. MIRLA MENDOZA		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2015
Mailing Address 369 LEMONA STREET		Amount of Each Disbursement this Period 261.42 Transaction ID : SB17.24934
City WOODLAKE	State CA	
Zip Code 93286	Purpose of Disbursement TRAVEL EXP: MISC MEAL EXPENSES - UNDER REPORTING LIMIT	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NORTHSTAR CAMPAIGN SYSTEMS		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2015
Mailing Address 11235 DAVENPORT ST, #1108		Amount of Each Disbursement this Period 4463.20 Transaction ID : SB17.24932
City OMAHA	State NE	
Zip Code 68154	Purpose of Disbursement ADVERTISING EXP: MESSAGE/VIDEO	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2015
Mailing Address EBAY PARK NORTH 2211 NORTH FIRST STREET		Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.24883
City SAN JOSE	State CA	
Zip Code 95131	Purpose of Disbursement CREDIT CARD PROCESSING FEES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4814.62
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)	PAGE 56 OF 59			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CAITLIN SHANNON		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 201 I ST NE		Amount of Each Disbursement this Period 74.93 Transaction ID : SB17.24937
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement EVENT EXP: REIMBURSEMENT FOR CATERING/FOOD/BEV - UNDER REPORTING LIMIT	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CAITLIN SHANNON		Date of Disbursement MM / DD / YYYY 02 / 13 / 2015
Mailing Address 201 I ST NE		Amount of Each Disbursement this Period 2250.00 Transaction ID : SB17.24938
City WASHINGTON	State DC	
Zip Code 20002	Purpose of Disbursement CONSULTING: FUNDRAISING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SUNBIRD CONSERVATIVES		Date of Disbursement MM / DD / YYYY 03 / 18 / 2015
Mailing Address 1717 S. CHESTNUT AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.24936
City FRESNO	State CA	
Zip Code 93702	Purpose of Disbursement TABLE SPONSOR AT EVENT	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3324.93
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)		PAGE 57 OF 59	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. US DEPARTMENT OF THE TREASURY		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2015
Mailing Address 3700 EAST WEST HIGHWAY		Amount of Each Disbursement this Period 266.55
City HYATTSVILLE	State MD Zip Code 20782	
Purpose of Disbursement INCOME TAX	Category/Type 001	Transaction ID : SB17.24939
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

SUBTOTAL of Disbursements This Page (optional).....	266.55
TOTAL This Period (last page this line number only).....	33866.71

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 59
	<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)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 01 / 19 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 200.00 Transaction ID : SB21.24894
City VISALIA State CA Zip Code 93291	Purpose of Disbursement OTHER EXP: MEMBERSHIP DUES 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 867.50 Transaction ID : SB21.24901
City VISALIA State CA Zip Code 93291	Purpose of Disbursement POLITICAL CONTRIBUTION: CONVENTION DUES & REGISTRATION 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CALIFORNIA REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 02 / 19 / 2015
Mailing Address 1903 W MAGNOLIA BLVD		Amount of Each Disbursement this Period 867.50 Transaction ID : SB21.24901.0 [MEMO ITEM]
City BURBANK State CA Zip Code 91506	Purpose of Disbursement CONTRIBUTION: CONVENTION DUES & REGISTRATION 011 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1067.50
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)	PAGE 59 OF 59
	<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)
DEVIN NUNES CAMPAIGN COMMITTEE

Full Name (Last, First, Middle Initial) A. CLARISSA N HENDERSON		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address P.O. Box 7474		Amount of Each Disbursement this Period 650.00 Transaction ID : SB21.24912
City VISALIA	State CA	
Zip Code 93291	Purpose of Disbursement POLITICAL CONTRIBUTION: DUES	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CALIFORNIA REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2015
Mailing Address 1903 W MAGNOLIA BLVD		Amount of Each Disbursement this Period 650.00 Transaction ID : SB21.24912.0 [MEMO ITEM]
City BURBANK	State CA	
Zip Code 91506	Purpose of Disbursement POLITICAL CONTRIBUTION: DUES	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

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

SUBTOTAL of Disbursements This Page (optional).....	650.00
TOTAL This Period (last page this line number only).....	1717.50