

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

ISSA FOR CONGRESS

ADDRESS (number and street) P O BOX 760

Check if different than previously reported. (ACC)

VISTA CA 92085

2. FEC IDENTIFICATION NUMBER C00350520 CITY STATE ZIP CODE STATE DISTRICT

3. IS THIS REPORT NEW OR AMENDED

## 4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
July 15 Quarterly Report (Q2)
[X] 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 in the State of

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

- General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 07 01 2007 through 09 30 2007

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 JUSTIN LEE

Signature of Treasurer Electronically Filed by JUSTIN LEE Date 03 10 2008

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

ISSA FOR CONGRESS

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	96062.00	308859.96
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	96062.00	308859.96
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	63067.19	153065.13
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	63067.19	153065.13
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>170688.49</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>1500000.00</b>	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
ISSA FOR CONGRESS

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

40794.00

143869.80

(ii) Unitemized.....

6268.00

12714.42

(iii) TOTAL of contributions

47062.00

156584.22

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

49000.00

152275.74

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

96062.00

308859.96

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

658.97

10587.89

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

96720.97

319447.85

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	63067.19	153065.13
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	25000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	320000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	320000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	5250.00	23953.78
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	68317.19	522018.91

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	142284.71
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	96720.97
25. SUBTOTAL (add Line 23 and Line 24).....	239005.68
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	68317.19
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	170688.49

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 5 / 58
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL ABATTI	Date of Receipt MM / DD / YYYY 08 / 18 / 2007
	Mailing Address 1205 AURORA DR	Transaction ID: SA11AI.21723
	City State Zip Code EL CENTRO CA 92243	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation FARMER Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) C. NEIL ASH	Date of Receipt MM / DD / YYYY 07 / 03 / 2007
	Mailing Address PO BOX 1924	Transaction ID: SA11AI.21623
	City State Zip Code RANCHO SANTA FE CA 92037	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer NONE Occupation RETIRED Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) C. NEIL ASH	Date of Receipt MM / DD / YYYY 08 / 28 / 2007
	Mailing Address PO BOX 1924	Transaction ID: SA11AI.21725
	City State Zip Code RANCHO SANTA FE CA 92037	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer NONE Occupation RETIRED Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 6 / 58
	<input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD E ASHOOH		Date of Receipt MM / DD / YYYY 08 / 06 / 2007
	Mailing Address 59 PASTURE LANE		Transaction ID: SA11AI.21696
	City BEDFORD	State NH	Zip Code 03110
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer BAE SYSTEMS		Occupation VP LEGISLATIVE AFFAIRS
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) KEITH D BATTLE		Date of Receipt MM / DD / YYYY 09 / 16 / 2007
	Mailing Address 808 N VINE ST		Transaction ID: SA11AI.21748
	City FALLBROOK	State CA	Zip Code 92028
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer FALLBROOK PUBLIC UTILITY		Occupation DIRECTOR
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) ANN BEARD		Date of Receipt MM / DD / YYYY 07 / 17 / 2007
	Mailing Address 7220 VISTAS LANE		Transaction ID: SA11AI.21650
	City MCLEAN	State VA	Zip Code 22101
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
	Name of Employer SELF-DIPLOMACY & INT'L PR-OTOCO		Occupation PRESIDENT
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 58  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
STEVE W BRAUN

Mailing Address 2545 LONE JACK RD

City State Zip Code  
ENCINITAS CA 92024

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
L3 COMMUNICATIONS DIRECTOR

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.21747

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2220 OAKRIDGE WAY

City State Zip Code  
VISTA CA 92083

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DDH OWNER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 1 8 / 2 0 0 7

Transaction ID: SA11AI.21726

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 5470 MILLEDALE DRIVE

City State Zip Code  
LOS ANGELES CA 90077

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
0 7 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.21652

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 58
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) ANTHONY DU PONT		Date of Receipt
	Mailing Address 2180 CALLE FRESCOTA		<input type="text" value="08"/> / <input type="text" value="22"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	LA JOLLA	CA	92037
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer DU PONT AEROSPACE CO INC		Occupation PRESIDENT/CEO	<b>Transaction ID:</b> SA11AI.21736
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	<b>CONTRIBUTION</b>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) EASTERN BAND OF CHEROKEE INDIANS		Date of Receipt
	Mailing Address PO BOX 455		<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	CHEROKEE	NC	28719
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer		Occupation	<b>Transaction ID:</b> SA11AI.21906
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="1000.00"/>
		<input type="text" value="1000.00"/>	<b>CONTRIBUTION</b>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL F EYER		Date of Receipt
	Mailing Address 14337 TWIN PEAKS ROAD		<input type="text" value="08"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	POWAY	CA	92064
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MERRILL LYNCH		Occupation VP - INVESTMENT	<b>Transaction ID:</b> SA11AI.21739
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="500.00"/>
		<input type="text" value="500.00"/>	<b>CONTRIBUTION</b>
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: PAGE 9 / 58  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL FARAH

Mailing Address 369 SAN MIGUEL DR STE 350

City State Zip Code  
NEWPORT BEACH CA 92660

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
SELF EMPLOYED MONEY MANAGER

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	3		2	0	0	7

Transaction ID: SA11AI.21700

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 603 N HWY 101

City State Zip Code  
SOLANA BEACH CA 92075

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DEAN A GOETZ ATTORNEY AT LAW ATTORNEY

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	5		2	0	0	7

Transaction ID: SA11AI.21749

Amount of Each Receipt this Period  
500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 35 MOUNT VERNON AVENUE

