

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Ken Calvert for Congress Committee

ADDRESS (number and street)

PO Box 78376

Check if different than previously reported. (ACC)

Corona

CA

92877

2. FEC IDENTIFICATION NUMBER ▼

C C00257337

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

42

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M /

D D /

Y Y Y Y

in the State of

CA

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / 11

D D / 04

Y Y Y Y 2014

in the State of

CA

5. Covering Period

M M / 10

D D / 16

Y Y Y Y 2014

through

M M / 11

D D / 24

Y Y Y Y 2014

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

Type or Print Name of Treasurer Nicholas C. Vasels

Signature of Treasurer Nicholas C. Vasels

[Electronically Filed]

Date

M M / 12

D D / 04

Y Y Y Y 2014

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Ken Calvert for Congress 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))....	50300.00	1178426.40
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4150.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	50300.00	1174276.40
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	53854.89	794265.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	1680.37	9554.91
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	52174.52	784710.66
8. Cash on Hand at Close of Reporting Period (from Line 27).....	445571.10	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	2370.50	

**For further information contact:**

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

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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name

Ken Calvert for Congress Committee

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)  through 11 / 24 / 2014 (last day of reporting period)
<b>11. CONTRIBUTIONS</b> (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
23750.00	538505.20	0.00
(ii) Unitemized		
50.00	7158.00	0.00
(iii) Total of contributions from individuals		
23800.00	545663.20	0.00
(b) Political Party Committees		
0.00	0.00	0.00
(c) Other Political Committees		
26500.00	632763.20	0.00

# POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 42

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
50300.00	1178426.40	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
1680.37	9554.91	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
51980.37	1187981.31	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 42

Write or Type Committee Name

Ken Calvert for Congress Committee

 Report Covering the Period: From:  /  /  To:  /  / 
**II. DISBURSEMENTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
<b>17. OPERATING EXPENDITURES</b>		
<input type="text" value="53854.89"/>	<input type="text" value="794265.57"/>	<input type="text" value="35080.57"/>
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>19. LOAN REPAYMENTS:</b>		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="0.00"/>	<input type="text" value="4150.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 42

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

0.00	4150.00	0.00
------	---------	------

**21. OTHER DISBURSEMENTS**

4300.00	353750.00	300.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

58154.89	1152165.57	35380.57
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

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

50300.00	1174276.40	0.00
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**IV. NET OPERATING EXPENDITURES**

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

52174.52	784710.66	35080.57
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	451745.62
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	51980.37
25. SUBTOTAL (add Line 23 and Line 24).....	503725.99
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	58154.89
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	445571.10

**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 42
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Ken Calvert for Congress Committee**

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

Mailing Address 637 St James Rd

City State Zip Code  
Newport Beach CA 92663

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

Name of Employer Occupation  
My Good Deed Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2014

**Transaction ID : INCA13223**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Little Traverse Bay Bands of Odawa Indians**

Mailing Address 7500 Odawa Circle

City State Zip Code  
Harbor Springs MI 49740

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 25 / 2014

**Transaction ID : INCA13248**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**E. Del Smith**

Mailing Address 4712 32nd Street N

City State Zip Code  
Arlington VA 22207-4202

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

Name of Employer Occupation  
Carpi Clay & Smith President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 25 / 2014

**Transaction ID : INCA13249**

Amount of Each Receipt this Period  
500.00

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

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

1750.00

**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 42
	<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)  
**Ken Calvert for Congress Committee**

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

Mailing Address 43717 234th St

City State Zip Code  
Howard SD 57349

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

Name of Employer Occupation  
Miller-Jones Mortuary Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : INCA13251**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 41350 Armata Place

City State Zip Code  
Temecula CA 92591

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

Name of Employer Occupation  
None Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : INCA13250**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 6139 Hawarden Dr

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation  
None Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 27 / 2014**

**Transaction ID : INCA13252**

Amount of Each Receipt this Period  
**2600.00**

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

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

**3350.00**



**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 42
	<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)  
**Ken Calvert for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gordon L Bourns**

Mailing Address 2019 Polo Court

City Riverside State CA Zip Code 92506-5512

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

Name of Employer Bourns Inc. Occupation Chairman & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5200.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13267**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1450.00

