

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
DOUG LAMALFA COMMITTEE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	95700.00	144036.07
(b) Total Contribution Refunds (from Line 20(d))	8500.00	8500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	87200.00	135536.07
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	19327.47	102670.49
(b) Total Offsets to Operating Expenditures (from Line 14).....	14.45	3314.87
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19313.02	99355.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	130603.76	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	146550.67	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DOUG LAMALFA COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	27050.00	33050.00
(ii) Unitemized.....	1550.00	2585.00
(iii) TOTAL of contributions from individuals ▶	28600.00	35635.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	67100.00	108401.07
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	95700.00	144036.07
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	5327.72	18772.52
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	14.45	3314.87
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	101042.17	166123.46

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	19327.47	102670.49
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	50000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	50000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	8500.00	8500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	8500.00	8500.00
21. OTHER DISBURSEMENTS	2150.00	2150.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	29977.47	163320.49

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	59539.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	101042.17
25. SUBTOTAL (add Line 23 and Line 24).....	160581.23
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	29977.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	130603.76

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

Form/Schedule: F3A
Transaction ID :

Additional accrued expense

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 51
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Shulamit Glaubach

Mailing Address 1701 Gaugh St.

City SAN FRANCISCO State CA Zip Code 94109

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

Name of Employer Self Occupation Psychiatrist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1661

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 1232 Rose Ln.

City LAFAYETTE State CA Zip Code 94549

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

Name of Employer Self Occupation Investment analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1662

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 7 Deer Oaks Dr.

City PLEASANTON State CA Zip Code 94588

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

Name of Employer Self Occupation Businessman

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1663

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 51
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Josh Katzin

Mailing Address 862 Trestle Glen Rd.

City OAKLAND State CA Zip Code 94610

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

Name of Employer self Occupation Real estate investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1705

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 471 Claybourne Rd.

City ROCHESTER State NY Zip Code 14618

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

Name of Employer Self Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1664

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 145 S. Jackson Way

City ALAMO State CA Zip Code 94507

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

Name of Employer Self Occupation Financial advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 04 / 12 / 2013

Transaction ID : INCA1665

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 51
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Michael Sosebee

Mailing Address 701 Trestle Glen Rd.

City State Zip Code
OAKLAND CA 94610

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

Name of Employer Occupation
Self Investment advisor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2013

Transaction ID : INCA1660

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1033 Via Roble

City State Zip Code
LAFAYETTE CA 94549

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

Name of Employer Occupation
Self Investor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 12 / 2013

Transaction ID : INCA1666

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SEVEN HILLS LAND & CATTLE, LLC

Mailing Address 28740 INWOOD RD.

City State Zip Code
Shingletown CA 96088

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
05 / 01 / 2013

Transaction ID : INCA1676

Amount of Each Receipt this Period
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 51
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
REVERGE ANSELMO

Mailing Address 28740 INWOOD RD.

City Shingletown State CA Zip Code 96088

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

Name of Employer 7 Hills Land & Cattle Company Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 01 / 2013

Transaction ID : IDTA143

Amount of Each Receipt this Period
2500.00

[MEMO ITEM]

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

Mailing Address 1010 W. Tokay St.

City LODI State CA Zip Code 95240

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

Name of Employer BNP Paribas Occupation Financial services

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 06 / 2013

Transaction ID : INCA1680

Amount of Each Receipt this Period
1000.00

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

Mailing Address 17617 POPLAR AVE.

City Shafter State CA Zip Code 93263

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

Name of Employer SELF EMPLOYED - FRED STARRH Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2013

Transaction ID : INCA1683

Amount of Each Receipt this Period
2600.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 51
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Kenny Watkins

Mailing Address P.O. Box 472

City LINDEN State CA Zip Code 95236

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 15 / 2013

Transaction ID : INCA1684

Amount of Each Receipt this Period
 1500.00

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

Mailing Address 5490 E. Bear Creek Rd.

City LODI State CA Zip Code 95240

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

Name of Employer Self Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 24 / 2013

Transaction ID : INCA1688

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 801 Cameron St.

