



**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 74

Write or Type Committee Name

Richardson For Congress

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	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)).....	86830.00	640094.79
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	86830.00	640094.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	171984.28	612321.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	5002.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	171984.28	607319.73
8. Cash on Hand at Close of Reporting Period (from Line 27).....	15632.42	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	431006.83	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

**POST-ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 07/05)

Report of Receipts and Disbursements

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Richardson For Congress

Report Covering the Period: From:    To:

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> <input type="text" value="02"/> <input type="text" value="2010"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> <input type="text" value="03"/> <input type="text" value="2010"/> (date after general election)  through <input type="text" value="11"/> <input type="text" value="22"/> <input type="text" value="2010"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A)		
<input type="text" value="24850.00"/>	<input type="text" value="98299.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="3880.00"/>	<input type="text" value="20008.21"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="28730.00"/>	<input type="text" value="118307.21"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="6.05"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="58100.00"/>	<input type="text" value="521781.53"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED  
SUMMARY PAGE  
Report of Receipts and Disbursements**

<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general Election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
86830.00	640094.79	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	5002.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
86830.00	645096.79	0.00

POST ELECTION DETAILED SUMMARY PAGE

Write or Type Committe Name

Richardson For Congress

Report the covering period

From:

10

14

2010

To:

11

22

2010

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
<b>17. OPERATING EXPENDITURES</b>		
171984.28	612321.73	19151.64
<b>18. TRANSFER TO OTHER AUTHORIZED COMMITTEES</b>		
0.00	0.00	0.00
<b>19. LOAN PAYMENTS</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	30000.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b) )		
0.00	30000.00	0.00
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
0.00	0.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

**POST ELECTION DETAILED SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
(c) Other political committees (such as PACs)		
0.00	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c) )		
0.00	0.00	0.00
21. OTHER DISBURSEMENTS		
6000.00	24351.00	0.00
22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)		
177984.28	666672.73	19151.64

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

86830.00	640094.79	0.00
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**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

171984.28	607319.73	19151.64
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD .....	106786.70
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	86830.00
25. SUBTOTAL(add Line 23 and Line 24) .....	193616.70
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	177984.28
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	15632.42

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    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)  
Richardson For Congress

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

Mailing Address 2222 Michelson Dr #295

City Irvine State CA Zip Code 92612

FEC ID number of contributing federal political committee. C

Name of Employer HRA Environmental Consultants Inc Occupation Principal

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

**Transaction ID:** SA11ai00000000772043

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2901 Orange Av

City Long Beach State CA Zip Code 90806

FEC ID number of contributing federal political committee. C

Name of Employer Signal Hill Petroleum Occupation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11ai00000000770009

Amount of Each Receipt this Period  
500.00

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

Mailing Address 609 S Long Beach Bl

City Compton State CA Zip Code 90221

FEC ID number of contributing federal political committee. C

Name of Employer Ebenezer Bush DDS Occupation Dentist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

**Transaction ID:** SA11ai00000000772041

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 74
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Yuwen Chang	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Mailing Address 30136 Avenida De Calma	<b>Transaction ID:</b> SA11ai00000000771527
	City Rancho Palos Verde      State CA      Zip Code 90275	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Chang Industry      Occupation Physician	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael Chegini	Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Mailing Address 20 Morgan	<b>Transaction ID:</b> SA11ai00000000772264
	City Irvine      State CA      Zip Code 92618	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Owen Group      Occupation Engineer	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Alex Cherin	Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Mailing Address 3755 California Av	<b>Transaction ID:</b> SA11ai00000000770034
	City Long Beach      State CA      Zip Code 90807	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Cherin Group      Occupation Attorney	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 9 / 74</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Minnie L Douglas		Date of Receipt
	Mailing Address 7801 Turbo St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 0 2 / 2 0 1 0
	City	State	Zip Code
	Long Beach	CA	90808
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000775673
Name of Employer Career College Of America		Occupation Educator/Consultant	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Carolyn J Fowler		Date of Receipt
	Mailing Address 3138 W 1369th St #2		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 2 7 / 2 0 1 0
	City	State	Zip Code
	Hawthorne	CA	90250
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000771471
Name of Employer Carolyn J. Fowler		Occupation Business Consultant	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jack A Frydrych		Date of Receipt
	Mailing Address 5345 Oak Park Av		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 0 / 3 0 / 2 0 1 0
	City	State	Zip Code
	Encino	CA	91316
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000772044
Name of Employer Jack Frydrych		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
		<input type="text"/> 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 700.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Horton, Board Of Equalization 2010		Date of Receipt MM / DD / YYYY 11 / 02 / 2010
	Mailing Address 555 Capitol Mall, Suite 1425		<b>Transaction ID:</b> SA11ai00000000772259
	City Sacramento	State CA	Zip Code 95814
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer	Occupation	Fec Permissible Funds
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Armen Khatchaturian		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 3760 Berwick Dr		<b>Transaction ID:</b> SA11ai00000000769999
	City La Canada Flintrid	State CA	Zip Code 91011
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
	Name of Employer NCR	Occupation Engineer	Fec Permissible Funds
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Eve M Kurtin		Date of Receipt MM / DD / YYYY 10 / 30 / 2010
	Mailing Address 16830 Ventura Bl #244		<b>Transaction ID:</b> SA11ai00000000772042
	City Encino	State CA	Zip Code 91436
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
	Name of Employer VantagePoint	Occupation Venture Partner	Fec Permissible Funds
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Charmaine M Laney

Mailing Address 2145 Bay View Dr

City Signal Hill State CA Zip Code 90755

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

Name of Employer Laney Productions Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 26 / 2010  
**Transaction ID:** SA11ai00000000770017  
 Amount of Each Receipt this Period: 300.00

