

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
DOUG LAMALFA COMMITTEE

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	91255.49	512300.98
(b) Total Contribution Refunds (from Line 20(d))	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	91255.49	511300.98
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	239494.91	461795.87
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1753.28
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	239494.91	460042.59
8. Cash on Hand at Close of Reporting Period (from Line 27).....	144691.93	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	25310.96	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

DOUG LAMALFA COMMITTEE

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	13925.99	226300.49
(ii) Unitemized.....	829.50	20824.50
(iii) TOTAL of contributions from individuals ▶	14755.49	247124.99
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	76500.00	265175.99
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	91255.49	512300.98
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	1753.28
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	91255.49	514054.26

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	239494.91	461795.87
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	30000.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	30000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	1000.00
(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	1000.00
21. OTHER DISBURSEMENTS	6230.00	24250.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	245724.91	517045.87

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	299161.35
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	91255.49
25. SUBTOTAL (add Line 23 and Line 24).....	390416.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	245724.91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	144691.93

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

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

FOR LINE NUMBER: PAGE 5 OF 40
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Marina Rocchi

Mailing Address 2550 Valhalla PI

City State Zip Code
Chico CA 95973

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

Name of Employer Occupation
Chico Eye Center Optometrist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2016

Transaction ID : INCA3707

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address 499 Peninsula Dr.

City State Zip Code
LAKE ALMANOR CA 96137

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

Name of Employer Occupation
Coldwell Banker Realtor

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 04 / 2016

Transaction ID : INCA3806

Amount of Each Receipt this Period
 500.00

Memo Item

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

Mailing Address P.O. Box 853

City State Zip Code
EDWARDSVILLE IL 62025

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

Name of Employer Occupation
Fox News Journalist

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : INCA3718

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Frank Rehermann

Mailing Address **PO Box 6**

City **Live Oak** State **CA** Zip Code **95953**

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

Name of Employer self Occupation **rice grower**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 05 / 2016

Transaction ID : INCA3726

Amount of Each Receipt this Period
75.00

Memo Item

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

Mailing Address **1420 Shadow Mountain Ct.**

City **AUBURN** State **CA** Zip Code **95602**

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

Name of Employer n/a Occupation **Not employed**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **2700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : INCA3773

Amount of Each Receipt this Period
1400.00

Memo Item

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

Mailing Address **13193 Carmen Ln.**

City **Chico** State **CA** Zip Code **95973**

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

Name of Employer Self Occupation **Farmer**

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 06 / 2016

Transaction ID : INCA3772

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

2475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Donald Murphy

Mailing Address P.O. Box 237

City State Zip Code
Durham CA 95958

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

Name of Employer Occupation
n/a Not employed

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 08 / 2016

Transaction ID : INCA3796

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 921 French Ave

City State Zip Code
Gridley CA 95948

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

Name of Employer Occupation
self Farmer

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
999.99

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2016

Transaction ID : INCA3815

Amount of Each Receipt this Period
999.99

Memo Item

C. Full Name (Last, First, Middle Initial)
. Forest County Potawatomi Commu

Mailing Address P.O. Box 340

City State Zip Code
CRANDON WI 54520

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

Name of Employer Occupation
Sovereign nation Indian tribe

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2700.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 27 / 2016

Transaction ID : INCA3830

Amount of Each Receipt this Period
2700.00

Memo Item

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

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

4699.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Virginia Holzapfel

Mailing Address P.O. Box 1027

City: WILLOWS State: CA Zip Code: 95988

FEC ID number of contributing federal political committee: C

Name of Employer: Self Occupation: Rancher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 27 / 2016

Transaction ID : INCA3828

Amount of Each Receipt this Period: 500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Frank Salas, Jr.

Mailing Address 419 Scenic Drive

City: Modesto State: CA Zip Code: 95350

FEC ID number of contributing federal political committee: C

Name of Employer: Self-Employed Occupation: Rancher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 04 / 27 / 2016

Transaction ID : INCA3829

Amount of Each Receipt this Period: 1000.00

Memo Item

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

Mailing Address P.O. Box 1537

City: Shafter State: CA Zip Code: 93263

FEC ID number of contributing federal political committee: C

Name of Employer: SELF EMPLOYED - FRED STARRH Occupation: FARMER

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 04 / 27 / 2016

Transaction ID : INCA3831

Amount of Each Receipt this Period: 1000.00

Memo Item

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Francis Wagner

Mailing Address P.O. Box 187

City State Zip Code
DURHAM CA 95938

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

Name of Employer Occupation
Wagner Insurance Insurance broker

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
04 / 27 / 2016

Transaction ID : INCA3833

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 3428 Nouveau Way

City State Zip Code
Rancho Cordova CA 95670

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

Name of Employer Occupation
State of California Manager

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 13 / 2016

Transaction ID : INCA3867

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 13 Pathfinder Way

City State Zip Code
Chico CA 95928

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

Name of Employer Occupation
Self Water Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
501.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 16 / 2016