City ALEXANDRIA State VA Zip Code 22314

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

Name of Employer CJ Lake, LLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 05 / 24 / 2013

Transaction ID : INCA1691

Amount of Each Receipt this Period
 500.00

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

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Alex Spanos

Mailing Address 10100 Trinity Pkwy. 5th Fl.

City: STOCKTON State: CA Zip Code: 95219

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

Name of Employer: A. G. Spanos Co. Occupation: Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 05 / 24 / 2013

Transaction ID : INCA1689

Amount of Each Receipt this Period: 1500.00

B. Full Name (Last, First, Middle Initial)
. THE CHICKASAW NATION

Mailing Address 2020 LONNIE ABBOTT BLVD.

City: ADA State: OK Zip Code: 74820

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

Name of Employer: SOVEREIGN NATION Occupation: INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 10 / 2013

Transaction ID : INCA1707

Amount of Each Receipt this Period: 1000.00

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

Mailing Address 1738 Dana St.

City: CROFTON State: MD Zip Code: 21114

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

Name of Employer: Cansler Consulting Occupation: Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 750.00

Date of Receipt: 06 / 18 / 2013

Transaction ID : INCA1729

Amount of Each Receipt this Period: 750.00

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

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

3250.00

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

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

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Timothy Chambers

Mailing Address 2266 Oro-Chico Hwy

City State Zip Code
DURHAM CA 95938

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

Name of Employer Occupation
Chambers Oil Distributor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1748

Amount of Each Receipt this Period
500.00

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

Mailing Address 8406 Harvest Ln.

City State Zip Code
DURHAM CA 95938

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

Name of Employer Occupation
unincorporated Sole proprietorship

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1774

Amount of Each Receipt this Period
400.00

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

Mailing Address 419 Constitution Ave. NE

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation
The LeMunyon Group Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1731

Amount of Each Receipt this Period
250.00

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

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

1150.00

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

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

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Thomas O'Brien

Mailing Address 18 E. Oak St.

City ALEXANDRIA State VA Zip Code 22301

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

Name of Employer O'Brien DC Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : INCA1734

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
. Santa Ynez Band of Mission Ind

Mailing Address P.O. Box 517

City SANTA YNEZ State CA Zip Code 93460

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

Name of Employer Sovereign nation Occupation Indian tribe

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : INCA1735

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
. The Mohegan Tribe

Mailing Address 13 Crow Hill Rd.

City UNCASVILLE State CT Zip Code 06382

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

Name of Employer Sovereign nation Occupation Indian tribe

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 25 / 2013

Transaction ID : INCA1736

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

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

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Ag-Land Investment Brokers

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 896

City: RED BLUFF State: CA Zip Code: 96080

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation Partnership

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 06 / 26 / 2013

Transaction ID : INCA1752

Amount of Each Receipt this Period: 300.00

B. Chambers Oil

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1520

City: CHICO State: CA Zip Code: 95927

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation Unincorporated

Sole proprietorship

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 06 / 26 / 2013

Transaction ID : INCA1753

Amount of Each Receipt this Period: 500.00

C. Timothy Chambers

Full Name (Last, First, Middle Initial)
Mailing Address 2266 Oro-Chico Hwy

City: DURHAM State: CA Zip Code: 95938

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation Distributor

Chambers Oil

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 06 / 26 / 2013

Transaction ID : IDTA152

Amount of Each Receipt this Period: 500.00

[MEMO ITEM]

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

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

800.00

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

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

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
. COLUSA INDIAN COMMUNITY COUNCI

Mailing Address 3730 HIGHWAY 45

City Colusa	State CA	Zip Code 95932
----------------	-------------	-------------------

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

Name of Employer Sovereign Nation	Occupation Indian Tribe
--------------------------------------	----------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1755

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
GLENN MATHIS, JR.

Mailing Address 3707 MILLS ORCHARD RD.