Election Cycle-to-Date: 800.00

**B.**

Full Name (Last, First, Middle Initial)  
Renan Listi

Mailing Address 2135 Ohio Av

City Signal Hill State CA Zip Code 90755

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

Name of Employer Boart Longyear Occupation Engineer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 10 / 26 / 2010  
**Transaction ID:** SA11ai00000000770015  
 Amount of Each Receipt this Period: 300.00

Election Cycle-to-Date: 300.00

**C.**

Full Name (Last, First, Middle Initial)  
S Qaisar Madad

Mailing Address 2452 Alamo Heights Dr

City Diamond Bar State CA Zip Code 91765

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

Name of Employer Telecommunication & Multi-media Inc Occupation CEO/Technology

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 11 / 02 / 2010  
**Transaction ID:** SA11ai00000000772223  
 Amount of Each Receipt this Period: 2400.00

Election Cycle-to-Date: 2400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Asif Mahmood		Date of Receipt
	Mailing Address 9 Dovetail Ln		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Bradbury	CA	91010
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Asif Mahmood		Occupation Doctor	<b>Transaction ID:</b> SA11ai00000000772238
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="1000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="1000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) John C Molina		Date of Receipt
	Mailing Address 5668 Naples Canal		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Long Beach	CA	90803
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Molina Healthcare Inc		Occupation Chief Finance Officer	<b>Transaction ID:</b> SA11ai00000000772225
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="4000.00"/>	
			Amount of Each Receipt this Period <input type="text" value="1000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Vera J Mulkey		Date of Receipt
	Mailing Address 2475 Pine Av		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Long Beach	CA	90806
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/A		Occupation Retired	<b>Transaction ID:</b> SA11ai00000000772241
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="400.00"/>	
			Amount of Each Receipt this Period <input type="text" value="200.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2200.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.** Full Name (Last, First, Middle Initial)  
Marsha J Naify

Mailing Address 321 Redondo Av

City State Zip Code  
Long Beach CA 90814

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

Name of Employer Occupation  
Liberty Road Stables LLC Owner

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 5 / 2 0 1 0

**Transaction ID:** SA11ai00000000770737

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
San Manuel Band Of Mission Indians

Mailing Address 26569 Community Center Dr

City State Zip Code  
Highland CA 92346

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

Name of Employer Occupation  
N/A FEC Permissible Funds

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 1 0

**Transaction ID:** SA11ai00000000772210

Amount of Each Receipt this Period  
2400.00

**C.** Full Name (Last, First, Middle Initial)  
George L Pla

Mailing Address 2001 Yacht Vigilant

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Cordoba Corp CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11ai00000000769993

Amount of Each Receipt this Period  
3000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5800.00**

**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: PAGE 14 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.** Full Name (Last, First, Middle Initial)  
George L Pla

Mailing Address 2001 Yacht Vigilant

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Cordoba Corp CEO

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11ai00000000769995

Amount of Each Receipt this Period  
600.00

Primary Debt Retirement

**B.** Full Name (Last, First, Middle Initial)  
David L Slater

Mailing Address 16901 Marina Bay Dr

City State Zip Code  
Huntington Beach CA 92649

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

Name of Employer Occupation  
Signal Hill Petro Partner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11ai00000000770008

Amount of Each Receipt this Period  
500.00

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

Mailing Address 270 S Los Angeles St

City State Zip Code  
Los Angeles CA 90012

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

Name of Employer Occupation  
International Lawyers Of America Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 2 / 2 0 1 0

**Transaction ID:** SA11ai00000000772240

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1600.00**

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

A. Form/Schedule : **SA11ai**

Primary Debt Retirement

Transaction ID : **SA11ai00000000769995**

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 74  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Nadadur Vardhan

Mailing Address 2316 Hill St

City State Zip Code  
Santa Monica CA 90405

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

Name of Employer Occupation  
Nadadur Associates President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

**Transaction ID:** SA11ai00000000772219

Amount of Each Receipt this Period  
2400.00

2500.00

**B.**

Full Name (Last, First, Middle Initial)  
Nadadur Vardhan

Mailing Address 2316 Hill St

City State Zip Code  
Santa Monica CA 90405

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

Name of Employer Occupation  
Nadadur Associates President

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

**Transaction ID:** SA11ai00000000772220

Amount of Each Receipt this Period  
100.00

Primary 2010 Debt Retirement

2500.00

**C.**

Full Name (Last, First, Middle Initial)  
Nien-Ling T Wacker

Mailing Address 5606 Naples Canal

City State Zip Code  
Long Beach CA 90803

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

Name of Employer Occupation  
Laserfiche CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	2	/	2	0	1	0

**Transaction ID:** SA11ai00000000772224

Amount of Each Receipt this Period  
1000.00

1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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



B. Form/Schedule : **SA11ai**

\$100 Primary 2010 Debt Retirement Nadadur Vardhan

Transaction ID : **SA11ai00000000772220**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 74
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Cloy J Walter	Date of Receipt
	Mailing Address 300 Winslow Av	<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	City State Zip Code Long Beach CA 90814	<b>Transaction ID:</b> SA11ai00000000770014
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
	Name of Employer Occupation CSULB Exec Assistant To President	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="1300.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="24850.00"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) American Academy Of Nurse Practitioners PAC		Date of Receipt
	Mailing Address PO Box 40473		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20016
	FEC ID number of contributing federal political committee. <b>C</b> C00358903		<b>Transaction ID:</b> SA11c00000000775674
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="100.00"/>
		<input type="text" value="100.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) American Bankers Association PAC		Date of Receipt
	Mailing Address 1120 Connecticut Av NW		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. <b>C</b> C00004275		<b>Transaction ID:</b> SA11c00000000770013
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="500.00"/>
		<input type="text" value="2500.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) American Dental PAC		Date of Receipt
	Mailing Address 1111 14th St NW #1100		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. <b>C</b> C00000729		<b>Transaction ID:</b> SA11c00000000772039
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1500.00"/>
		<input type="text" value="2500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 20 / 74</span>			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) American Federation Of State County And Municipal Employees AFL CIO		Date of Receipt
	Mailing Address 1625 L Street NW		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. <b>C</b> C00011114		<b>Transaction ID:</b> SA11c00000000771606
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="7000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) American Medical Assn PAC		Date of Receipt
	Mailing Address 25 Massachusetts Av NW #600		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee. <b>C</b> C00000422		<b>Transaction ID:</b> SA11c00000000770003
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="2000.00"/>
		<input type="text" value="2000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) American Moving & Storage Association PAC		Date of Receipt
	Mailing Address 1611 Duke St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. <b>C</b> C00255257		<b>Transaction ID:</b> SA11c00000000765179
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 74