City State Zip Code  
ALEXANDRIA VA 22301

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
INFORMATION REQUESTED

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	7

Transaction ID: SA11AI.21694

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM 'BUCK' JOHNS	Date of Receipt MM / DD / YYYY 07 / 23 / 2007
	Mailing Address 2600 MESA DRIVE	<b>Transaction ID:</b> SA11AI.21690
	City State Zip Code NEWPORT BEACH CA 92660	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation INLAND GROUP INC PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) WILLIAM 'BUCK' JOHNS	Date of Receipt MM / DD / YYYY 07 / 23 / 2007
	Mailing Address 2600 MESA DRIVE	<b>Transaction ID:</b> SA11AI.21899
	City State Zip Code NEWPORT BEACH CA 92660	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation INLAND GROUP INC PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2600.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GARY W JOHNSON	Date of Receipt MM / DD / YYYY 07 / 03 / 2007
	Mailing Address 76-945 SHEFFIELD CT	<b>Transaction ID:</b> SA11AI.21599
	City State Zip Code PALM DESERT CA 92211	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	<b>C</b>
	Name of Employer Occupation GRANITE CONSTRUCTION RESOURCE MANAGER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 225.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	625.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES LACY	Date of Receipt MM / DD / YYYY 08 / 07 / 2007
	Mailing Address 24625 KINGS POINTE	Transaction ID: SA11AI.21704
	City State Zip Code LAGUNA NIGUEL CA 92612	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation WEWER & LACY LLP ATTORNEY	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) CHARMAYNE MACON	Date of Receipt MM / DD / YYYY 09 / 28 / 2007
	Mailing Address 5459 MITTENDORF LANE	Transaction ID: SA11AI.21793
	City State Zip Code ALEXANDRIA VA 22315	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation THE FERGUSON GROUP EXECUTIVE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) BOGDAN MAGLICH	Date of Receipt MM / DD / YYYY 08 / 17 / 2007
	Mailing Address 2785 VISTA UMBROSA	Transaction ID: SA11AI.21733
	City State Zip Code NEWPORT BEACH CA 92606	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HIENERGY TECHNOLOGIES CHAIRMAN	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 12 / 58  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
PAULA MAHAN

Mailing Address 1902 WRIGHT PL

City State Zip Code  
CARLSBAD CA 92008

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

Name of Employer MAHAN & MAHAN ATTORNEYS AT LAW  
Occupation ATTORNEY

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	7

**Transaction ID:** SA11AI.21706

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 515 COLE RANCH RD

City State Zip Code  
ENCINITAS CA 92024

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

Name of Employer NONE  
Occupation HOMEMAKER

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	0	7

**Transaction ID:** SA11AI.21897

Amount of Each Receipt this Period  
2300.00

In-kind - EVENT EXP - FOOD & BEVERAGE

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8284 LA JOLLA SHORES DR

City State Zip Code  
LA JOLLA CA 92037

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

Name of Employer MAHER DESIGN COMPANY  
Occupation OWNER

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2300.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	0	7

**Transaction ID:** SA11AI.21893

Amount of Each Receipt this Period  
2300.00

In-kind - EVENT EXP - FOOD & BEVERAGE

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **5600.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL J MAHER	Date of Receipt MM / DD / YYYY 09 / 16 / 2007
	Mailing Address 1901 CAMINO VIDA ROBLE #100	<b>Transaction ID:</b> SA11AI.21895
	City State Zip Code CARLSBAD CA 92008	Amount of Each Receipt this Period 519.00
	FEC ID number of contributing federal political committee. C	In-kind - EVENT EXP - FOOD & BEVERAGE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation MERRILL LYNCH EXECUTIVE VP	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 519.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) PATRICK MAHER	Date of Receipt MM / DD / YYYY 09 / 16 / 2007
	Mailing Address 8284 LA JOLLA SHORES DR	<b>Transaction ID:</b> SA11AI.21891
	City State Zip Code LA JOLLA CA 92037	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	In-kind - EVENT EXP - FOOD & BEVERAGE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation MERRILL LYNCH STOCK BROKER	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) THOMAS J MAHER	Date of Receipt MM / DD / YYYY 09 / 16 / 2007
	Mailing Address 12055 GOTHIC AVE	<b>Transaction ID:</b> SA11AI.21751
	City State Zip Code GRANADA HILLS CA 91344	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Name of Employer Occupation INFORMATION REQUESTED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3819.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 58  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
MASHANTUCKET PEQUOT TRIBAL NATION

Mailing Address PO BOX 3008

City MASHANTUCKET State CT Zip Code 06338

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 27 / 2007

Transaction ID: SA11AI.21715

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
GLORIA M MCMILLAN

Mailing Address 6059 DIRAC ST

City SAN DIEGO State CA Zip Code 92122

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

Name of Employer Occupation  
RETIRED

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 17 / 2007

Transaction ID: SA11AI.21661

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
SHAWN A MCMILLAN

Mailing Address 11075 BEELER CANYON RD

City POWAY State CA Zip Code 92064

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

Name of Employer Occupation  
SELF EMPLOYED ATTORNEY

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 17 / 2007

Transaction ID: SA11AI.21663

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 58  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
MORONGO BANK OF MISSIONS INDIANS NATIVE AMERICAN RIGHTS FUND B

Mailing Address PO BOX 366

City State Zip Code  
CABAZON CA 92230

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2100.00

Date of Receipt MM / DD / YYYY  
07 / 06 / 2007

**Transaction ID:** SA11AI.21676

Amount of Each Receipt this Period  
2100.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8204 ROSELAND DR

City State Zip Code  
FAIRFAX STATION VA 22039

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
THE POTOMAC ADVOCATES PARTNER

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
09 / 27 / 2007

**Transaction ID:** SA11AI.21792

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4122 20TH ST

City State Zip Code  
SAN FRANCISCO CA 94114

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
PROGRESSIVE DESIGN PLAYGR- OUNDS PRESIDENT

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
07 / 11 / 2007

**Transaction ID:** SA11AI.21632

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 4100.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) PECHANGA BAND OF MISSION INDIANS	Date of Receipt MM / DD / YYYY 08 / 07 / 2007
	Mailing Address PO BOX 1477	Transaction ID: SA11AI.21717
	City TEMECULA State CA Zip Code 92593	Amount of Each Receipt this Period 2100.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00