City Maxwell	State CA	Zip Code 95955
-----------------	-------------	-------------------

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

Name of Employer SELF - GLENN MATHIS	Occupation Farmer
---	----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1783

Amount of Each Receipt this Period
250.00

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1250.00

27050.00

**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 16 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Snake River Sugar Co. PAC

Mailing Address 1951 S. Saturn Way, #100

City State Zip Code
BOISE ID 83709

FEC ID number of contributing federal political committee. **C** C00326389

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2013

Transaction ID : INCA1634

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Western Sugar Cooperative PAC

Mailing Address 7555 E. Hampden Ave., #600

City State Zip Code
DENVER CO 80231

FEC ID number of contributing federal political committee. **C** C00446674

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2013

Transaction ID : INCA1642

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Great Lakes Sugarbeet Growers PAC

Mailing Address 2600 S. Euclid Ave.

City State Zip Code
BAY CITY MI 48707

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2013

Transaction ID : INCA1649

Amount of Each Receipt this Period
 1500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address **P.O. BOX 2995**

City **Cordova** State **TN** Zip Code **38088**

FEC ID number of contributing federal political committee. **C C00023028**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 19 / 2013

Transaction ID : INCA1673

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BURLINGTON NORTHERN SANTA FE RAIL PAC (BNSF PAC)

Mailing Address **PO BOX 961039**

City **FORT WORTH** State **TX** Zip Code **76161**

FEC ID number of contributing federal political committee. **C C00235739**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 21 / 2013

Transaction ID : INCA1686

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Blue Diamond Growers PAC

Mailing Address **1802 C St.**

City **SACRAMENTO** State **CA** Zip Code **95814**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
05 / 24 / 2013

Transaction ID : INCA1692

Amount of Each Receipt this Period
2000.00

SUBTOTAL of Receipts This Page (optional)..... **5000.00**

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 18 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL (ERIC) PAC

Mailing Address 25 E MAIN ST., STE. 200

City	State	Zip Code
Richmond	VA	23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : INCA1694

Amount of Each Receipt this Period

5000.00

B. Full Name (Last, First, Middle Initial)
Ice Cream Milk & Cheese PAC

Mailing Address 1250 H St., NW #900

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee. **C** C00128231

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : INCA1690

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
LAND O'LAKES, INC., PAC

Mailing Address P.O. BOX 64101

City	State	Zip Code
St. Paul	MN	55164

FEC ID number of contributing federal political committee. **C** C00009423

Name of Employer	Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 24 / 2013

Transaction ID : INCA1693

Amount of Each Receipt this Period

2000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Crop Insurance Professionals Assoc. PAC

Mailing Address 228 S. Washington St., #115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C C00503680**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1857.15

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2013

Transaction ID : INCA1701

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Food Marketing Institute PAC

Mailing Address 2345 Crystal Dr., #800

City State Zip Code
ARLINGTON VA 22202

FEC ID number of contributing federal political committee. **C C00014555**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2013

Transaction ID : INCA1700

Amount of Each Receipt this Period
1000.00

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

Mailing Address 2300 River Plaza Drive, #210

City State Zip Code
Sacramento CA 95833

FEC ID number of contributing federal political committee. **C C00019083**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
06 / 04 / 2013

Transaction ID : INCA1699

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Acton PAC

Mailing Address P.O. Box 442

City State Zip Code
SHARPSBURG GA 30277

FEC ID number of contributing federal political committee. **C** C00411579

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1711

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar Company PAC

Mailing Address 101 N. Third St.

City State Zip Code
MOORHEAD MN 56560

FEC ID number of contributing federal political committee. **C** C00110338

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1710

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Blue Diamond Growers PAC

Mailing Address 1802 C St.

City State Zip Code
SACRAMENTO CA 95814

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1708

Amount of Each Receipt this Period
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Home Depot Inc. PAC

Mailing Address 1155 F St. NW #400

City State Zip Code
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1713

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND

Mailing Address 800 N. LINDBERGH BLVD.

City State Zip Code
Saint Louis MO 63167

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1714

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Nat'l Council of Farmer Cooperatives CO-OP/PAC

Mailing Address 50 F St., NW, #900

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00002238**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1709

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 22 OF 51
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
U.S. Peanut PAC

Mailing Address 313 Massachusetts Ave. N.E.