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.** Full Name (Last, First, Middle Initial)  
American Optometric Association PAC

Mailing Address 1505 Prince St #300

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. C C00024968

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**Transaction ID:** SA11c00000000767496

Amount of Each Receipt this Period  
1000.00

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

Mailing Address One Amgen Ctr Dr

City State Zip Code  
Thousand Oaks CA 91320

FEC ID number of contributing federal political committee. C C00251876

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 8 / 2 0 1 0

**Transaction ID:** SA11c00000000771075

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Association Of Commuter Rail Employees ACRE PAC

Mailing Address 420 Lexington Av #215

City State Zip Code  
New York NY 10017

FEC ID number of contributing federal political committee. C C00386250

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11c00000000770012

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 2500.00

**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:	PAGE 22 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) BCTGM International Union PAC		Date of Receipt
	Mailing Address 10401 Connecticut Av		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Kensington	MD	20895
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000770007
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) BNSF RailPAC Burlington Northern Santa Fe RAILPAC		Date of Receipt
	Mailing Address PO Box 961039		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Fort Worth	TX	76161
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000771073
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="6000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) Congressional Black Caucus PAC		Date of Receipt
	Mailing Address 455 Massachusetts Av NW #150-355		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20001
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000769793
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="5000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 23 / 74  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council CULAC  
 Mailing Address 601 Pennsylvania Av NW #600  
 City Washington State DC Zip Code 20004  
 Date of Receipt 10 / 18 / 2010  
**Transaction ID:** SA11c00000000766450  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00007880  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

**B.** Full Name (Last, First, Middle Initial)  
Dairy Farmers Of America Inc PAC DEPAC  
 Mailing Address 10220 N Executive Hills BI  
 City Kansas City State MO Zip Code 64153  
 Date of Receipt 11 / 02 / 2010  
**Transaction ID:** SA11c00000000775672  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00001388  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Dealers Election Action Committee Of The National Automobile Dealers Assn  
 Mailing Address 8400 Westpark Dr  
 City Mc Lean State VA Zip Code 22102  
 Date of Receipt 10 / 26 / 2010  
**Transaction ID:** SA11c00000000769998  
 Amount of Each Receipt this Period 2500.00  
 FEC ID number of contributing federal political committee. **C** C00040998  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00

**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 24 / 74
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) DRIVE Committee (Fed)	Date of Receipt
	Mailing Address 25 Louisiana Av NW	<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20001	<b>Transaction ID:</b> SA11c00000000768876
	FEC ID number of contributing federal political committee. <input type="text" value="C00032979"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="10000.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) eBay Inc Comm For Responsible Internet Commerce	Date of Receipt
	Mailing Address 228 S Washington St #115	<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City State Zip Code Alexandria VA 22314	<b>Transaction ID:</b> SA11c00000000767817
	FEC ID number of contributing federal political committee. <input type="text" value="C00342394"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="3000.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Eli Lilly & Co PAC (Federal)	Date of Receipt
	Mailing Address Lilly Corp Ctr	<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City State Zip Code Indianapolis IN 46285	<b>Transaction ID:</b> SA11c00000000771077
	FEC ID number of contributing federal political committee. <input type="text" value="C00082792"/>	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
	Name of Employer Occupation	
	Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ <input type="text" value="3000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 25 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Ironworkers Political Action League PAC		Date of Receipt
	Mailing Address 1750 New York Av NW		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000769997
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="2500.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="7500.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>B.</b>	Full Name (Last, First, Middle Initial) Jobs Opportunities And Education PAC		Date of Receipt
	Mailing Address 84-54 Grand Av		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Elmhurst	NY	11373
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000772359
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="1000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>C.</b>	Full Name (Last, First, Middle Initial) LIUNA PAC		Date of Receipt
	Mailing Address 905 16th St NW		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee.		Transaction ID: SA11c00000000775671
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010		Election Cycle-to-Date ▼	<input type="text" value="3000.00"/>
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		<input type="text" value="3000.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="6500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 26 / 74</span>			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) Lockheed Martin Employees PAC	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1550 Crystal Dr; Crystal Sq 2 #300	<b>Transaction ID:</b> SA11c00000000766366
	City State Zip Code Arlington VA 22202	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00303024	
	Name of Employer Occupation Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Marcia Fudge For Congress	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 3729 Silsby Rd	<b>Transaction ID:</b> SA11c00000000770004
	City State Zip Code University Heights OH 44118	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00454694	
	Name of Employer Occupation Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Mattel PAC	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 333 Continental Bl	<b>Transaction ID:</b> SA11c00000000768877
	City State Zip Code El Segundo CA 90245	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b> C00340224	
	Name of Employer Occupation Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 74  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.** Full Name (Last, First, Middle Initial)  
McDonald's PAC

Mailing Address 2111 McDonald's Dr

City State Zip Code  
Oak Brook IL 60523

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 1 0

**Transaction ID:** SA11c00000000772040

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Molina Healthcare Inc PAC

Mailing Address 200 Oceangate #100

City State Zip Code  
Long Beach CA 90802

FEC ID number of contributing federal political committee. **C** C00430256

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 1 8 / 2 0 1 0

**Transaction ID:** SA11c00000000766365

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers PAC NATCA PAC

Mailing Address 1325 Massachusetts Av NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00238725