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Jill D Bourns**

Mailing Address 2019 Polo Court

City Riverside State CA Zip Code 92506-5512

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

Name of Employer None Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13268**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 2600.00

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

Mailing Address 64515 Via Fermato

City Palm Springs State CA Zip Code 92264

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

Name of Employer Shadowrock Development Occupation Developer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13265**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

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

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

\_\_\_\_\_ 5050.00

\_\_\_\_\_

**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 42
	<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)  
**Ken Calvert for Congress Committee**

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

Mailing Address **PO Box 88**

City **Fawnskin** State **CA** Zip Code **92333-0088**

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

Name of Employer **Brickley Environmental Inc.** Occupation **Environmental Remediation Contractor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : INCA13255**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James L Fullmer**

Mailing Address **1725 S Grove Avenue**

City **Ontario** State **CA** Zip Code **91761-4565**

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

Name of Employer **Fullmer Construction** Occupation **General Contractor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1250.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : INCA13253**

Amount of Each Receipt this Period  
**1000.00**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Gavin Herbert III**

Mailing Address **2301 San Joaquin Hills Road**

City **Corona Del Mar** State **CA** Zip Code **92625-1113**

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

Name of Employer **Roger's Gardens** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 / 29 / 2014**

**Transaction ID : INCA13260**

Amount of Each Receipt this Period  
**2500.00**

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

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

**3750.00**

**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 42
	<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)  
**Ken Calvert for Congress Committee**

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

Mailing Address 302 N Sheridan St

City Corona State CA Zip Code 92880

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

Name of Employer Lucas Oil Products, Inc Occupation Executive Vice President

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  
 10 / 29 / 2014

**Transaction ID : INCA13263**

Amount of Each Receipt this Period  
2000.00

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

Mailing Address 302 N Sheridan St

City Corona State CA Zip Code 92880

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

Name of Employer Lucas Oil Products, Inc Occupation President

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  
 10 / 29 / 2014

**Transaction ID : INCA13262**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Prem N Reddy**

Mailing Address 16850 Bear Valley Road

City Victorville State CA Zip Code 92395

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

Name of Employer Desert Valley Hospital Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13324**

Amount of Each Receipt this Period  
2600.00

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

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

6600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 42
	<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)  
**Ken Calvert for Congress Committee**

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

Mailing Address 2741 Rumsey Dr

City Riverside State CA Zip Code 92506

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

Name of Employer Security Banks Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13266**

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jacques S Yeager**

Mailing Address PO Box 127

City Riverside State CA Zip Code 92502-0127

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

Name of Employer Jacques S Yeager Occupation Civil Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014

**Transaction ID : INCA13264**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 2834 Rumsey Drive

City Riverside State CA Zip Code 92506-1447

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

Name of Employer Entrepreneurial Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 03 / 2014

**Transaction ID : INCA13275**

Amount of Each Receipt this Period  
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
	<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)  
**Ken Calvert for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel C Alhadeff**

Mailing Address 27555 Ynez Road  
Suite 202

City Temecula State CA Zip Code 92591-4677

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

Name of Employer Alhadeff & Solar Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**650.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 04 / 2014**

**Transaction ID : INCA13278**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1830 W 38th Ave

City Denver State CO Zip Code 80211

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

Name of Employer Leprino Foods Occupation Vice Chairman

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  
**11 / 04 / 2014**

**Transaction ID : INCA13282**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

**1250.00**

**23750.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
**Ken Calvert for Congress Committee**

**A. LowPAC - Lowe's Companies, Inc PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 Lowe's Blvd  
 City Mooresville State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C C00251751**  
 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  
 10 / 21 / 2014  
**Transaction ID : INCA13243**  
 Amount of Each Receipt this Period  
 2000.00  
 3000.00

**B. California Portland Cement Company PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2025 E Financial Way  
 City Glendora State CA Zip Code 91741-4692  
 FEC ID number of contributing federal political committee. **C C00389429**  
 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  
 10 / 25 / 2014  
**Transaction ID : INCA13247**  
 Amount of Each Receipt this Period  
 1000.00  
 7000.00

**C. Ernst & Young PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1225 Connecticut Avenue NW Suite 60  
 City Washington State DC Zip Code 20036-2604  
 FEC ID number of contributing federal political committee. **C C00227744**  
 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  
 10 / 29 / 2014  
**Transaction ID : INCA13256**  
 Amount of Each Receipt this Period  
 5000.00  
 5000.00