City WASHINGTON State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00502807

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 10 / 2013

Transaction ID : INCA1712

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Peanut Shellers Assoc. PAC

Mailing Address P.O. Box 70157

City ALBANY State GA Zip Code 31708

FEC ID number of contributing federal political committee. **C** C00214148

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2013

Transaction ID : INCA1721

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
CREDIT UNION LEGISLATIVE ACTION COUNCIL (CULAC THE PAC)

Mailing Address 601 PENNSYLVANIA AVE. NW SOUTH BUI

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2013

Transaction ID : INCA1715

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995
City Cordova State TN Zip Code 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 5500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2013

Transaction ID : INCA1720

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL COTTON COUNCIL COMMITTEE FOR THE ADVANCEMENT OF COTTON

Mailing Address P.O. BOX 2995
City Cordova State TN Zip Code 38088

FEC ID number of contributing federal political committee. **C** C00023028

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 5500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2013

Transaction ID : INCA1719

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
PG&E Corporation PAC

Mailing Address 77 Beale St.
City SAN FRANCISCO State CA Zip Code 94107

FEC ID number of contributing federal political committee. **C** C00177469

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 2500.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 17 / 2013

Transaction ID : INCA1716

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)..... 5000.00
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 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
CIGAR PAC

Mailing Address 818 Connecticut Ave. NW #200

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 18 / 2013

Transaction ID : NONA1750

Amount of Each Receipt this Period
 100.00

Fundraising supplies

B. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS & CONTRACTORS PAC

Mailing Address 4250 NORTH FAIRFAX DR., 9TH FL.

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 20 / 2013

Transaction ID : INCA1725

Amount of Each Receipt this Period
 2500.00

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

Mailing Address 1120 CONNECTICUT AVE. NW, STE. 600

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : INCA1727

Amount of Each Receipt this Period
 1000.00

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

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

3600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
NFIB SAFE TRUST

Mailing Address 1201 F ST., NW STE. 200

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00101105

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1073.54

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 24 / 2013

Transaction ID : INCA1726

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
American Beverage Assoc. PAC

Mailing Address 1101 16th St. NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00100107

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2013

Transaction ID : INCA1737

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Bayer Corp. PAC

Mailing Address 100 Bayer Road

City Pittsburgh State PA Zip Code 15205

FEC ID number of contributing federal political committee. **C** C00281162

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 25 / 2013

Transaction ID : INCA1739

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 51	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
DEL MONTE FOODS PAC

Mailing Address **ONE MARITIME PLAZA, 300 CLAY ST.**

City **San Francisco** State **CA** Zip Code **94111**

FEC ID number of contributing federal political committee. **C C00522599**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1732

Amount of Each Receipt this Period
 _____ **500.00**

B. Full Name (Last, First, Middle Initial)
Nat'l Assoc. of Farm Service Agency County Office Employees, Inc. PAC (NASCOE)

Mailing Address **313 Massachusetts Ave. NE**

City **WASHINGTON** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00413567**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **1142.86**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1733

Amount of Each Receipt this Period
 _____ **1000.00**

C. Full Name (Last, First, Middle Initial)
Nat'l Cattlemen's Beef Assoc. PAC

Mailing Address **1301 Pennsylvania Ave., N.W. #300**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00028787**

Name of Employer _____ Occupation _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date
 _____ **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
06 / 25 / 2013

Transaction ID : INCA1738

Amount of Each Receipt this Period
 _____ **1000.00**

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

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

_____ **2500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
American Sugar Cane League PAC

Mailing Address P.O. Drawer 938

City State Zip Code
THIBODAUX LA 70302

FEC ID number of contributing federal political committee. **C** C00081414

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1757

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Sugarbeet Growers Assoc. PAC

Mailing Address 1156 15th St., NW #1101

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00167684

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1756

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Nat'l Pest Management Assoc., Inc. PAC

Mailing Address 10460 North St.

City State Zip Code
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C** C00083915

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1751

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
PacifiCorp/MidAmerican PAC

Mailing Address 825 NE Multnomah, #2000

City State Zip Code
Portland OR 97232

FEC ID number of contributing federal political committee. **C** C00082800

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1758

Amount of Each Receipt this Period
2500.00

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

Mailing Address 512 C St. NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C** C00197715

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1754

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
REYNOLDS AMERICA INC PAC

Mailing Address 401 N Main St.

