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## 48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

| NAME OF COMMITTEE IN FULL     John Tavaglione for Congress  ADDRESS (number and street) 4201 Brockton Ave Ste 100 |                                       |                    | 1   |                         |
|---|---------------------------------------|--------------------|---|-------------------------|
|   |                                       |                    | -   |                         |
|   |                                       |                    |   |                         |
| CITY, STATE, and ZIP CODE   | 0.4                                   |                    |   |                         |
| Riverside CA  |                                       | 01                 |   |                         |
| 2. NAME OF CANDIDATE  John F Tavaglione   | 3. OFFICE SOUGHT (State and District) |                    | 4. FEC IDENTIFICATION NUMBER  |                         |
|   | House                                 | CA 41              | C00498188   |                         |
| 5. IS THIS AN AMENDMENT? NO, THIS IS A NEW FILING   | YES, IT AMENDS THE NOTICE FILED ON    |                    | ///   |                         |
| A. FULL NAME, MAILING ADDRESS AND ZIP CODE  | Name of Employer                      |                    | Date (month,  | Amount                  |
| Peggy A Rickard Metals Inc.   |                                       |                    | day, year)  |                         |
| 307   |                                       |                    | 10/18/2012  | 1000.00                 |
| 8378 Brittany Ln  |                                       |                    |   |                         |
|   | Transaction ID: 65-4143               |                    |   |                         |
| Rancho Cucamonga CA 91701   | Occupation                            |                    |   |                         |
|   | Owner                                 |                    | Date (month,  |                         |
| B. FULL NAME, MAILING ADDRESS AND ZIP CODE  | Name of Employer                      | Name of Employer   |   | Amount                  |
|   |                                       |                    | day, year)  |                         |
|   |                                       |                    |   |                         |
|   |                                       |                    |   |                         |
|   | Occupation                            |                    |   |                         |
|   | Occupation                            |                    |   |                         |
| C. FULL NAME, MAILING ADDRESS AND ZIP CODE  | Name of Employer                      | Name of Employer   |   | Amount                  |
|   | rame of Employe.                      |                    | Date (month, day, year)   |                         |
|   |                                       |                    |   |                         |
|   |                                       |                    |   |                         |
|   |                                       |                    |   |                         |
|   | Occupation                            |                    |   |                         |
|   |                                       |                    |   |                         |
| D. FULL NAME, MAILING ADDRESS AND ZIP CODE  | Name of Employer                      |                    | Date (month, day, year)   | Amount                  |
|   |                                       |                    | day, year)  |                         |
|   |                                       |                    |   |                         |
|   | Occupation                            |                    |   |                         |
|   |                                       |                    |   |                         |
|   | Occupation                            |                    |   |                         |
| E FULL NAME MAILING ADDRESS AND ZID CODE  | Name of Employer                      |                    | Date (month,  | Amount                  |
| E. FULL NAME, MAILING ADDRESS AND ZIP CODE  | Name of Employer                      |                    | day, year)  | 7.11100111              |
|   |                                       |                    |   |                         |
|   |                                       |                    |   |                         |
|   |                                       |                    |   |                         |
|   | Occupation                            |                    | -   |                         |
|   |                                       |                    |   |                         |
| SIGNATURE (optional)  | •                                     | DATE<br>10/10/2012 | For further in  | ormation contact:       |
| Richard Teaman  | [Electronically Filed] 10/19/2012     |                    | Federal Election Commission<br>999 E Street, NW, Washington, DC 20463 |                         |
|   | Laconomicany I neuj                   |                    |   | 530, Local 202-694-1100 |

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