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 6 / 2 0 1 0

**Transaction ID:** SA11c00000000769996

Amount of Each Receipt this Period  
2500.00

**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: <span style="float: right;">PAGE 28 / 74</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) National Association Of Broadcasters PAC		Date of Receipt
	Mailing Address 1771 N St NW		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. <input type="text" value="C00009985"/>		<b>Transaction ID:</b> SA11c00000000769800
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) National Beer Wholesalers Assn. PAC		Date of Receipt
	Mailing Address 1101 King St #600		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. <input type="text" value="C00144766"/>		<b>Transaction ID:</b> SA11c00000000766364
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="2500.00"/>
		<input type="text" value="5000.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Nea Fund For Children & Public Education		Date of Receipt
	Mailing Address 1201 16th St NW #421		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Washington	DC	20036
	FEC ID number of contributing federal political committee. <input type="text" value="C00003251"/>		<b>Transaction ID:</b> SA11c00000000767816
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="4000.00"/>
		<input type="text" value="4000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="7500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 74  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

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

Mailing Address 5918 Stoneridge Mall Rd

City Pleasanton State CA Zip Code 94588

FEC ID number of contributing federal political committee. **C** C00194084

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 11 / 02 / 2010  
**Transaction ID:** SA11c00000000772358  
Amount of Each Receipt this Period: 2500.00

**B.** Full Name (Last, First, Middle Initial)  
UAW V CAP

Mailing Address 8000 E Jefferson Av

City Detroit State MI Zip Code 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 10 / 26 / 2010  
**Transaction ID:** SA11c00000000770000  
Amount of Each Receipt this Period: 2000.00

**C.** Full Name (Last, First, Middle Initial)  
UP - PAC [United Pilots PAC]

Mailing Address 9550 Higgins Rd

City Rosemont State IL Zip Code 60018

FEC ID number of contributing federal political committee. **C** C00251009

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt: 11 / 02 / 2010  
**Transaction ID:** SA11c00000000772239  
Amount of Each Receipt this Period: 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5500.00

**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:	PAGE 30 / 74
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

**A.**

Full Name (Last, First, Middle Initial)  
Verizon Communications Inc Good Govt Club

Mailing Address 1300 I St NW 4th Fl

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 1 / 0 2 / 2 0 1 0

**Transaction ID:** SA11c00000000772211

Amount of Each Receipt this Period  
 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
World Alliance For Israel PAC

Mailing Address 8306 Wilshire Bl #1579

City Beverly Hills State CA Zip Code 90211

FEC ID number of contributing federal political committee. **C** C00236596

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 1 0 / 3 0 / 2 0 1 0

**Transaction ID:** SA11c00000000772038

Amount of Each Receipt this Period  
 3000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	58100.00

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) AMS/ Pacific Limousine &amp; Transportation</p> <p>Mailing Address 2006 S La Cienagga Bl</p> <p>City Los Angeles State CA Zip Code 90034</p> <p>Purpose of Disbursement Ground Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774339</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="262.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Daysha Austin</p> <p>Mailing Address 4562 Linden Av</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774372</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1746.99"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Bankcard Center</p> <p>Mailing Address 12225 Greenville Av #870</p> <p>City Dallas State TX Zip Code 75356</p> <p>Purpose of Disbursement Catering Meeting Printing Airfare Food for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000786423</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1190.46"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="3199.45"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

C. Form/Schedule : **SB17**

The FEC filing amended to add expenditure for Bankcard Center when treasurer notified.

Transaction ID : **SB17000000000786423**





**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Panda Express</p> <p>Mailing Address 630 W Fifth St 1st Fl</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000034739</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17.18"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Subway</p> <p>Mailing Address 2605 N Bellflower Bl</p> <p>City Long Beach State CA Zip Code 90815</p> <p>Purpose of Disbursement Food for Volunteers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000034744</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="54.88"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United Air Lines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000034743</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="342.40"/></p> <p><b>[MEMO ITEM]</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

**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 / 74

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Bankcard Center</p> <p>Mailing Address 12225 Greenville Av #870</p> <p>City Dallas State TX Zip Code 75356</p> <p>Purpose of Disbursement Meeting Catering Gas Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000786424</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 2078.15</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p> <p>Mailing Address 4105 Atlantic Av #B</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Telephones for Phone Bank Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000034745</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 540.00</p> <p>007 Category/ Type</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Delius Restaurant</p> <p>Mailing Address 3550 Long Beach Bl</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Catering Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000034736</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 458.13</p> <p>003 Category/ Type</p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2078.15
<b>TOTAL</b> This Period (last page this line number only) .....	

A. Form/Schedule : **SB17**

The FEC filing amended to add expenditure for Bankcard Center when treasurer notified.

Transaction ID : **SB17000000000786424**

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Melinda McCoy's Flowers <hr/> Mailing Address 611 E Carson St <hr/> City Long Beach State CA Zip Code 90807 <hr/> Purpose of Disbursement Flowers for Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000034737 Date of Disbursement 10 / 20 / 2010
	Amount of Each Disbursement this Period 16.47
	[MEMO ITEM]
	Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) Union 76 <hr/> Mailing Address 2103 N. Bellflower Blvd. <hr/> City Long Beach State CA Zip Code 90815 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000034738 Date of Disbursement 10 / 12 / 2010
	Amount of Each Disbursement this Period 12.50
	[MEMO ITEM]
	Category/Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) Shawn Blake <hr/> Mailing Address 1600 Wardlow Rd <hr/> City Long Beach State CA Zip Code 90810 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000774387 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 684.00
	[MEMO ITEM]
	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>684.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) John Calloway <hr/> Mailing Address 2163 Earl Av <hr/> City Long Beach State CA Zip Code 90806 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774390 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 616.50
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Leslie Campos <hr/> Mailing Address 1614 E 115th St <hr/> City Los Angeles State CA Zip Code 90059 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774340 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 477.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Leslie Campos <hr/> Mailing Address 1614 E 115th St <hr/> City Los Angeles State CA Zip Code 90059 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774392 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 373.50
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1467.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Diana Castillo</p> <p>Mailing Address 119 E Eagle St #201</p> <p>City Long Beach State CA Zip Code 90806</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774343</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 252.00</p> <p>001 Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Diana Castillo</p> <p>Mailing Address 119 E Eagle St #201</p> <p>City Long Beach State CA Zip Code 90806</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774393</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 243.00</p> <p>001 Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Kayla Cherry</p> <p>Mailing Address 3708 Gundry Av</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774341</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 342.00</p> <p>001 Category/Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>837.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