City State Zip Code
Winston Salem NC 27101

FEC ID number of contributing federal political committee. **C** C00042002

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 26 / 2013

Transaction ID : INCA1759

Amount of Each Receipt this Period
1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
TRUCK PAC

Mailing Address 430 FIRST ST., SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 27 / 2013

Transaction ID : INCA1760

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Alexander & Baldwin, Inc. FEDPAC

Mailing Address P.O. Box 3440

City HONOLULU State HI Zip Code 96801

FEC ID number of contributing federal political committee. **C** C00017681

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1789

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
American Gas Assoc. PAC

Mailing Address 400 N. Capitol St., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00007450

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1762

Amount of Each Receipt this Period
 2000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Calif. Beet Growers Assoc. LTD PAC

Mailing Address 2 W. Swain Rd.

City State Zip Code
STOCKTON CA 95207

FEC ID number of contributing federal political committee. **C** C00129742

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1787

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
CALPINE CORP. FEDERAL PAC

Mailing Address 4160 DUBLIN BLVD.

City State Zip Code
DUBLIN CA 94568

FEC ID number of contributing federal political committee. **C** C00362640

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1794

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
Ford Motor Company Civic Action Fund

Mailing Address The American Road

City State Zip Code
Dearborn MI 48121

FEC ID number of contributing federal political committee. **C** C00046474

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1793

Amount of Each Receipt this Period
 1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. MAJORITY COMMITTEE PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address PO BOX 10134		Transaction ID : INCA1790
City Bakersfield	State Zip Code CA 93389	
FEC ID number of contributing federal political committee. C C00428052		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) B. Nat'l Restaurant Assoc. PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 2055 L St. NW		Transaction ID : INCA1788
City WASHINGTON	State Zip Code DC 20036	
FEC ID number of contributing federal political committee. C C00003764		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) C. Occidental Petroleum Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 28 / 2013
Mailing Address 10889 Wilshire Blvd.		Transaction ID : INCA1795
City LOS ANGELES	State Zip Code CA 90024	
FEC ID number of contributing federal political committee. C C00083857		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
PORK PAC

Mailing Address P.O. Box 10383

City State Zip Code
DES MOINES IA 50306

FEC ID number of contributing federal political committee. **C** C00201871

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1792

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 5918 Stoneridge Mall Road

City State Zip Code
Pleasanton CA 94588

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1796

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Wal-Mart Stores, Inc PAC for Responsible Gov't

Mailing Address 702 SW 8th Street

City State Zip Code
Bentonville AR 72716

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 28 / 2013

Transaction ID : INCA1797

Amount of Each Receipt this Period
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 51
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
NRA Political Victory Fund

Mailing Address 11250 Waples Mill Road

City State Zip Code
Fairfax VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 29 / 2013

Transaction ID : INCA1770

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

1000.00

67100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 51
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Freshman Agriculture Republican Members Trust		Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2013
Mailing Address P.O. Box 30844		Transaction ID : INCA1791
City BETHESDA	State Zip Code MD 20824	
FEC ID number of contributing federal political committee. C C00493783		Amount of Each Receipt this Period 3514.17
Name of Employer	Occupation	Transfer from JFA
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 16958.97	

Full Name (Last, First, Middle Initial) B. Western Peanut Growers PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 22 / 2013
Mailing Address P.O. Box 252		Transaction ID : IDTA167
City Seminole	State Zip Code TX 79360	
FEC ID number of contributing federal political committee. C C00254847		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation	[MEMO ITEM]
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) C. Crop Insurance Professionals Assoc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 03 / 29 / 2013
Mailing Address 228 S. Washington St., #115		Transaction ID : IDTA169
City ALEXANDRIA	State Zip Code VA 22314	
FEC ID number of contributing federal political committee. C C00503680		Amount of Each Receipt this Period 857.15
Name of Employer	Occupation	[MEMO ITEM]
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1857.15	