Transaction ID : INCA3869

Amount of Each Receipt this Period
501.00

Memo Item

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

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

1251.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 40
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Mitch Butler

Mailing Address 3701 Bradley Ln.

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
Natural Resource Results Consultant

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3905

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 515 Roney Trail

City State Zip Code
Chico CA 95973

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

Name of Employer Occupation
Self-Employed Rancher

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : INCA3894

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

1250.00

13925.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA PAC (AGC PAC)

Mailing Address 2300 WILSON BLVD., STE 400

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C C00082917**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : INCA3720

Amount of Each Receipt this Period
1500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lockheed Martin Employees' PAC

Mailing Address 2121 Crystal Dr., #100

City ARLINGTON State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C C00303024**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 05 / 2016

Transaction ID : INCA3719

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Federal Wildland Fire Service Assoc. PAC

Mailing Address P.O. Box 517

City INKOM State ID Zip Code 83245

FEC ID number of contributing federal political committee. **C C00397752**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : INCA3832

Amount of Each Receipt this Period
500.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

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

Mailing Address PO BOX 10134

City Bakersfield State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : INCA3824

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address PO BOX 10134

City Bakersfield State CA Zip Code 93389

FEC ID number of contributing federal political committee. **C** C00428052

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : INCA3825

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
TESORO PETROLEUM CORP. PAC

Mailing Address 19100 RIDGEWOOD PKWY

City San Antonio State TX Zip Code 78259

FEC ID number of contributing federal political committee. **C** C00358366

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2016

Transaction ID : INCA3827

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. USA RICE FEDERATION PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 27 / 2016
Mailing Address 4301 NORTH FAIRFAX DRIVE SUITE 425		Transaction ID : INCA3826
City State Zip Code ARLINGTON VA 22203	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C C00308478	Name of Employer Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3000.00	

Full Name (Last, First, Middle Initial) B. AT&T INC. FEDERAL PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 28 / 2016
Mailing Address 208 S. AKARD ST., STE. 2701		Transaction ID : INCA3838
City State Zip Code Dallas TX 75202	Amount of Each Receipt this Period _____ 1000.00	
FEC ID number of contributing federal political committee. C C00109017	Name of Employer Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00	

Full Name (Last, First, Middle Initial) C. Action Committee for Rural Electrification (ACRE)		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 05 / 2016
Mailing Address 4301 Wilson Blvd.		Transaction ID : INCA3852
City State Zip Code ARLINGTON VA 22203	Amount of Each Receipt this Period _____ 2500.00	
FEC ID number of contributing federal political committee. C C00002972	Name of Employer Occupation	<input type="checkbox"/> Memo Item
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4500.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC (AFIT-PAC)

Mailing Address 1625 PRINCE STREET, STE. 225

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016

Transaction ID : INCA3853

Amount of Each Receipt this Period
 5000.00

Memo Item

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

Mailing Address 1155 F St. NW #400

City WASHINGTON State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016

Transaction ID : INCA3854

Amount of Each Receipt this Period
 5000.00

Memo Item

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

Mailing Address 800 N. LINDBERGH BLVD.

City Saint Louis State MO Zip Code 63167

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2016

Transaction ID : INCA3850

Amount of Each Receipt this Period
 1500.00

Memo Item

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

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

11500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
UNION PACIFIC CORPORATION FUND FOR EFFECTIVE GOVERNMENT

Mailing Address 700 THIRTEENTH ST., NW STE. 350

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 4000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		05		2016

Transaction ID : INCA3851

Amount of Each Receipt this Period
 _____ 2000.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
Honeywell Int'l PAC

Mailing Address 101 Constitution Ave. NW #500 W.

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing federal political committee. **C C00096156**

Name of Employer	Occupation

Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 9000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		09		2016

Transaction ID : INCA3859

Amount of Each Receipt this Period
 _____ 2500.00
 Memo Item

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

Mailing Address 2300 RIVER PLAZA DR.