**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: PAGE 15 OF 42  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**Ken Calvert for Congress Committee**

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

Mailing Address 1600 Duke St

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2014

**Transaction ID : INCA13269**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**NATIONAL BEER WHOLESALERS ASSOCIATION'S PAC (NBWA PAC)**

Mailing Address 1100 King Street  
Suite 600

City State Zip Code  
Alexandria VA 22314-2925

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2014

**Transaction ID : INCA13258**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Realtors PAC - RPAC**

Mailing Address 430 N Michigan Avenue

City State Zip Code  
Chicago IL 60611-4011

FEC ID number of contributing federal political committee. **C C00030718**

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2014

**Transaction ID : INCA13261**

Amount of Each Receipt this Period  
1000.00

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

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

7000.00

**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 42
	<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)  
**Ken Calvert for Congress Committee**

**A. Safari Club International PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4800 W Gates Pass Road  
 City Tucson State AZ Zip Code 85745-9600  
 FEC ID number of contributing federal political committee. **C C00122101**  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 7000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 29 / 2014  
**Transaction ID : INCA13259**  
 Amount of Each Receipt this Period  
 2000.00

**B. Valero Energy Political Action Committee**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 500  
 City San Antonio State TX Zip Code 78292-0500  
 FEC ID number of contributing federal political committee. **C C00109546**  
 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  
 10 / 29 / 2014  
**Transaction ID : INCA13257**  
 Amount of Each Receipt this Period  
 2500.00

**C. ACSM-NSPS PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5119 Pegasus Ct  
 City Frederick State MD Zip Code 21704  
 FEC ID number of contributing federal political committee. **C C00152892**  
 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  
 11 / 04 / 2014  
**Transaction ID : INCA13277**  
 Amount of Each Receipt this Period  
 500.00

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

5000.00



**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 42
	<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)  
**Ken Calvert for Congress Committee**

**A. Build PAC of National Asso. of Home Builders**

Full Name (Last, First, Middle Initial)  
Mailing Address 1201 15th Street NW

City Washington State DC Zip Code 20005-2842

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2014

**Transaction ID : INCA13279**

Amount of Each Receipt this Period  
 1500.00

**B. L-3 Communications Corporation**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 3rd Avenue

City New York State NY Zip Code 10016-1901

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2014

**Transaction ID : INCA13276**

Amount of Each Receipt this Period  
 2500.00

**C. MAPPS PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 1858 Old Reston Ave, #205

City Reston State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C** C00233247

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 Y Y  
 11 / 04 / 2014

**Transaction ID : INCA13280**

Amount of Each Receipt this Period  
 500.00

**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 18 OF 42
	<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)  
**Ken Calvert for Congress Committee**

**A.** Full Name (Last, First, Middle Initial)  
**M**Capitol Management/MWH Americas PAC

Mailing Address 380 Interlocken Crescent, #200

City Broomfield State CO Zip Code 80021

FEC ID number of contributing federal political committee. **C** C00242370

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  
 11 / 04 / 2014

**Transaction ID : INCA13281**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2000.00

26500.00

**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 42
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Ken Calvert for Congress Committee**

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

Mailing Address PO Box 7221

City Pasadena State CA Zip Code 91109-7321

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1525.66

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2014

**Transaction ID : INCA13310**

Amount of Each Receipt this Period  
1525.66

Previous Payment Correction

**B.** Full Name (Last, First, Middle Initial)  
**State Compensation Insurance Fund**

Mailing Address PO Box 7854

City San Francisco State CA Zip Code 94120-7854

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
692.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 04 / 2014