<b>B.</b>	Full Name (Last, First, Middle Initial) NORM PRESSLEY	Date of Receipt MM / DD / YYYY 07 / 18 / 2007
	Mailing Address 7617 PEPITA WAY	Transaction ID: SA11AI.21668
	City LA JOLLA State CA Zip Code 92037	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation FARMER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00

<b>C.</b>	Full Name (Last, First, Middle Initial) GENE W. RAY	Date of Receipt MM / DD / YYYY 09 / 04 / 2007
	Mailing Address 16136 EL CAMINO REAL	Transaction ID: SA11AI.21741
	City RANCHO SANTE FE State CA Zip Code 92091	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer GMT VENTURES Occupation MANAGING DIRECTOR	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
	Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3700.00
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 17 / 58</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) DANIEL J RICHARD	Date of Receipt MM / DD / YYYY 08 / 06 / 2007
	Mailing Address 978 IDYLLWILD WAY	<b>Transaction ID:</b> SA11AI.21708
	City State Zip Code SAN MARCOS CA 92070	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation BAE SYSTEMS INC PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) LORI RIVINIS	Date of Receipt MM / DD / YYYY 07 / 19 / 2007
	Mailing Address 402 WEST BROADWAY STE 1320	<b>Transaction ID:</b> SA11AI.21666
	City State Zip Code SAN DIEGO CA 92101	Amount of Each Receipt this Period 1500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation REMAX REAL ESTATE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) SAGINAW CHIPPEWA INDIAN TRIBE	Date of Receipt MM / DD / YYYY 07 / 26 / 2007
	Mailing Address 7070 E BROADWAY	<b>Transaction ID:</b> SA11AI.21718
	City State Zip Code MT PLEASANT MI 48858	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 58

(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
THOMAS L. SALIBA

Mailing Address 115 S. VALLEY ST

City State Zip Code  
BURBANK CA 91505

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RETIRED RETIRED

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 13 / 2007

**Transaction ID:** SA11AI.21712

Amount of Each Receipt this Period  
250.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
SAN MANUEL TRIBAL ADMINISTRATION

Mailing Address 26569 COMMUNITY CENTER DRIVE

City State Zip Code  
HIGHLAND CA 92346

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 16 / 2007

**Transaction ID:** SA11AI.21761

Amount of Each Receipt this Period  
2000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
GAIL STOORZA-GILL

Mailing Address 711 SILVER GATE AVE

City State Zip Code  
SAN DIEGO CA 92106

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
THE RIGHT QUESTION LLC CEO

Receipt For: 2008 Election Cycle-to-Date ▼

Primary  General  
 Other (specify) ▼

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 16 / 2007

**Transaction ID:** SA11AI.21755

Amount of Each Receipt this Period  
500.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... 2750.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 58  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
BRUCE E. TABB

Mailing Address 402 W BROADWAY STE 2175

City State Zip Code  
SAN DIEGO CA 92101

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

Name of Employer Occupation  
SELF EMPLOYED REAL ESTATE CONSULTANT

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
07 / 19 / 2007

Transaction ID: SA11AI.21665

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4734 N 34TH ROAD

City State Zip Code  
ARLINGTON VA 22207

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

Name of Employer Occupation  
RYAN, PHILLIPS, UTRECHT & MACKIN EXECUTIVE

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2007

Transaction ID: SA11AI.21794

Amount of Each Receipt this Period  
500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO BOX 85587

City State Zip Code  
SAN DIEGO CA 92186

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

Name of Employer Occupation  
CUBIC CORP EXECUTIVE

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
08 / 28 / 2007

Transaction ID: SA11AI.21744

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 / 58	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) JULIUS ZOLEZZI		Date of Receipt	
	Mailing Address 1050 ROSECRANS STE E		M M / D D / Y Y Y Y 09 / 12 / 2007	
	City	State	Zip Code	Transaction ID: SA11AI.21757
	SAN DIEGO	CA	92106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		250.00	
Name of Employer ZOLEZZI ENTERPRISES		Occupation OWNER		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	40794.00

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

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

FOR LINE NUMBER: PAGE 21 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN MARITIME OFFICERS VOLUNTARY POLITICAL ACTION FUND  
Mailing Address 2 West Dixie Highway  
City Dania Beach State FL Zip Code 33004  
FEC ID number of contributing federal political committee. **C** C00027532  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 27 / 2007  
Transaction ID: SA11C.21784  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN PODIATRIC MEDICAL ASSN. INC. PODIATRY POLITICAL ACTION COMMITTEE  
Mailing Address 9312 Old Georgetown Road  
City Bethesda State MD Zip Code 20814  
FEC ID number of contributing federal political committee. **C** C00008839  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 11 / 2007  
Transaction ID: SA11C.21764  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
ANHEUSER-BUSCH PAC  
Mailing Address 1401 I STREET NW STE 200  
City WASHINGTON State DC Zip Code 20005  
FEC ID number of contributing federal political committee. **C** C00034488  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 27 / 2007  
Transaction ID: SA11C.21769  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 22 / 58  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
BAE SYSTEMS USA PAC

Mailing Address 1215 JEFFERSON DAVIS HIGHWAY  
STE 1500

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** c00281212

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt: 07 / 27 / 2007  
Transaction ID: SA11C.21681  
Amount of Each Receipt this Period: 500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
BAE SYSTEMS USA PAC

Mailing Address 1215 JEFFERSON DAVIS HIGHWAY  
STE 1500

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** c00281212

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt: 07 / 27 / 2007  
Transaction ID: SA11C.21682  
Amount of Each Receipt this Period: 5000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address PO BOX 961039