City	State	Zip Code
Sacramento	CA	95833

FEC ID number of contributing federal political committee. **C C00041954**

Name of Employer	Occupation

Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 5000.00
---	---

Date of Receipt

M M	/	D D	/	Y Y Y Y
05		10		2016

Transaction ID : INCA3865

Amount of Each Receipt this Period
 _____ 1500.00
 Memo Item

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: (check only one)	PAGE 16 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
NEW YORK LIFE INSURANCE PAC

Mailing Address 51 MADISON AVE., ROOM 1109

City NEW YORK State NY Zip Code 10010

FEC ID number of contributing federal political committee. **C** C00158881

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 10 / 2016

Transaction ID : INCA3863

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 1301 K St., NW, #800 West

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00107235

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 16 / 2016

Transaction ID : INCA3870

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address P.O. Box 3440

City HONOLULU State HI Zip Code 96801

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3874

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

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

Mailing Address P.O. Box 23915

City: LITTLE ROCK State: AR Zip Code: 72221

FEC ID number of contributing federal political committee: **C** C00525691

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 05 / 17 / 2016

Transaction ID : INCA3873

Amount of Each Receipt this Period: 1000.00

Memo Item

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

Mailing Address PO BOX 961039

City: FORT WORTH State: TX Zip Code: 76161

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

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 05 / 17 / 2016

Transaction ID : INCA3904

Amount of Each Receipt this Period: 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ERNST & YOUNG PAC

Mailing Address 1101 NEW YORK AVE., NW

City: Washington State: DC Zip Code: 20005

FEC ID number of contributing federal political committee: **C** C00227744

Name of Employer: _____ Occupation: _____

Receipt For: 2016
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 05 / 17 / 2016

Transaction ID : INCA3906

Amount of Each Receipt this Period: 5000.00

Memo Item

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 40
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Nat'l Shooting Sports Foundation PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 N Capitol St. NW #490

City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00480863		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3907

Amount of Each Receipt this Period

1000.00

 Memo Item

B. PG&E Corporation Employees EnergyPAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 Beale St.

City SAN FRANCISCO	State CA	Zip Code 94107
FEC ID number of contributing federal political committee. C C00177469		
Name of Employer	Occupation	
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4750.00	

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3876

Amount of Each Receipt this Period

1000.00

 Memo Item

C. Prosperity Action Inc.
 Full Name (Last, First, Middle Initial)
 Mailing Address 320 1st St. SE

City WASHINGTON	State DC	Zip Code 20003
FEC ID number of contributing federal political committee. C C00377689		
Name of Employer	Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 17 / 2016

Transaction ID : INCA3901

Amount of Each Receipt this Period

5000.00

 Memo Item

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 19 OF 40
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Prosperity Action Inc.

Mailing Address 320 1st St. SE

City WASHINGTON State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3900

Amount of Each Receipt this Period
 5000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Scalise for Congress

Mailing Address P.O. Box 23219

City JEFFERSON State LA Zip Code 70183

FEC ID number of contributing federal political committee. **C C00394957**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3902

Amount of Each Receipt this Period
 2000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE EYE OF THE TIGER PAC

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152

FEC ID number of contributing federal political committee. **C C00467431**

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3903

Amount of Each Receipt this Period
 5000.00

Memo Item

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

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

12000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
Vista Outdoor Inc. Employee Citizenship Fund

Mailing Address 4601 North Fairfax Dr. #1200

City ARLINGTON State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00572156

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3875

Amount of Each Receipt this Period
 1000.00

Memo Item

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

Mailing Address 7555 E. Hampden Ave., #600

City DENVER State CO Zip Code 80231

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

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 17 / 2016

Transaction ID : INCA3877

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS & BROKERS OF AMERICA, INC. PAC

Mailing Address 20 F St. NW #610

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00022343

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date 4000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : INCA3896

Amount of Each Receipt this Period
 1000.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 40
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial)
More Conservatives PAC (MCPAC)

Mailing Address 228 S. Washington St. #115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00540187

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : INCA3895

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 1666 K STREET, NW, STE. 500

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00473652

Name of Employer Occupation

Receipt For: 2016
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 18 / 2016