**Transaction ID : INCA13307**

Amount of Each Receipt this Period  
154.71

Refund of Overpayment

**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).....

1680.37

1680.37

**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 20 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 300 1st Street SE		Amount of Each Disbursement this Period 304.78 <b>Transaction ID : EXPB13286</b>
City Washington State DC Zip Code 20003-1801	Purpose of Disbursement Candidate Meeting & Meal Costs 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City National Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 1785.08 <b>Transaction ID : EXPB13284</b>
City Milwaukee State WI Zip Code 53201-3052	Purpose of Disbursement Credit Card Payment 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Google, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 245.53 <b>Transaction ID : EDTB912EXPB13284</b> <b>[MEMO ITEM]</b>
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Web Ad Costs 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2089.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Rayburn Office Building</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 201-215 S Capitol St SW		Amount of Each Disbursement this Period 177.90
City Washington State DC Zip Code 20003	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EDTB914EXPB13284
State: District:		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>B. The Oceanaire</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1201 F Street NW		Amount of Each Disbursement this Period 242.00
City Washington State DC Zip Code 20004-1217	Purpose of Disbursement Candidate Meeting & Meal Costs Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EDTB913EXPB13284
State: District:		<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. American Airlines</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 582880		Amount of Each Disbursement this Period 150.00
City Tulsa State OK Zip Code 74158-2880	Purpose of Disbursement Travel Costs Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : EDTB910EXPB13284
State: District:		<b>[MEMO ITEM]</b>

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Citrus City Grill</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 3555 Riverside Plaza Drive		Amount of Each Disbursement this Period 285.16
City Riverside	State CA Zip Code 92506-2713	
Purpose of Disbursement Candidate Meeting & Meal Csots	Category/Type 001	Transaction ID : EDTB911EXPB13284 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City National Bank - Misc</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 684.49
City Milwaukee	State WI Zip Code 53201	
Purpose of Disbursement Misc Travel & Meeting Costs -No Vendor Aggregating over \$200	Category/Type 001	Transaction ID : EDTB915EXPB13284 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. City National Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 1423.48
City Milwaukee	State WI Zip Code 53201-3052	
Purpose of Disbursement Credit Card Payment	Category/Type 001	Transaction ID : EXPB13283
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1423.48
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address Payment Center		Amount of Each Disbursement this Period 30.00
City Sacramento	State CA	
Zip Code 95887-0001	Purpose of Disbursement Telephone	Transaction ID : EDTB907EXPB13283
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dollar Self Storage #9</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1065 E 3rd Street		Amount of Each Disbursement this Period 175.00
City Corona	State CA	
Zip Code 92879-1606	Purpose of Disbursement Storage Fee	Transaction ID : EDTB908EXPB13283
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Knight Printing Co</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 41650 Knight Dr		Amount of Each Disbursement this Period 772.00
City Murrieta	State CA	
Zip Code 92562	Purpose of Disbursement Printing Costs	Transaction ID : EDTB905EXPB13283
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial)  
**A. Misc Travel Costs - No Vendor Aggregating over \$200**

Mailing Address

City State Zip Code

Purpose of Disbursement  
Travel Costs

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 16 / 2014

Amount of Each Disbursement this Period  
60.56

Transaction ID : EDTB909EXPB13283

**[MEMO ITEM]**

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

Mailing Address 6280 Magnolia Ave

City State Zip Code  
Riverside CA 92506

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 16 / 2014

Amount of Each Disbursement this Period  
377.10

Transaction ID : EDTB904EXPB13283

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. U.S. POSTMASTER**

Mailing Address 3681 Sunnyside Avenue

City State Zip Code  
Riverside CA 92506-9998

Purpose of Disbursement  
Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
10 / 16 / 2014