A.	Full Name (Last, First, Middle Initial) Kayla Cherry	Transaction ID: SB17000000000774394
	Mailing Address 3708 Gundry Av	Date of Disbursement 11 / 05 / 2010
	City Long Beach State CA Zip Code 90807	Amount of Each Disbursement this Period 735.75
	Purpose of Disbursement Salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Colby Poster Printing	Transaction ID: SB17000000000774336
	Mailing Address 1332 W 12th Place	Date of Disbursement 10 / 20 / 2010
	City Los Angeles State CA Zip Code 90015	Amount of Each Disbursement this Period 1610.04
	Purpose of Disbursement Lawn Signs Candidate Name	006 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Paulette Conley	Transaction ID: SB17000000000774342
	Mailing Address 936 W 127 Pl	Date of Disbursement 10 / 22 / 2010
	City Compton State CA Zip Code 90222	Amount of Each Disbursement this Period 906.75
	Purpose of Disbursement Salary Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3252.54</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

A.	Full Name (Last, First, Middle Initial) Paulette Conley <hr/> Mailing Address 936 W 127 PI <hr/> City Compton State CA Zip Code 90222 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774396 Date of Disbursement 11 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 776.25
B.	Full Name (Last, First, Middle Initial) Stoney Cooks <hr/> Mailing Address 466 6th St NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement General Campaign Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776043 Date of Disbursement 11 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 2000.00
C.	Full Name (Last, First, Middle Initial) Stoney Cooks <hr/> Mailing Address 466 6th St NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Office Supplies Postage Ground Transportation Printing Gas Meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776142 Date of Disbursement 11 / 19 / 2010 <hr/> Amount of Each Disbursement this Period 1446.30

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4222.55
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Alaska Airlines</p> <p>Mailing Address P.O. Box 68900</p> <p>City Seattle State WA Zip Code 98168</p> <p>Purpose of Disbursement Baggage Charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033287</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">80.00</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	1	0	/	2	0	1	0	80.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	6	/	1	0	/	2	0	1	0													
80.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) AT &amp; T Mobile</p> <p>Mailing Address PO Box 6463</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Telephones</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033286</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">180.00</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	1	0	180.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	8	/	2	0	1	0													
180.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carson Lock &amp; Safe</p> <p>Mailing Address 265 E Carson St</p> <p>City Carson State CA Zip Code 90745</p> <p>Purpose of Disbursement Campaign Office Keys</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033284</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>6</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">21.95</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	6	/	2	0	1	0	21.95
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	6	/	2	0	1	0													
21.95																						

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

0.00
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) FedEX Kinko's</p> <p>Mailing Address 555 E Ocean Bl Suite 102</p> <p>City Long Beach State CA Zip Code 90802</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033281</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2.77"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) FedEX Kinko's</p> <p>Mailing Address 555 E Ocean Bl Suite 102</p> <p>City Long Beach State CA Zip Code 90802</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033273</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="201.70"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Los Angeles County Registrar</p> <p>Mailing Address 12400 Imperial Hwy</p> <p>City Norwalk State CA Zip Code 90651</p> <p>Purpose of Disbursement Election File</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033272</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="93.00"/></p> <p><b>[MEMO ITEM]</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text" value=""/></p>

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3515 Atlantic Bl</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033285</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="296.27"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Starbucks</p> <p>Mailing Address 141 E Willow St</p> <p>City Long Beach State CA Zip Code 90806</p> <p>Purpose of Disbursement Meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033275</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.10"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Super Shuttle</p> <p>Mailing Address 2140 L St NE</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Ground Transportation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033271</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="29.00"/></p> <p><b>[MEMO ITEM]</b></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="0.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Trader Joe's</p> <p>Mailing Address 4121 Atlantic Av</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Meeting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033283</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 8.76</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Trader Joe's</p> <p>Mailing Address 4121 Atlantic Av</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Meeting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033282</p> <p>Date of Disbursement 06 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 17.51</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 300 Long Beach BI</p> <p>City Long Beach State CA Zip Code 90809</p> <p>Purpose of Disbursement Postage Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000033279</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 71.00</p> <p><b>[MEMO ITEM]</b></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b>	Full Name (Last, First, Middle Initial) US Postmaster  Mailing Address 300 Long Beach Bl  City Long Beach State CA Zip Code 90809  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000033278 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 0	Amount of Each Disbursement this Period 3.66  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Sean Cooper  Mailing Address 8500 16th St #T7  City Silver Spring State MD Zip Code 20910  Purpose of Disbursement Photographer for Event Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000776060 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0	Amount of Each Disbursement this Period 150.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Durkee & Associates  Mailing Address 1212 S Victory Bl  City Burbank State CA Zip Code 91502  Purpose of Disbursement Accounting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000775335 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 1 0	Amount of Each Disbursement this Period 3215.38