SUBTOTAL of Receipts This Page (optional).....	3514.17
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 51
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
CropLife America PAC

Mailing Address 1156 15th St. NW #400

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00248849**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 29 / 2013

Transaction ID : IDTA168

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Economic Solutions Victory Fund

Mailing Address 2470 Daniels Bridge Rd. #121

City ATHENS State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C C00544916**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 1786.21

Date of Receipt
 M M / D D / Y Y Y Y Y
 06 / 29 / 2013

Transaction ID : INCA1771

Amount of Each Receipt this Period
 1786.21

Transfer from JFA

C. Full Name (Last, First, Middle Initial)
CME Group, Inc. PAC

Mailing Address 20 S. Wacker Dr.

City CHICAGO State IL Zip Code 60606

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 05 / 31 / 2013

Transaction ID : IDTA154

Amount of Each Receipt this Period
 1000.00

[MEMO ITEM]

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

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

1786.21

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

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

FOR LINE NUMBER: PAGE 36 OF 51
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Futures Industry Assoc. Inc. PAC

Mailing Address 2001 Pennsylvania Ave. NW #600

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00133389

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : IDTA155

Amount of Each Receipt this Period
800.00

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

5300.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2013
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 2.12 Transaction ID : EXPB1641
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Merchant fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 788.05 Transaction ID : EXPB1647
City Sacramento State CA Zip Code 95833	Purpose of Disbursement Accounting svc. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 2.12 Transaction ID : EXPB1654
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Merchant fee Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	792.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 240.90 Transaction ID : EXPB1651
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone svc.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2013
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 589.00 Transaction ID : EXPB1667
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 300.00 Transaction ID : EXPB1668
City Sacramento	State CA	
Zip Code 95833	Purpose of Disbursement Accounting svc.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1129.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Public Square Partners		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1127 11th St., #548		Amount of Each Disbursement this Period 10000.00 Transaction ID : EXPB1669
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Fundraising advice Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address P. O. Box 537104		Amount of Each Disbursement this Period 120.78 Transaction ID : EXPB1672
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Phone svc. Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 171.23 Transaction ID : EXPB1675
City Palatine State IL Zip Code 60094	Purpose of Disbursement Credit card payment Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	10292.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Metro PCS		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 167 G St. #101		Amount of Each Disbursement this Period 40.00
City LINCORN	State CA Zip Code 95648	
Purpose of Disbursement Phone svc.	Category/Type 001	Transaction ID : EDTB31EXPB1675 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2013
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 131.23
City WASHINGTON	State DC Zip Code 20006	
Purpose of Disbursement Meeting	Category/Type 001	Transaction ID : EDTB32EXPB1675 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 164.04
City Dallas	State TX Zip Code 75266	
Purpose of Disbursement Phone svc.	Category/Type 001	Transaction ID : EXPB1677
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	164.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 51		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Tammy Tucker Portraits		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address 429 W. Pine St.		Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB1678
City LODI	State CA	
Zip Code 95240	Purpose of Disbursement Photography	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 65.60 Transaction ID : EXPB1681
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2013
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 566.95 Transaction ID : EXPB1682
City Sacramento	State CA	
Zip Code 95833	Purpose of Disbursement Accounting svc.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1632.55
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2013
Mailing Address P. O. Box 537104		Amount of Each Disbursement this Period 363.67 Transaction ID : EXPB1687
City Atlanta State GA Zip Code 30353	Purpose of Disbursement Phone svc. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Chase Card Services		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 242.49 Transaction ID : EXPB1698
City Palatine State IL Zip Code 60094	Purpose of Disbursement Credit card payment Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Metro PCS		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 167 G St. #101		Amount of Each Disbursement this Period 40.00 Transaction ID : EDTB33EXPB1698
City LINCOLN State CA Zip Code 95648	Purpose of Disbursement Phone svc. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	363.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 51			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Capitol Hill Club		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 300 First St. SE		Amount of Each Disbursement this Period 202.49
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement Meeting	Transaction ID : EDTB34EXPB1698
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Public Square Partners		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2013
Mailing Address 1127 11th St., #548		Amount of Each Disbursement this Period 4003.98
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Travel and fundraising supplies	Transaction ID : EXPB1697
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 164.83
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone svc.	Transaction ID : EXPB1703
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4168.83
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 51	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. David Bauer			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2013	
Mailing Address 2150 River Plaza Dr., #150			Amount of Each Disbursement this Period 402.70	
City Sacramento	State CA	Zip Code 95833	Transaction ID : EXPB1723	
Purpose of Disbursement Accounting svc.		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS			Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2013	
Mailing Address 1225 8TH ST. #425			Amount of Each Disbursement this Period 53.00	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB1730	
Purpose of Disbursement Merchant fee		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