City FORT WORTH State TX Zip Code 76161

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 09 / 26 / 2007  
Transaction ID: SA11C.21770  
Amount of Each Receipt this Period: 2500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 8000.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
BOEING PAC  
Mailing Address 1200 WILSON BLVD  
City ARLINGTON State VA Zip Code 22209  
FEC ID number of contributing federal political committee. **C** C00142711  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 08 / 06 / 2007  
Transaction ID: SA11C.21719  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CALPINE CORPORATION POLITICAL ACTION COMMITTEE  
Mailing Address 50 West San Fernando Street  
City San Jose State CA Zip Code 95113  
FEC ID number of contributing federal political committee. **C** C00362640  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 07 / 20 / 2007  
Transaction ID: SA11C.21678  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
COOPERATIVE OF AMERICAN PHYSICIANS  
Mailing Address 333 S HOPE STREET 8TH FL  
City LOS ANGELES State CA Zip Code 90071  
FEC ID number of contributing federal political committee. **C** C00161604  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 09 / 20 / 2007  
Transaction ID: SA11C.21771  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 58

(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
CREDIT UNION LEGISLATIVE ACTION COUNCIL

Mailing Address 805 FIFTEENTH ST NW #300

City WASHINGTON State DC Zip Code 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 06 / 2007  
Transaction ID: SA11C.21746  
Amount of Each Receipt this Period: 1000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
CUMMINS INC POLITICAL ACTION COMMITTEE (CIPAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW  
NORTH BUILDING SUITE 625

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00377952

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 09 / 17 / 2007  
Transaction ID: SA11C.21772  
Amount of Each Receipt this Period: 500.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
ECHOSTAR COMMUNICATIONS CORPORATION PAC

Mailing Address 5701 S SANTA FE DRIVE

City LITTLETON State CO Zip Code 80120

FEC ID number of contributing federal political committee. **C** C00330647

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 07 / 27 / 2007  
Transaction ID: SA11C.21685  
Amount of Each Receipt this Period: 1000.00

CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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



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

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

FOR LINE NUMBER: PAGE 25 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

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

Mailing Address 2244 WALNUT GROVE AVE

City State Zip Code  
ROSEMEAD CA 91770

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 20 2007

**Transaction ID:** SA11C.21679

Amount of Each Receipt this Period  
2000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ELECTRICAL CONSTRUCTION PAC-NATIONAL ELECTRICAL CONTRACTORS ASSOCIATION, INC (EDCAC)

Mailing Address 3 BETHESDA METRO CENTER SUITE 1100

City State Zip Code  
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C** C00113811

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 07 2007

**Transaction ID:** SA11C.21762

Amount of Each Receipt this Period  
2000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 520 S. GRAND AVE. STE. 700

City State Zip Code  
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 20 2007

**Transaction ID:** SA11C.21737

Amount of Each Receipt this Period  
2000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **6000.00**

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

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

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

FOR LINE NUMBER: PAGE 26 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
GEN-PROBE INCORPORATED PAC (GEN-PROBE PAC)  
Mailing Address 10210 GENETIC CENTER DRIVE

City State Zip Code  
SAN DIEGO CA 92121

FEC ID number of contributing federal political committee. **C** C00405100

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2007

**Transaction ID:** SA11C.21672

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN  
Mailing Address 3190 FAIRVIEW PARK DRIVE

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00078451

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2007

**Transaction ID:** SA11C.21720

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
GODADDY.COM INC PAC  
Mailing Address 14455 NORTH HAYDEN ROAD SUITE 219

City State Zip Code  
SCOTTSDALE AZ 85260

FEC ID number of contributing federal political committee. **C** C00432328

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 07 / 2007

**Transaction ID:** SA11C.21766

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
GRANITE CONSTRUCTION INC. EMPLOYEE PAC - GRANITEPAC  
 Mailing Address 555 Capitol Mall Suite 1425  
 City State Zip Code  
 Sacramento CA 95814  
 FEC ID number of contributing federal political committee. **C** C00337394  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 2000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2007  
**Transaction ID:** SA11C.21680  
 Amount of Each Receipt this Period  
 2000.00  
**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
L-3 COMMUNICATIONS CORPORATION POLITICAL ACTION COMMITTEE  
 Mailing Address 600 Third Avenue  
 City State Zip Code  
 New York NY 10016  
 FEC ID number of contributing federal political committee. **C** C00338087  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 1000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 27 / 2007  
**Transaction ID:** SA11C.21683  
 Amount of Each Receipt this Period  
 1000.00  
**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
MCKENNA LONG & ALDRIDGE LLP POLITICAL ACTION COMMITTEE  
 Mailing Address 303 Peachtree Street Suite 5300  
 City State Zip Code  
 Atlanta GA 30308  
 FEC ID number of contributing federal political committee. **C** C00391383  
 Name of Employer Occupation  
 Receipt For: 2008  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼ 2000.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 24 / 2007  
**Transaction ID:** SA11C.21775  
 Amount of Each Receipt this Period  
 1000.00  
**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 28 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

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

Mailing Address 16011 NE 36TH WAY

City State Zip Code  
REDMOND WA 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 25 / 2007

**Transaction ID:** SA11C.21785

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1100 S WASHINGTON ST

City State Zip Code  
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 23 / 2007

**Transaction ID:** SA11C.21673

Amount of Each Receipt this Period  
2500.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1605 KING STREET

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00089458

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 26 / 2007

**Transaction ID:** SA11C.21686

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
NUCLEAR ENERGY INSTITUTE FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address 1776 I Street NW 4th Flr

City Washington State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00239848

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2007  
**Transaction ID:** SA11C.21795  
 Amount of Each Receipt this Period: 1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 235 E 42ND ST

City NEW YORK State NY Zip Code 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 27 / 2007  
**Transaction ID:** SA11C.21786  
 Amount of Each Receipt this Period: 1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
PG&E CORPORATION ENERGY PAC

Mailing Address 77 BEALE ST

City SAN FRANCISCO State CA Zip Code 94177

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 08 / 21 / 2007  
**Transaction ID:** SA11C.21738  
 Amount of Each Receipt this Period: 1000.00