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

**3365.38**

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

.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Durkee & Associates <hr/> Mailing Address 1212 S Victory Bl <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Accounting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776062 Date of Disbursement 11 / 17 / 2010
	Amount of Each Disbursement this Period 360.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Durkee & Associates <hr/> Mailing Address 1212 S Victory Bl <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Accounting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776064 Date of Disbursement 11 / 17 / 2010
	Amount of Each Disbursement this Period 94.50
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Shelia Elkins <hr/> Mailing Address 211 E 84th St <hr/> City Los Angeles State CA Zip Code 90003 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774344 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 832.50
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1287.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Shelia Elkins</p> <p>Mailing Address 211 E 84th St</p> <p>City Los Angeles State CA Zip Code 90003</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774397</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 477.00</p> <p>Category/Type 001</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fraioli &amp; Associates</p> <p>Mailing Address 80 F St #804</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Fundraising Services Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000766428</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 3139.05</p> <p>Category/Type 003</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Nicole Graves</p> <p>Mailing Address 1976 E 112th</p> <p>City Los Angeles State CA Zip Code 90059</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774345</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 45.00</p> <p>Category/Type 001</p>

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

3661.05

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Hargrove Inc</p> <p>Mailing Address 1 Hargrove Dr</p> <p>City Lanham State MD Zip Code 20706</p> <p>Purpose of Disbursement Furniture Rental for Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000776039</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1484.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) June Jackson</p> <p>Mailing Address PO Box 4661</p> <p>City Lakewood State CA Zip Code 90711</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774370</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) June Jackson</p> <p>Mailing Address PO Box 4661</p> <p>City Lakewood State CA Zip Code 90711</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774399</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="553.50"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Joe Trippi & Associates <hr/> Mailing Address 606A N Talbot St #303 <hr/> City Saint Michaels State MD Zip Code 21663 <hr/> Purpose of Disbursement Blast E-Mail Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774383 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 400.00
	Category/Type 007
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Anitra Joiner <hr/> Mailing Address 1911 Lemon Av #A <hr/> City Long Beach State CA Zip Code 90806 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774400 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 486.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Reginald Lyte <hr/> Mailing Address 2035 Vernon Ac <hr/> City Los Angeles State CA Zip Code 90062 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774346 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 126.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1012.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Made For TV Productions LLC <hr/> Mailing Address PO Box 26111 <hr/> City Washington State DC Zip Code 20001 <hr/> Purpose of Disbursement Taping of CBCF Conference Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776048 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 550.00
	Category/ Type 007
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Jordan Markwith <hr/> Mailing Address PO Box 17614 <hr/> City Beverly Hills State CA Zip Code 90209 <hr/> Purpose of Disbursement Fundraising Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774360 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Jordan Markwith <hr/> Mailing Address PO Box 17614 <hr/> City Beverly Hills State CA Zip Code 90209 <hr/> Purpose of Disbursement Fundraising Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776183 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	Category/ Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3550.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Ira Minor <hr/> Mailing Address 619 W 38th St <hr/> City Long Beach State CA Zip Code 90806 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774347 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 270.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) MVP Group <hr/> Mailing Address 2526 S Birch St <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Processing of Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774357 Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 6125.00
	Category/Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) MVP Group <hr/> Mailing Address 2526 S Birch St <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Processing of Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774358 Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 5539.13
	Category/Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11934.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty)

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) MVP Group <hr/> Mailing Address 2526 S Birch St <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Processing of Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774366 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 393.22
	Category/Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) MVP Group <hr/> Mailing Address 2526 S Birch St <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Processing of Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774369 Date of Disbursement 10 / 29 / 2010
	Amount of Each Disbursement this Period 4430.59
	Category/Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Nationwide Printing Services Inc <hr/> Mailing Address 111 W Dyer Rd #AA <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774352 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 14556.38
	Category/Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

19380.19

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Nationwide Printing Services Inc <hr/> Mailing Address 111 W Dyer Rd #AA <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774356 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 14556.37
	Category/ Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Nationwide Printing Services Inc <hr/> Mailing Address 111 W Dyer Rd #AA <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774363 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 535.00
	Category/ Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Nationwide Printing Services Inc <hr/> Mailing Address 111 W Dyer Rd #AA <hr/> City Santa Ana State CA Zip Code 92707 <hr/> Purpose of Disbursement Mailer Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774373 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 14537.00
	Category/ Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	29628.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty)

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) O'Melveny &amp; Myers, LLP</p> <p>Mailing Address 400 S. Hope St.</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Legal Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000766432</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Charleen Ortega</p> <p>Mailing Address 5144 Bixler Av</p> <p>City Lakewood State CA Zip Code 90712</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774348</p> <p>Date of Disbursement 10 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 407.25</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Charleen Ortega</p> <p>Mailing Address 5144 Bixler Av</p> <p>City Lakewood State CA Zip Code 90712</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774402</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 562.50</p> <p>001 Category/ Type</p>

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

2969.75

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Perkins Coie <hr/> Mailing Address 1201 3rd Av 40th Fl <hr/> City Seattle State WA Zip Code 98101 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000766430 Date of Disbursement 10 / 14 / 2010
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Mark Reinhold <hr/> Mailing Address 4901 Clair Del Av #1131 <hr/> City Long Beach State CA Zip Code 90807 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774403 Date of Disbursement 11 / 05 / 2010
	Amount of Each Disbursement this Period 508.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Sabrina Reynolds <hr/> Mailing Address 602 W 38th St <hr/> City Long Beach State CA Zip Code 90806 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774349 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 508.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3017.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Sabrina Reynolds</p> <p>Mailing Address 602 W 38th St</p> <p>City Long Beach State CA Zip Code 90806</p> <p>Purpose of Disbursement Salary Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774405</p> <p>Date of Disbursement 11 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 751.50</p> <p>001 Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Laura Richardson</p> <p>Mailing Address 1212 S Victory Bl</p> <p>City Burbank State CA Zip Code 91502</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000766435</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 88.35</p> <p>001 Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Smart &amp; Final</p> <p>Mailing Address 1320 Atlantic Av</p> <p>City Long Beach State CA Zip Code 90813</p> <p>Purpose of Disbursement Office Supplies Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000032201</p> <p>Date of Disbursement 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 71.05</p> <p>[MEMO ITEM]</p>