Amount of Each Disbursement this Period  
8.82

Transaction ID : EDTB906EXPB13283

**[MEMO ITEM]**

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. FEDERAL EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 253.53 <b>Transaction ID : EXPB13288</b>
City Pasadena	State CA	
Zip Code 91109-7321	Purpose of Disbursement Shipping Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mila's Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1720 Lanier Place NW		Amount of Each Disbursement this Period 1152.00 <b>Transaction ID : EXPB13285</b>
City Washington	State DC	
Zip Code 20009	Purpose of Disbursement Event Catering Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Riverside County Record</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 3187		Amount of Each Disbursement this Period 600.00 <b>Transaction ID : EXPB13287</b>
City Riverside	State CA	
Zip Code 92519-3187	Purpose of Disbursement Print Ad Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2005.53
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Safeguard Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 3600 Lime Street, #615		Amount of Each Disbursement this Period 107.72
City Riverside	State CA Zip Code 92501	
Purpose of Disbursement Check Printing	Category/Type 001	<b>Transaction ID : EXPB13306</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Press Enterprise</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address PO Box 12009		Amount of Each Disbursement this Period 20.00
City Riverside	State CA Zip Code 92502	
Purpose of Disbursement Print Ad	Category/Type 001	<b>Transaction ID : EXPB13309</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. COGS South Signs</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 3309 S Main Street		Amount of Each Disbursement this Period 3534.00
City Santa Ana	State CA Zip Code 92707-4406	
Purpose of Disbursement Outdoor Signs	Category/Type 001	<b>Transaction ID : EXPB13289</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3661.72
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Impact Placements</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2014</b>
Mailing Address <b>22431 Antonio Parkway Suite B160</b>		Amount of Each Disbursement this Period <b>2925.00</b>
City <b>Rancho Santa Marga</b>	State <b>CA</b>	Zip Code <b>92688-3932</b>
Purpose of Disbursement <b>Sign Placement Services</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : EXPB13290</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2014</b>
Mailing Address <b>2145 Hamilton Ave</b>		Amount of Each Disbursement this Period <b>61.75</b>
City <b>San Jose</b>	State <b>CA</b>	Zip Code <b>95131</b>
Purpose of Disbursement <b>Credit Card Processing Fees</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : EXPB13246</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>Payment Center</b>		Amount of Each Disbursement this Period <b>311.68</b>
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95887-0001</b>
Purpose of Disbursement <b>Credit Card Payment</b>	Category/Type <b>001</b>	
Candidate Name		<b>Transaction ID : EXPB13296</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3298.43</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>PO Box 60017</b>		Amount of Each Disbursement this Period <b>227.61</b>
City <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90060-0017</b>
Purpose of Disbursement Telephone	<b>001</b>	<b>Transaction ID : EXPB13294</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. First National Bank of Omaha</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>PO Box 2818</b>		Amount of Each Disbursement this Period <b>368.39</b>
City <b>Omaha</b>	State <b>NE</b>	Zip Code <b>68103-2818</b>
Purpose of Disbursement Credit Card Payment - No Vendor Aggregating over \$200	<b>001</b>	<b>Transaction ID : EXPB13293</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Linder for Assembly 2014</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>160 W. Foothill Pkwy #105-28</b>		Amount of Each Disbursement this Period <b>2000.00</b>
City <b>Corona</b>	State <b>CA</b>	Zip Code <b>92882</b>
Purpose of Disbursement Contribution	<b>001</b>	<b>Transaction ID : EXPB13298</b>
Candidate Name <b>Linder for Assembly 2014</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <b>2014</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>2596.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Paychex Payroll Services</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 625 East Carnegie Drive, Suite 150			Amount of Each Disbursement this Period 163.79	
City San Bernardino	State CA	Zip Code 92408	Transaction ID : EXPB13300	
Purpose of Disbursement Payroll Fee		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address PO Box 660720			Amount of Each Disbursement this Period 98.71	
City Dallas	State TX	Zip Code 75266-0720	Transaction ID : EXPB13295	
Purpose of Disbursement Telephone		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. West Coast Media</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 800 S Rochester Avenue #B			Amount of Each Disbursement this Period 1350.00	
City Ontario	State CA	Zip Code 91761	Transaction ID : EXPB13297	
Purpose of Disbursement Print Ad Costs		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1612.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Citizens Business Bank</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 225 W 6th Street			Amount of Each Disbursement this Period 918.50 <b>Transaction ID : EXPB13305</b>
City Corona	State CA	Zip Code 92882	
Purpose of Disbursement Bank Fee	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Brenda Dennstedt</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 42359 Chisolm Trail			Amount of Each Disbursement this Period 456.75 <b>Transaction ID : EXPB13302</b>
City Murrieta	State CA	Zip Code 92562	
Purpose of Disbursement Campaign Staff Wages	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Joseph Harding</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014
Mailing Address 8996 Alabama St.			Amount of Each Disbursement this Period 456.75 <b>Transaction ID : EXPB13303</b>
City Riverside	State CA	Zip Code 92503	
Purpose of Disbursement Campaign Staff Wages	Candidate Name		Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	918.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Jolyn Murphy</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 7907 Ralston Pl			Amount of Each Disbursement this Period 548.10	
City Riverside	State CA	Zip Code 92508	Transaction ID : EXPB13304	
Purpose of Disbursement Campaign Staff Wages		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Paychex Payroll Services</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 625 East Carnegie Drive, Suite 150			Amount of Each Disbursement this Period 332.80	
City San Bernardino	State CA	Zip Code 92408	Transaction ID : EXPB13301	
Purpose of Disbursement Payroll Taxes		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Paypal</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 2145 Hamilton Ave			Amount of Each Disbursement this Period 257.40	
City San Jose	State CA	Zip Code 95131	Transaction ID : EXPB13271	
Purpose of Disbursement Credit Card Processing Fees		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1138.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Paypal</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2014