Transaction ID : INCA3893

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

Memo Item

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

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

6000.00

76500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. EFUNDRAISING CONNECTIONS			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 1225 8TH ST. #425			Amount of Each Disbursement this Period 69.63	
City Sacramento	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Merchant fee		Category/Type 001		
Candidate Name		Transaction ID : EXPB3723		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Public Square Partners			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 1127 11th St., #548			Amount of Each Disbursement this Period 2500.00	
City Sacramento	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Fundraising consulting		Category/Type 003		
Candidate Name		Transaction ID : EXPB3713		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Public Square Partners			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016	
Mailing Address 1127 11th St., #548			Amount of Each Disbursement this Period 757.47	
City Sacramento	State CA	Zip Code 95814	<input type="checkbox"/> Memo Item	
Purpose of Disbursement Online advertising		Category/Type 004		
Candidate Name		Transaction ID : EXPB3711		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3327.10
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)		PAGE 23 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2016
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 274.55
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone svc.	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3714
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Marlys Eatmon		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 1531 3rd Ave.		Amount of Each Disbursement this Period 1250.00
City OLIVEHURST	State CA	
Zip Code 95961	Purpose of Disbursement Campaign consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3717
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 104.88
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3724
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1629.43
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 24 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Marlys Eatmon		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2016
Mailing Address 1531 3rd Ave.		Amount of Each Disbursement this Period 1092.69
City OLIVEHURST	State CA	
Zip Code 95961	Purpose of Disbursement Mileage	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 002	Transaction ID : EXPB3792
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 5.38
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB3805
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gilliard, Blanning & Assoc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 3000.00
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Campaign consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB3789
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4098.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Innovate Media & Strategy			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016		
Mailing Address 3711 37th St. CT. NW			Amount of Each Disbursement this Period 4500.00		
City GIG HARBOR	State WA	Zip Code 98335	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Research		Category/ Type 001	Transaction ID : EXPB3788		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Political Data Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2016		
Mailing Address P. O. Box 59570			Amount of Each Disbursement this Period 675.21		
City Norwalk	State CA	Zip Code 90652	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Voter list		Category/ Type 004	Transaction ID : EXPB3787		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS			Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016		
Mailing Address 1225 8TH ST. #425			Amount of Each Disbursement this Period 3.75		
City Sacramento	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Merchant fee		Category/ Type 001	Transaction ID : EXPB3817		
Candidate Name					
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	5178.96
TOTAL This Period (last page this line number only).....	[Empty Field]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Glenn County Republican Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address P. O. Box 07		Amount of Each Disbursement this Period 300.00
City Artoise	State CA	
Zip Code 95913	Purpose of Disbursement Voter registration	<input type="checkbox"/> Memo Item
Candidate Name Glenn County Republican Party	Category/Type 001	Transaction ID : EXPB3803
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Redding Rodeo Assoc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 12 / 2016
Mailing Address P.O. Box 992048		Amount of Each Disbursement this Period 500.00
City Redding	State CA	
Zip Code 96099	Purpose of Disbursement Display fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : EXPB3804
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chico Republican Women Federated		Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2016
Mailing Address 5768 Bonnie Ln.		Amount of Each Disbursement this Period 15.00
City Paradise	State CA	
Zip Code 95969	Purpose of Disbursement Luncheon	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3808
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	815.00
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 27 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Butte County Clerk		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address 25 County Center Drive		Amount of Each Disbursement this Period 828.57
City Oroville	State CA Zip Code 95965	
Purpose of Disbursement Ballot statement	Category/Type 004	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB3819
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Deluxe Business Forms		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2016
Mailing Address P. O. Box 1186		Amount of Each Disbursement this Period 210.42
City Lancaster	State CA Zip Code 93534	
Purpose of Disbursement Supplies	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB3812
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. David Bauer		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 2150 River Plaza Dr., #150		Amount of Each Disbursement this Period 464.60
City Sacramento	State CA Zip Code 95833	
Purpose of Disbursement Accounting svc.	Category/Type 001	<input type="checkbox"/> Memo Item
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : EXPB3810
State: District:	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	1503.59
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 28 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Stephen Heter		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2016
Mailing Address 1212 Freeman St.		Amount of Each Disbursement this Period 1000.00
City MARYSVILLE	State CA	
Zip Code 95901	Purpose of Disbursement Campaign manager	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB3811
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gilliard, Blanning & Assoc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 44004.75
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Radio advertising	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 004	Transaction ID : EXPB3816
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 65.50
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	Category/ Type 001	Transaction ID : EXPB3823
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	45070.25
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 29 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Gilliard, Blanning & Assoc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2016		
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 1040.00		
City Rocklin	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Radio production		Category/ Type 004			
Candidate Name			Transaction ID : EXPB3818		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. AT&T Mobility			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016		
Mailing Address P. O. Box 537104			Amount of Each Disbursement this Period 129.25		
City Atlanta	State GA	Zip Code 30353	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Phone svc.		Category/ Type 001			
Candidate Name			Transaction ID : EXPB3820		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. CA Voter Guide			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2016		
Mailing Address 20705 S. Western Avenue, #200			Amount of Each Disbursement this Period 6731.00		
City Torrance	State CA	Zip Code 90501	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Mass mail		Category/ Type 004			
Candidate Name			Transaction ID : EXPB3821		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	7900.25
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 30 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Calif. Republican Taxpayers Assoc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2016
Mailing Address 1130 Fremont Blvd. #105		Amount of Each Disbursement this Period 1335.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3834
City SEASIDE State CA Zip Code 93955	Purpose of Disbursement Mass mail Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 004		