**CONTRIBUTION**  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 58

(check only one)

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

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)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
PRECISION METALFORMING ASSOCIATION VOICE OF THE INDUSTRY COMMITTEE (PMAVIC)

Mailing Address 6363 OAK TREE BLVD

City	State	Zip Code
INDEPENDENCE	OH	44131

FEC ID number of contributing federal political committee. **C** C00082271

Name of Employer Occupation

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	1000.00
<input type="checkbox"/> Other (specify) ▼	

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2007

Transaction ID: SA11C.21776

Amount of Each Receipt this Period

1000.00
---------

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)  
QPAC

Mailing Address 2000 K ST #375

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee. **C** C00339085

Name of Employer Occupation

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	2000.00
<input type="checkbox"/> Other (specify) ▼	

Date of Receipt

M M / D D / Y Y Y Y
07 / 06 / 2007

Transaction ID: SA11C.21639

Amount of Each Receipt this Period

1000.00
---------

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City	State	Zip Code
Arlington	VA	22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2008	Election Cycle-to-Date ▼
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	5000.00
<input type="checkbox"/> Other (specify) ▼	

Date of Receipt

M M / D D / Y Y Y Y
07 / 24 / 2007

Transaction ID: SA11C.21721

Amount of Each Receipt this Period

3000.00
---------

CONTRIBUTION

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 31 / 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
REALTORS POLITICAL ACTION COMMITTEE  
Mailing Address 430 N MICHIGAN AVE  
City CHICAGO State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 09 / 12 / 2007  
Transaction ID: SA11C.21908  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
RECORDING INDUSTRY ASSN OF AMERICA PAC  
Mailing Address 1330 CONNECTICUT AVE NEW STE 300  
City WASHINGTON State DC Zip Code 20036  
FEC ID number of contributing federal political committee. **C** C00009357  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt: 09 / 26 / 2007  
Transaction ID: SA11C.21787  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
SAIC VOLUNTARY PAC  
Mailing Address 10260 CAMPUS POINT DR F2  
City SAN DIEGO State CA Zip Code 92121  
FEC ID number of contributing federal political committee. **C** C00300418  
Name of Employer Occupation  
Receipt For: 2008  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 4500.00  
Date of Receipt: 08 / 06 / 2007  
Transaction ID: SA11C.21722  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 58  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

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

Mailing Address 10260 CAMPUS POINT DR F2

City State Zip Code  
SAN DIEGO CA 92121

FEC ID number of contributing federal political committee. **C** C00300418

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 5500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 20 / 2007

**Transaction ID:** SA11C.21909

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
STAMPS.COM INC.PAC

Mailing Address 520 S GRAND AVE #700

City State Zip Code  
LOS ANGELES CA 90071

FEC ID number of contributing federal political committee. **C** C00416636

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 11 / 2007

**Transaction ID:** SA11C.21638

Amount of Each Receipt this Period  
500.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
WAL-MART STORES, INC PAC

Mailing Address 702 SW 8TH STREET

City State Zip Code  
BENTONVILLE AZ 72716

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

**Transaction ID:** SA11C.21789

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 33 / 58</span>			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COMMITTEE)

Mailing Address 1150 17TH STREET NW SUITE 400

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00197749

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2007

**Transaction ID:** SA11C.21791

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
YAHOO! INC POLITICAL ACTION COMMITTEE

Mailing Address 2000 PENNSYLVANIA AVE NW STE 4200

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00380535

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 07 / 2007

**Transaction ID:** SA11C.21768

Amount of Each Receipt this Period  
1000.00

**CONTRIBUTION**

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>49000.00</b>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 58  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
WELLS FARGO BANK

Mailing Address 1000 WEST SAN MARCOS BLVD

City State Zip Code  
SAN MARCOS CA 92069

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2037.89

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 30 / 2007

Transaction ID: SA15.21886

Amount of Each Receipt this Period  
658.97

INTEREST INCOME

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	658.97
<b>TOTAL</b> This Period (last page this line number only) .....	▶	658.97

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>ACTION AWARDS</b></p> <p>Mailing Address 5235 AVENIDA ENCINIAS #D</p> <p>City CARLSBAD State CA Zip Code 92008</p> <p>Purpose of Disbursement EVENT EXPENSE - SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21838</p> <p>Date of Disbursement 08 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 538.75</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>A THYME &amp; PLACE INC</b></p> <p>Mailing Address 2500 DEWITT AVENUE</p> <p>City ALEXANDRIA State VA Zip Code 22301</p> <p>Purpose of Disbursement EVENT EXP - FOOD &amp; EVENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21877</p> <p>Date of Disbursement 09 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 895.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>AT T</b></p> <p>Mailing Address PAYMENT CENTER</p> <p>City SACRAMENTO State CA Zip Code 95887-0001</p> <p>Purpose of Disbursement TELEPHONE EXP</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21861</p> <p>Date of Disbursement 09 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

1683.75

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
BEST BUY

Mailing Address 200 Springtown Way # 400

City State Zip Code  
SAN MARCOS CA 92069

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21815  
Date of Disbursement

07 / 23 / 2007

Amount of Each Disbursement this Period

301.68

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
CAPITOL HILL CLUB

Mailing Address 300 FIRST ST., SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
EVENT EXPENSES - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21802  
Date of Disbursement

07 / 03 / 2007

Amount of Each Disbursement this Period

1132.54

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
CAPITOL HILL CLUB

Mailing Address 300 FIRST ST., SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
EVENT EXPENSES - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21846  
Date of Disbursement

08 / 15 / 2007

Amount of Each Disbursement this Period

296.18

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1730.40

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
CAPITOL HILL CLUB

Mailing Address 300 FIRST ST., SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21876  
Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

295.64

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
CARVERS STEAKS & CHOPS

Mailing Address 11940 BERNARDO PLAZA DR

City SAN DIEGO State CA Zip Code 92128

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21829  
Date of Disbursement