Mailing Address 2145 Hamilton Ave		Amount of Each Disbursement this Period 30.00
City San Jose	State CA Zip Code 95131	
Purpose of Disbursement Service Fee	Category/Type 001	<b>Transaction ID : EXPB13272</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Arena Public Affairs</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 1154 Davis Way		Amount of Each Disbursement this Period 2500.00
City Placentia	State CA Zip Code 92870	
Purpose of Disbursement Campaign Consulting Services	Category/Type 001	<b>Transaction ID : EXPB13312</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Campaign Compliance Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 8001 Irvine Center Drive #400		Amount of Each Disbursement this Period 2000.00
City Irvine	State CA Zip Code 92618	
Purpose of Disbursement Financial Analyst	Category/Type 001	<b>Transaction ID : EXPB13313</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4530.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Brenda Dennstedt</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 42359 Chisolm Trail		Amount of Each Disbursement this Period 129.66 <b>Transaction ID : EXPB13323</b>
City Murrieta State CA Zip Code 92562	Purpose of Disbursement Mileage Reimbursement 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEDERAL EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO Box 7221		Amount of Each Disbursement this Period 98.70 <b>Transaction ID : EXPB13321</b>
City Pasadena State CA Zip Code 91109-7321	Purpose of Disbursement Shipping Costs 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Law Offices of Nicholas C. Vasels</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 4312 Crown Ranch Rd		Amount of Each Disbursement this Period 1716.00 <b>Transaction ID : EXPB13311</b>
City Corona State CA Zip Code 92881	Purpose of Disbursement Legal/Compliance Services 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1944.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Stacy Davis &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014	
Mailing Address 24651 Evereve Circle, #1			Amount of Each Disbursement this Period 21653.76	
City Lake Forest	State CA	Zip Code 92630	Transaction ID : EXPB13318	
Purpose of Disbursement Fundraising Consulting Services		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. State Compensation Insurance Fund</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014	
Mailing Address PO Box 7854			Amount of Each Disbursement this Period 531.00	
City San Francisco	State CA	Zip Code 94120-7854	Transaction ID : EXPB13314	
Purpose of Disbursement Workers Comp Policy		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. TVRWF - Temecula Valley Republican Women Federated</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014	
Mailing Address P. O. Box 1872			Amount of Each Disbursement this Period 20.00	
City Temecula	State CA	Zip Code 92593	Transaction ID : EXPB13322	
Purpose of Disbursement Candidate Meeting & Meal Cost		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	22204.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO Box 15110		Amount of Each Disbursement this Period 4,000.00 9,000.00 136.86 <b>Transaction ID : EXPB13315</b>
City Albany State NY Zip Code 12212-5110	Purpose of Disbursement Telephone Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. City National Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 271.16 <b>Transaction ID : EXPB13316</b>
City Milwaukee State WI Zip Code 53201-3052	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Adobe Systems Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 345 Park Avenue		Amount of Each Disbursement this Period 9.99 <b>Transaction ID : EDTB895EXPB13316</b>
City San Jose State CA Zip Code 95110	Purpose of Disbursement Software Fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	408.02
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Staples</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 6280 Magnolia Ave		Amount of Each Disbursement this Period 46.17
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement Office Supplies	Transaction ID : EDTB894EXPB13316 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address Payment Center		Amount of Each Disbursement this Period 30.00
City Sacramento	State CA	
Zip Code 95887-0001	Purpose of Disbursement Telephone	Transaction ID : EDTB896EXPB13316 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Dollar Self Storage #9</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 1065 E 3rd Street		Amount of Each Disbursement this Period 185.00
City Corona	State CA	
Zip Code 92879-1606	Purpose of Disbursement Storage Fee	Transaction ID : EDTB897EXPB13316 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 37 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. City National Bank Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 6023.43 <b>Transaction ID : EXPB13317</b>
City Milwaukee	State WI	
Zip Code 53201-3052	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Google, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 325.00 <b>Transaction ID : EDTB903EXPB13317</b> <b>[MEMO ITEM]</b>
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Web Ad Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 50 Massachusetts Ave. N.E.		Amount of Each Disbursement this Period 826.00 <b>Transaction ID : EDTB898EXPB13317</b> <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Travel Costs	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6023.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. City National Bank - Misc</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address PO Box 3052		Amount of Each Disbursement this Period 648.73
City Milwaukee	State WI	Zip Code 53201
Purpose of Disbursement Misc Travel & Meal Costs	Category/ Type 001	
Candidate Name		Transaction ID : EDTB901EXPB13317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Facebook Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 156 University Ave		Amount of Each Disbursement this Period 43.69
City Palo Alto	State CA	Zip Code 94301
Purpose of Disbursement Web Ad Costs	Category/ Type 001	
Candidate Name		Transaction ID : EDTB900EXPB13317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Google, Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 1600 Amphitheatre Parkway		Amount of Each Disbursement this Period 505.01
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Web Ad Costs	Category/ Type 001	
Candidate Name		Transaction ID : EDTB899EXPB13317
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		[MEMO ITEM]
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. The Press Enterprise</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014		
Mailing Address PO Box 12009			Amount of Each Disbursement this Period 3675.00		
City Riverside	State CA	Zip Code 92502	Transaction ID : EDTB902EXPB13317 <b>[MEMO ITEM]</b>		
Purpose of Disbursement Print Ad Costs		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</b>			Date of Disbursement M M / D D / Y Y Y Y		
Mailing Address			Amount of Each Disbursement this Period		
City	State	Zip Code			
Purpose of Disbursement		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:					

