

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps

A. Full Name (Last, First, Middle Initial) VENTURA COUNTY DEMOCRATIC COMMITTEE <hr/> Mailing Address P. O. Box 1587 <hr/> City Camarillo State CA Zip Code 93011 <hr/> Purpose of Disbursement contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21.40049 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00
B. Full Name (Last, First, Middle Initial) Yes on FAIR <hr/> Mailing Address 10940 Wilshire Blvd #2000 <hr/> City Los Angeles State CA Zip Code 90024 <hr/> Purpose of Disbursement contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21.40045 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 1 0
	Amount of Each Disbursement this Period 10000.00

SUBTOTAL of Disbursements This Page (optional)	10250.00
TOTAL This Period (last page this line number only)	40351.50