08 / 06 / 2007

Amount of Each Disbursement this Period

785.92

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
KRISTEN CRISTIANO

Mailing Address 505 RUCH DRIVE #30

City SAN MARCOS State CA Zip Code 92078

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21813  
Date of Disbursement

07 / 16 / 2007

Amount of Each Disbursement this Period

572.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

1653.56

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) KRISTEN CRISTIANO	Transaction ID: SB17.21845 Date of Disbursement 08 / 15 / 2007
	Mailing Address 505 RUCH DRIVE #30	Amount of Each Disbursement this Period 575.00
	City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement DATABASE MANAGEMENT Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KRISTEN CRISTIANO	Transaction ID: SB17.21858 Date of Disbursement 09 / 05 / 2007
	Mailing Address 505 RUCH DRIVE #30	Amount of Each Disbursement this Period 422.50
	City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement DATABASE MANAGEMENT Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DNC SPORTSERVICE - PETCO PARK	Transaction ID: SB17.21804 Date of Disbursement 07 / 12 / 2007
	Mailing Address 100 PARK BLVD	Amount of Each Disbursement this Period 672.59
	City SAN DIEGO State CA Zip Code 92101	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement EVENT EXPENSES - FOOD & BEVERAGEO Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1670.09
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) DNC SPORTSERVICE - PETCO PARK <hr/> Mailing Address 100 PARK BLVD <hr/> City SAN DIEGO State CA Zip Code 92101 <hr/> Purpose of Disbursement EVENT EXP - FOOD & BEVERAGE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21881 Date of Disbursement 07 / 20 / 2007 <hr/> Amount of Each Disbursement this Period 620.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) FRANKLIN CONSULTING LLC <hr/> Mailing Address 23 SECOND ST NE #46 <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21806 Date of Disbursement 07 / 12 / 2007 <hr/> Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) FRANKLIN CONSULTING LLC <hr/> Mailing Address 23 SECOND ST NE #46 <hr/> City WASHINGTON State DC Zip Code 20002 <hr/> Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21828 Date of Disbursement 08 / 01 / 2007 <hr/> Amount of Each Disbursement this Period 292.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

**2912.10**

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) FRANKLIN CONSULTING LLC	Transaction ID: SB17.21855
	Mailing Address 23 SECOND ST NE #46	Date of Disbursement MM / DD / YYYY 08 / 28 / 2007
	City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.	Full Name (Last, First, Middle Initial) RHONDA GETCHELL	Transaction ID: SB17.21801
	Mailing Address 1500 SHADOWRIDGE DR APT 54	Date of Disbursement MM / DD / YYYY 07 / 03 / 2007
	City VISTA State CA Zip Code 92081	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement POLITICAL CONSULTANT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.	Full Name (Last, First, Middle Initial) RHONDA GETCHELL	Transaction ID: SB17.21809
	Mailing Address 1500 SHADOWRIDGE DR APT 54	Date of Disbursement MM / DD / YYYY 07 / 12 / 2007
	City VISTA State CA Zip Code 92081	Amount of Each Disbursement this Period 3402.22
	Purpose of Disbursement POLITICAL CONSULTANT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

7902.22

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



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
RHONDA GETCHELL

Transaction ID: SB17.21834  
Date of Disbursement

Mailing Address 1500 SHADOWRIDGE DR APT 54

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	7	7

City VISTA State CA Zip Code 92081

Amount of Each Disbursement this Period

2613.02
---------

Purpose of Disbursement  
POLITICAL CONSULTANT

Category/ Type
-------------------

Candidate Name

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
RHONDA GETCHELL

Transaction ID: SB17.21864  
Date of Disbursement

Mailing Address 1500 SHADOWRIDGE DR APT 54

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	7	7

City VISTA State CA Zip Code 92081

Amount of Each Disbursement this Period

2801.63
---------

Purpose of Disbursement  
POLITICAL CONSULTANT

Category/ Type
-------------------

Candidate Name

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
GOLDEN PACIFIC REAL ESTATE

Transaction ID: SB17.21808  
Date of Disbursement

Mailing Address 809 W SAN MARCOS

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	2		2	0	7	7

City SAN MARCOS State CA Zip Code 92078

Amount of Each Disbursement this Period

2097.56
---------

Purpose of Disbursement  
RENT

Category/ Type
-------------------

Candidate Name

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  
 Other (specify) ▼

State: District:

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

7512.21
---------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
HAMMOND & ASSOCIATES

Transaction ID: SB17.21850  
Date of Disbursement

Mailing Address 801 NORTH PITT STREET  
STE 120

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	0		2	0	0	7

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

2649.23
---------

Purpose of Disbursement  
FUNDRAISING CONSULTANT

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
HAMMOND & ASSOCIATES

Transaction ID: SB17.21857  
Date of Disbursement

Mailing Address 801 NORTH PITT STREET  
STE 120

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	7

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

2551.78
---------

Purpose of Disbursement  
FUNDRAISING CONSULTANT

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
HAMMOND & ASSOCIATES

Transaction ID: SB17.21873  
Date of Disbursement

Mailing Address 801 NORTH PITT STREET  
STE 120

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	7

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

2891.60
---------

Purpose of Disbursement  
FUNDRAISING CONSULTANT

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

8092.61
---------

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

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# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
ED HANNIGAN

Mailing Address 29706 MAXIMILLAN

City MURRIETA State CA Zip Code 92563

Purpose of Disbursement  
EVENT EXP - PHOTOGRAPHY

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21872  
Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

850.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
JUSTIN LEE

Mailing Address 9921 CARMEL MOUNTAIN ROAD #115

City SAN DIEGO State CA Zip Code 92129

Purpose of Disbursement  
CONFERENCE EXP REIM - TRAVEL & HOTEL

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21827  
Date of Disbursement