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

839.85

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 3515 Atlantic Bl</p> <p>City Long Beach State CA Zip Code 90807</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000032200</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19.29"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Donna Richardson</p> <p>Mailing Address 1334 W 93rd St</p> <p>City Los Angeles State CA Zip Code 90044</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB170000000000774351</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="675.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Donna Richardson</p> <p>Mailing Address 1334 W 93rd St</p> <p>City Los Angeles State CA Zip Code 90044</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB170000000000774406</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="702.00"/></p>

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

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Sandler Reiff & Young PC <hr/> Mailing Address 50 E St SE #300 <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774335 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1500.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Shallman Communications <hr/> Mailing Address 14925 Ventura Blvd, #204 <hr/> City Sherman Oaks State CA Zip Code 91403 <hr/> Purpose of Disbursement Communications Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000766429 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Shon Smith <hr/> Mailing Address PO Box 119 <hr/> City Gardena State CA Zip Code 90248 <hr/> Purpose of Disbursement Photographer for Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000776051 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/Type 007
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4000.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Shon Smith</p> <p>Mailing Address PO Box 119</p> <p>City Gardena State CA Zip Code 90248</p> <p>Purpose of Disbursement Photographer for Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000776059</p> <p>Date of Disbursement 11 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 275.00</p> <p>Category/Type 007</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Southern California Edison</p> <p>Mailing Address 2244 Walnut Grove</p> <p>City Rosemead State CA Zip Code 91771</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774378</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 44.79</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Target Marketing USA, Inc.</p> <p>Mailing Address 22981 Calle Azorin</p> <p>City Mission Viejo State CA Zip Code 92692</p> <p>Purpose of Disbursement Robo Calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774381</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 4386.08</p> <p>Category/Type 006</p>

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

4705.87

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A Mailing Address 750 Fairmont Ave #201 City Glendale State CA Zip Code 91203 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000770738 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 50.10
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A Mailing Address 750 Fairmont Ave #201 City Glendale State CA Zip Code 91203 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000770739 Date of Disbursement 10 / 26 / 2010
	Amount of Each Disbursement this Period 2.60
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A Mailing Address 750 Fairmont Ave #201 City Glendale State CA Zip Code 91203 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000771468 Date of Disbursement 10 / 27 / 2010
	Amount of Each Disbursement this Period 0.95
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	53.65
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000771469 Date of Disbursement 10 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 37.85		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000771470 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 17.25		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000771533 Date of Disbursement 10 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 50.10		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>105.20</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000772087 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 0 / 2 0 1 0
	Amount of Each Disbursement this Period 12.80
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000772097 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 7.70
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:
<b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000772098 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 1 0
	Amount of Each Disbursement this Period 7.70
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **28.20**

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000772274 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 85.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000775670 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 7.60
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) US Postmaster <hr/> Mailing Address 2201 N Grand Av <hr/> City Santa Ana State CA Zip Code 92735 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774353 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 24780.40
	Category/ Type 006
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

24873.50

**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 65 / 74

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) US Postmaster <hr/> Mailing Address 2201 N Grand Av <hr/> City Santa Ana State CA Zip Code 92735 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774359 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 14002.34
	Category/Type 006
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster <hr/> Mailing Address 2201 N Grand Av <hr/> City Santa Ana State CA Zip Code 92735 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774364 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 19255.97
	Category/Type 006
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon <hr/> Mailing Address PO Box 9688 <hr/> City Mission Hills State CA Zip Code 91346 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000777945 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 3.50
	Category/Type 001

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

**33261.81**

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 74

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless</p> <p>Mailing Address PO Box 9688</p> <p>City Mission Hills State CA Zip Code 91346</p> <p>Purpose of Disbursement Telephone Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000774379</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 958.19</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Voter Link</p> <p>Mailing Address 11299 N 6000 West</p> <p>City Highland State UT Zip Code 84003</p> <p>Purpose of Disbursement Voter File Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000766437</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 397.66</p> <p>006 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Voter Link</p> <p>Mailing Address 11299 N 6000 West</p> <p>City Highland State UT Zip Code 84003</p> <p>Purpose of Disbursement Voter File Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000766439</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>006 Category/ Type</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1655.85
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 74

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) Voter Link Mailing Address 11299 N 6000 West City Highland State UT Zip Code 84003 Purpose of Disbursement Voter File Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000766440 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 500.00 Category/Type: 006
<b>B.</b> Full Name (Last, First, Middle Initial) Voter Link Mailing Address 11299 N 6000 West City Highland State UT Zip Code 84003 Purpose of Disbursement Voter File Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000766441 Date of Disbursement 10 / 15 / 2010
	Amount of Each Disbursement this Period 1574.83 Category/Type: 006
<b>C.</b> Full Name (Last, First, Middle Initial) Washington Court Hotel Mailing Address 525 New Jersey Av NW City Washington State DC Zip Code 20001 Purpose of Disbursement Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000774361 Date of Disbursement 10 / 28 / 2010
	Amount of Each Disbursement this Period 1199.00 Category/Type: 003

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

3273.83

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

171793.82

**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)

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

<p><b>A.</b> Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee</p> <p>Mailing Address 430 S Capitol St</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution Candidate Name Democratic Congressional Campaign Committee 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:</p>	<p><b>Transaction ID:</b> SB21000000000774355 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Democratic State Central Comm Of CA Fed</p> <p>Mailing Address 1401 21st St #100</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Contribution Candidate Name Democratic State Central Comm Of CA Fed 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:</p>	<p><b>Transaction ID:</b> SB21000000000766433 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 750.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Laura Richardson</p> <p>Mailing Address 1212 S Victory Bl</p> <p>City Burbank State CA Zip Code 91502</p> <p>Purpose of Disbursement Contribution Candidate Name Eni Faleomavaega Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00</p>	<p><b>Transaction ID:</b> SB21000000000777509 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/ Type</p>

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

6000.00

**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 69 / 74

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

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NAME OF COMMITTEE (In Full)  
Richardson For Congress

A.