SUBTOTAL of Disbursements This Page (optional).....	455.70
TOTAL This Period (last page this line number only).....	18998.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 51			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. PREM REDDY		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 16850 BEAR VALLEY ED.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB1670
City Victorville State CA Zip Code 92395	Purpose of Disbursement REFUND Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PREM REDDY		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 16850 BEAR VALLEY ED.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB1671
City Victorville State CA Zip Code 92395	Purpose of Disbursement REFUND Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. VENKAMMA REDDY		Date of Disbursement M M / D D / Y Y Y Y 04 / 22 / 2013
Mailing Address 16850 BEAR VALLEY RD.		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB1674
City Victorville State CA Zip Code 92395	Purpose of Disbursement Refund Candidate Name Category/Type 010	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 51	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. JOHN HARRIS			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2013	
Mailing Address 23300 W OAKLAND			Amount of Each Disbursement this Period 1000.00	
City Coalinga	State CA	Zip Code 93210	Transaction ID : EXPB1706	
Purpose of Disbursement		Category/ Type 010		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

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

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

SUBTOTAL of Disbursements This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	8500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 51	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Strickland for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2013
Mailing Address P.O. Box 1371		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB1648
City THOUSAND OAKS State CA Zip Code 91358	Purpose of Disbursement 011 Category/Type	
Candidate Name Tony Strickland	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: CA District: 26		

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

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

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

SCHEDULE C (FEC Form 3) LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full) **Transaction ID : PAYC315**
DOUG LAMALFA COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial) Doug LaMalfa	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 16 LaMalfa Lane	

City	State	ZIP Code
Oroville	CA	95965

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
125000.00	25000.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 30 / 2012	12/31/2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	100000.00
TOTALS This Period (last page in this line only).....	100000.00

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

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

Form/Schedule: SC/10

Transaction ID : PAYC315

Personal funds

Form/Schedule:

Transaction ID:

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 50 OF 51
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)

DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Capital Strategies D.C.	Nature of Debt (Purpose): Fundraising commission & expenses
Mailing Address P.O. Box 1605	
City State Zip Code ALEXANDRIA VA 22313	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1804	
Amount Incurred This Period 12630.67	Payment This Period 0.00	Outstanding Balance at Close of This Period 12630.67

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gilliard, Blanning & Assoc.	Nature of Debt (Purpose): Campaign advice
Mailing Address 5701 Lonetree Blvd. #301	
City State Zip Code Rocklin CA 95765	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1768	
Amount Incurred This Period 10000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Gail Jenkins	Nature of Debt (Purpose): Catering for fundraiser
Mailing Address P.O. Box 355	
City State Zip Code RICHVALE CA 95974	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD1775	
Amount Incurred This Period 300.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 300.00

1) SUBTOTALS This Period This Page (optional)	22930.67
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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)

DOUG LAMALFA COMMITTEE

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

Mailing Address 1127 11th St., #548

City State Zip Code
Sacramento CA 95814

Nature of Debt (Purpose):
Fundraisin advice

Outstanding Balance Beginning This Period **Transaction ID : PAYD1765**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Sullivan and Assoc., PLC

Mailing Address 601 Pennsylvania Ave. NW #900

City State Zip Code
WASHINGTON DC 20004

Nature of Debt (Purpose):
Legal services

Outstanding Balance Beginning This Period **Transaction ID : PAYD1769**

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

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

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="23620.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="46550.67"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="100000.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="146550.67"/>