07 / 24 / 2007

Amount of Each Disbursement this Period

727.31

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
MARIBETH MAHER

Mailing Address 515 COLE RANCH RD

City ENCINITAS State CA Zip Code 92024

Purpose of Disbursement  
In-kind - EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21898  
Date of Disbursement

09 / 16 / 2007

Amount of Each Disbursement this Period

2300.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

3877.31

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
MARY MAHER

Transaction ID: SB17.21894  
Date of Disbursement

Mailing Address 8284 LA JOLLA SHORES DR

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	7

City LA JOLLA State CA Zip Code 92037

Amount of Each Disbursement this Period

2300.00
---------

Purpose of Disbursement  
In-kind - EVENT EXP - FOOD & BEVERAGE

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
MICHAEL J MAHER

Transaction ID: SB17.21896  
Date of Disbursement

Mailing Address 1901 CAMINO VIDA ROBLE #100

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	7

City CARLSBAD State CA Zip Code 92008

Amount of Each Disbursement this Period

519.00
--------

Purpose of Disbursement  
In-kind - EVENT EXP - FOOD & BEVERAGE

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
PATRICK MAHER

Transaction ID: SB17.21892  
Date of Disbursement

Mailing Address 8284 LA JOLLA SHORES DR

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	7

City LA JOLLA State CA Zip Code 92037

Amount of Each Disbursement this Period

2300.00
---------

Purpose of Disbursement  
In-kind - EVENT EXP - FOOD & BEVERAGE

Category/ Type
-------------------

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

5119.00
---------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) DON MCKINNEY	Transaction ID: SB17.21863 Date of Disbursement 09 / 06 / 2007
	Mailing Address 168 FRANCESCA DRIVE	Amount of Each Disbursement this Period 100.00
	City OCEANSIDE State CA Zip Code 92057	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement PALM SPRINGS CONVENTION - REIMBURSEMENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DON MCKINNEY	Transaction ID: SB17.21865 Date of Disbursement 09 / 11 / 2007
	Mailing Address 168 FRANCESCA DRIVE	Amount of Each Disbursement this Period 534.47
	City OCEANSIDE State CA Zip Code 92057	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement CRP CONVENTION EXP REIMBURSEMENT	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) PACIFIC WESTERN BANK (CEDARS BANK)	Transaction ID: SB17.21885 Date of Disbursement 09 / 30 / 2007
	Mailing Address 18500 VON KARMAN AVE STE 550	Amount of Each Disbursement this Period 111.55
	City IRVINE State CA Zip Code 92612	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement BANK CHARGES	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>746.02</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
ROSA MEXICANO

Mailing Address 575 7TH STREET AT F ST NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21859  
Date of Disbursement

09 / 05 / 2007

Amount of Each Disbursement this Period

1710.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
ROSA MEXICANO

Mailing Address 575 7TH STREET AT F ST NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21860  
Date of Disbursement

09 / 05 / 2007

Amount of Each Disbursement this Period

260.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
SAN DIEGO PADRES

Mailing Address PO BOX 122000

City SAN DIEGO State CA Zip Code 92112

Purpose of Disbursement  
EVENT EXPENSES - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21800  
Date of Disbursement

07 / 02 / 2007

Amount of Each Disbursement this Period

925.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2895.00

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
SAN DIEGO PADRES

Mailing Address PO BOX 122000

City SAN DIEGO State CA Zip Code 92112

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21880  
Date of Disbursement

07 / 20 / 2007

Amount of Each Disbursement this Period

375.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
SAN DIEGO POLO CLUB

Mailing Address 14555 EL CAMINO REAL

City RANCHO SANTA FE State CA Zip Code 92067

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21852  
Date of Disbursement

08 / 24 / 2007

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
JULIE SCHRIE

Mailing Address 801 N PITT STREET, STE 120

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
EVENT EXP REIM - CAUCUS ROOM FOOD & BEVE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21825  
Date of Disbursement

07 / 24 / 2007

Amount of Each Disbursement this Period

326.93

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2701.93

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
SOUTH COAST WINERY

Transaction ID: SB17.21867  
Date of Disbursement

Mailing Address 34843 RANCHO CALIFORNIA ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	7	7

City State Zip Code  
TEMECULA CA 92591

Amount of Each Disbursement this Period

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

3266.90
---------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

B.

Full Name (Last, First, Middle Initial)  
SOUTH COAST WINERY

Transaction ID: SB17.21902  
Date of Disbursement

Mailing Address 34843 RANCHO CALIFORNIA ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	7	7

City State Zip Code  
TEMECULA CA 92591

Amount of Each Disbursement this Period

Purpose of Disbursement  
EVENT EXP - FOOD & BEVERAGE

1000.00
---------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

C.

Full Name (Last, First, Middle Initial)  
STAPLES

Transaction ID: SB17.21833  
Date of Disbursement

Mailing Address 235 VISTA VILLAGE DR

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	7		2	0	7	7

City State Zip Code  
VISTA CA 92083

Amount of Each Disbursement this Period

Purpose of Disbursement  
OFFICE SUPPLIES

72.65
-------

Candidate Name

Category/  
Type

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼  
State: District:

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

4339.55
---------

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) STAPLES</p> <p>Mailing Address 235 VISTA VILLAGE DR</p> <p>City VISTA State CA Zip Code 92083</p> <p>Purpose of Disbursement OFFICE SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21837</p> <p>Date of Disbursement 08 / 08 / 2007</p> <p>Amount of Each Disbursement this Period 195.95</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) SYLVESTER MANAGEMENT CORPORATION</p> <p>Mailing Address PO BOX 986</p> <p>City IRMO State SC Zip Code 29063</p> <p>Purpose of Disbursement CONFERENCE FEES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21826</p> <p>Date of Disbursement 07 / 24 / 2007</p> <p>Amount of Each Disbursement this Period 450.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) THE CAUCUS ROOM RESTAURANT</p> <p>Mailing Address 401 9TH STREET NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement EVENT EXPENSES - FOOD &amp; BEVERAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21810</p> <p>Date of Disbursement 07 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1145.95
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>THE CAUCUS ROOM RESTAURANT</b></p> <p>Mailing Address 401 9TH STREET NW</p> <p>City WASHINGTON State DC Zip Code 20004</p> <p>Purpose of Disbursement EVENT EXPENSES - FOOD &amp; BEVERAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21812</p> <p>Date of Disbursement 07 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>THE MONACO GROUP</b></p> <p>Mailing Address 1000 ORTEGA WAY BUILDING C</p> <p>City PLACENTIA State CA Zip Code 92870</p> <p>Purpose of Disbursement PRINTING SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21803</p> <p>Date of Disbursement 07 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 635.30</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>THE MONACO GROUP</b></p> <p>Mailing Address 1000 ORTEGA WAY BUILDING C</p> <p>City PLACENTIA State CA Zip Code 92870</p> <p>Purpose of Disbursement PRINTING SUPPLIES</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.21856</p> <p>Date of Disbursement 08 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 3081.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4216.47</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
THE PAPER MILL STORE

Mailing Address 1545 CORPORATE CTR DR

City SUN PRAIRIE State WI Zip Code 53590

Purpose of Disbursement  
PRINTING MATERIAL - INVITATION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21903

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

975.52

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Mailing Address 1525 EAST VISTA WAY

City VISTA State CA Zip Code 92084

Purpose of Disbursement  
STAMPS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21814

Date of Disbursement

07 / 16 / 2007

Amount of Each Disbursement this Period

820.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Mailing Address 1525 EAST VISTA WAY

City VISTA State CA Zip Code 92084

Purpose of Disbursement  
STAMPS

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21840

Date of Disbursement

08 / 12 / 2007

Amount of Each Disbursement this Period

984.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

2779.52

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
US POSTMASTER

Mailing Address 1525 EAST VISTA WAY

City VISTA State CA Zip Code 92084

Purpose of Disbursement  
BRM PERMIT & PROCESSING FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21875  
Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

725.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)  
VISTA CHAMBER OF COMMERCE

Mailing Address 201 WASHINGTON ST

City VISTA State CA Zip Code 92084

Purpose of Disbursement  
MEMBERSHIP FEE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21847  
Date of Disbursement

08 / 20 / 2007

Amount of Each Disbursement this Period

140.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)  
VISTA CHAMBER OF COMMERCE

Mailing Address 201 WASHINGTON ST

City VISTA State CA Zip Code 92084

Purpose of Disbursement  
SEMINAR

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB17.21874  
Date of Disbursement

09 / 19 / 2007

Amount of Each Disbursement this Period

40.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

905.00

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 53 / 58

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

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NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
WELLS FARGO BANK

Transaction ID: SB17.21884  
Date of Disbursement

Mailing Address 1000 WEST SAN MARCOS BLVD

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	0	7

City State Zip Code  
SAN MARCOS CA 92069

Amount of Each Disbursement this Period

89.64
-------

Purpose of Disbursement  
BANK CHARGES

--

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

89.64

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

61972.33

**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)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
CHRISTOPHER SHAYS FOR CONGRESS COMMITTEE

Transaction ID: SB21.21820

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	7

Mailing Address 98 East Avenue Rear Building  
98 East Avenue Rear Building

Amount of Each Disbursement this Period

1000.00
---------

City Norwalk State CT Zip Code 06851

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
KUHLMAN FOR CONGRESS

Transaction ID: SB21.21818

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	7

Mailing Address 10 GANESVOORT STREET  
SUITE 101

Amount of Each Disbursement this Period

1000.00
---------

City BATH State NY Zip Code 14810

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
PEOPLE WITH HART INC

Transaction ID: SB21.21887

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	7

Mailing Address P.O. Box 435

Amount of Each Disbursement this Period

2000.00
---------

City Wexford State PA Zip Code 15090

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

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

4000.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
ISSA FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
WALSH FOR CONGRESS COMMITTEE

Transaction ID: SB21.21823

Date of Disbursement

Mailing Address 306 WINKWORTH PARKWAY

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	4		2	0	0	7

City SYRACUSE State NY Zip Code 13215

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
CONTRIBUTION

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
JOHN D WHITE

Transaction ID: SB21.21882

Date of Disbursement

Mailing Address 1818 MARKET ST STE 3010

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	2		2	0	0	7

City PHILADELPHIA State PA Zip Code 19103

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
CONTRIBUTION PAYMENT UNAVAILABLE

Category/  
Type

Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

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

1250.00
---------

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

5250.00
---------

**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 56 / 58
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**Transaction ID: SC/10.4350**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) DARRELL ISSA	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 760	
City VISTA State CA ZIP Code 92085	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
750000.00	550000.00	200000.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 2 D D 1 5 Y Y Y Y 2 0 0 0	02/15/2004	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional) .....	<b>200000.00</b>
<b>TOTALS</b> This Period (last page in this line only) .....	<b>.00</b>

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



**SCHEDULE C (FEC Form 3 )**

**LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 57 / 58
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)  
ISSA FOR CONGRESS

**Transaction ID: SC/10.4308**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) DARRELL ISSA	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 760	
City VISTA State CA ZIP Code 92085	

Original Amount of Loan 1300000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1300000.00
---------------------------------------	------------------------------------	---

**TERMS**

Date Incurred MM DD YY 09 29 2000	Date Due 09/29/2004	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
---	------------------------	----------------------------	---

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

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

<b>SUBTOTALS</b> This Period This Page (optional) .....	▶	1300000.00
<b>TOTALS</b> This Period (last page in this line only) .....	▶	1500000.00

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

**Image# 28930765349**

Form/Schedule: **SC/10** (Current loan balance of 200000.00 has been forgiven)

Transaction ID: **SC/10.4350**

Form/Schedule: **SC/10** (Current loan balance of 1300000.00 has been forgiven)

Transaction ID: **SC/10.4308**

\*\*\*\*\*