Full Name (Last, First, Middle Initial)  
Faleomavaega For Congress Committee

Mailing Address L'Enfant Plaza Station PO Box 4466

City Washington State DC Zip Code 20026

Purpose of Disbursement  
Contribution

Candidate Name  
Eni Faleomavaega

Office Sought:  House  
 Senate  
 President  
State: AS District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: SB21000000000033646

Date of Disbursement

10 / 14 / 2010

Amount of Each Disbursement this Period

250.00

[MEMO ITEM]

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

0.00

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

6000.00

**SCHEDULE C (FEC Form 3)**

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

PAGE 70 / 74

FOR LINE NUMBER: (check only one)  13a  13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Richardson For Congress

**Transaction ID:** SC/10000000000000990

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) Kinde L Durkee - [PERSONAL FUNDS]	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 1212 S Victory Bl	
City Burbank State CA ZIP Code 91502	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2000.00	0.00	2000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>09</td><td></td></tr> </table>	M	M	09		<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>10</td><td></td></tr> </table>	D	D	10		<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>0</td><td>7</td></tr> </table>	Y	Y	Y	Y	2	0	0	7	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																		
09																			
D	D																		
10																			
Y	Y	Y	Y																
2	0	0	7																

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

<b>SUBTOTALS</b> This Period This Page (optional) .....	<input style="width: 100%;" type="text" value="2000.00"/>
<b>TOTALS</b> This Period (last page in this line only) .....	<input style="width: 100%;" type="text" value="2000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Cooks, Stoney			Nature of Debt (Purpose): Ground Transportation Printing Postage B
Mailing Address 466 6th St NE			
City Washington	State DC	ZIP Code 20002	

Outstanding Balance Beginning This Period		Transaction ID: SD10000000000009762	
321.94			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	321.94	0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Durkee & Associates			Nature of Debt (Purpose): Accounting
Mailing Address 1212 S Victory Bl			
City Burbank	State CA	ZIP Code 91502	

Outstanding Balance Beginning This Period		Transaction ID: SD10000000000007661	
6400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	6400.00	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Fairbank Maslin Maullin & Associates			Nature of Debt (Purpose): Polling
Mailing Address 2425 Colorado Ave #180			
City Santa Monica	State CA	ZIP Code 90404	

Outstanding Balance Beginning This Period		Transaction ID: SD10000000000005987	
5550.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	5550.00	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	11950.00
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Fraioli & Associates	Nature of Debt (Purpose): Fundraising Services
Mailing Address 80 F St #804	
City State ZIP Code Washington DC 20001	

Outstanding Balance Beginning This Period 69357.12	<b>Transaction ID:</b> SD100000000000007565	
Amount Incurred This Period 3165.21	Payment This Period 3139.05	Outstanding Balance at Close of This Period 69383.28

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Humphrey, Derek	Nature of Debt (Purpose): Administrative Consulting
Mailing Address 22073 Loch Lomond Dr	
City State ZIP Code Sun City CA 92587	

Outstanding Balance Beginning This Period 13000.00	<b>Transaction ID:</b> SD100000000000005985	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 13000.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Nationwide Printing Services Inc	Nature of Debt (Purpose): Printing
Mailing Address 111 W Dyer Rd #AA	
City State ZIP Code Santa Ana CA 92707	

Outstanding Balance Beginning This Period 363.80	<b>Transaction ID:</b> SD100000000000007648	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 363.80

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	82747.08
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
Richardson For Congress

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Perkins Coie			Nature of Debt (Purpose): Legal Services
Mailing Address 1201 3rd Av 40th Fl			
City Seattle	State WA	ZIP Code 98101	

Outstanding Balance Beginning This Period <input type="text" value="101709.17"/>		<b>Transaction ID:</b> SD10000000000008768	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2000.00"/>	Outstanding Balance at Close of This Period <input type="text" value="99709.17"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Reich Adell & Cvitan			Nature of Debt (Purpose): Professional/Legal Services
Mailing Address 3550 Wilshire Bl #2000			
City Los Angeles	State CA	ZIP Code 90010	

Outstanding Balance Beginning This Period <input type="text" value="16078.14"/>		<b>Transaction ID:</b> SD10000000000007307	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="16078.14"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Richardson, Laura			Nature of Debt (Purpose): Printing
Mailing Address 1212 S Victory Bl			
City Burbank	State CA	ZIP Code 91502	

Outstanding Balance Beginning This Period <input type="text" value="753.64"/>		<b>Transaction ID:</b> SD10000000000006200	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="753.64"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="116540.95"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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

(Use separate schedule(s) for each numbered line)	PAGE 74 / 74
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
 Richardson For Congress

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Richardson, Laura	Nature of Debt (Purpose): Airfare
Mailing Address 1212 S Victory Bl	
City State ZIP Code Burbank CA 91502	

Outstanding Balance Beginning This Period 268.80	<b>Transaction ID:</b> SD100000000000006201	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 268.80

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Shallman Communications	Nature of Debt (Purpose): Communications Consulting
Mailing Address 14925 Ventura Blvd, #204	
City State ZIP Code Sherman Oaks CA 91403	

Outstanding Balance Beginning This Period 219500.00	<b>Transaction ID:</b> SD100000000000005983	
Amount Incurred This Period 0.00	Payment This Period 2000.00	Outstanding Balance at Close of This Period 217500.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	<b>217768.80</b>
2) <b>TOTALS</b> This Period (last page this line number only).....	<b>429006.83</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>2000.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<b>431006.83</b>