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	53854.89

**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 42			
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Logue for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2014</b>
Mailing Address <b>976 Pacific Avenue</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>EXPB13292</b>
City <b>Willows</b> State <b>CA</b> Zip Code <b>95988</b>	Purpose of Disbursement Contribution <b>011</b> Category/ Type	
Candidate Name <b>Dan Logue</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>CA</b> District: <b>03</b>		

Full Name (Last, First, Middle Initial) <b>B. Mooney for Congress</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2014</b>
Mailing Address <b>179 E Burr Blvd</b>		Amount of Each Disbursement this Period <b>1000.00</b> Transaction ID : <b>EXPB13291</b>
City <b>Keaneysville</b> State <b>WV</b> Zip Code <b>25430</b>	Purpose of Disbursement Contribution <b>011</b> Category/ Type	
Candidate Name <b>Alex Mooney</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>WV</b> District: <b>02</b>		

Full Name (Last, First, Middle Initial) <b>c. Republican Party of Riverside County</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2014</b>
Mailing Address <b>PO Box 20091</b>		Amount of Each Disbursement this Period <b>2000.00</b> Transaction ID : <b>EXPB13299</b>
City <b>Riverside</b> State <b>CA</b> Zip Code <b>92516-0091</b>	Purpose of Disbursement Contribution <b>011</b> Category/ Type	
Candidate Name <b>Republican Party of Riverside County</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 42	
	<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)  
**Ken Calvert for Congress Committee**

Full Name (Last, First, Middle Initial) <b>A. Carr Foundation</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 313 N Water Avenue		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : EXPB13320</b>
City Idaho Falls	State ID	
Zip Code 83402	Purpose of Disbursement Civic Donation - Surplus Funds	Category/ Type 011
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Woman's Improvement Club of Corona</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 161 W Citron Street		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : EXPB13319</b>
City Corona	State CA	
Zip Code 92882	Purpose of Disbursement Civic Donation - Surplus Funds	Category/ Type 012
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) <b>C.</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	
State: District:	Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	300.00
<b>TOTAL</b> This Period (last page this line number only).....	4300.00

**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)

**Ken Calvert for Congress Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**Callaway Vineyard & Winery**

Mailing Address 32720 Rancho California Road

City State Zip Code  
Temecula CA 92591

Nature of Debt (Purpose):  
Fundraiser Dinner

Outstanding Balance Beginning This Period **2370.50** **Transaction ID : PAYD7605**

Amount Incurred This Period **0.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **2370.50**

B. 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

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) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>2370.50</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<b>2370.50</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<b>2370.50</b>