Full Name (Last, First, Middle Initial) B. Steinberg and Assoc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2016
Mailing Address 335 Stunt Rd.		Amount of Each Disbursement this Period 14000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3835
City Calabasas State CA Zip Code 91302	Purpose of Disbursement Polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 005		

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 1.80 <input type="checkbox"/> Memo Item Transaction ID : EXPB3844
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Merchant fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) State: District:	
Category/Type 001		

SUBTOTAL of Disbursements This Page (optional).....	15336.80
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 31 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Gilliard, Blanning & Assoc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016		
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 25065.00		
City Rocklin	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Online advertising		Category/ Type 004			
Candidate Name			Transaction ID : EXPB3840		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Political Data Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016		
Mailing Address P. O. Box 59570			Amount of Each Disbursement this Period 247.67		
City Norwalk	State CA	Zip Code 90652	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Voter list		Category/ Type 004			
Candidate Name			Transaction ID : EXPB3841		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Public Square Partners			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2016		
Mailing Address 1127 11th St., #548			Amount of Each Disbursement this Period 2783.01		
City Sacramento	State CA	Zip Code 95814	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Fundraising consulting and expenses		Category/ Type 003			
Candidate Name			Transaction ID : EXPB3843		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	28095.68
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 32 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Chico Republican Women Federated

Full Name (Last, First, Middle Initial)
Mailing Address 5768 Bonnie Ln.

City Paradise State CA Zip Code 95969

Purpose of Disbursement Luncheon

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 04 / 2016

Amount of Each Disbursement this Period: 15.00

Memo Item

Transaction ID : EXPB3845

Category/Type: 001

B. Chase Card Services

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2016

Amount of Each Disbursement this Period: 392.45

Memo Item

Transaction ID : EXPB3849

Category/Type: 001

c. House Office Supply

Full Name (Last, First, Middle Initial)
Mailing Address Longworth House Office Bldg. B-217

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement Flags

Candidate Name

Office Sought: House Senate President

Disbursement For: 2016
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 05 / 05 / 2016

Amount of Each Disbursement this Period: 392.45

Memo Item

Transaction ID : EDTB127EXPB3849

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 407.45

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 33 OF 40			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Gilliard, Blanning & Assoc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 5701 Lonetree Blvd. #301		Amount of Each Disbursement this Period 3000.00
City Rocklin	State CA	
Zip Code 95765	Purpose of Disbursement Campaign consulting	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3847
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 244.53
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Phone svc.	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 001	Transaction ID : EXPB3846
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. The Monaco Group		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2016
Mailing Address 1011 S. Linwood Ave.		Amount of Each Disbursement this Period 11990.08
City Santa Ana	State CA	
Zip Code 92705	Purpose of Disbursement Mass mail	<input type="checkbox"/> Memo Item
Candidate Name	Category/Type 004	Transaction ID : EXPB3856
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	15234.61
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 34 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. The Monaco Group			Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2016	
Mailing Address 1011 S. Linwood Ave.			Amount of Each Disbursement this Period 18356.52	
City Santa Ana	State CA	Zip Code 92705	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Postage		Category/ Type 004		
Candidate Name			Transaction ID : EXPB3855	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. David Bauer			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016	
Mailing Address 2150 River Plaza Dr., #150			Amount of Each Disbursement this Period 955.34	
City Sacramento	State CA	Zip Code 95833	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Accounting svc.		Category/ Type 001		
Candidate Name			Transaction ID : EXPB3862	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) c. Gilliard, Blanning & Assoc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016	
Mailing Address 5701 Lonetree Blvd. #301			Amount of Each Disbursement this Period 72349.75	
City Rocklin	State CA	Zip Code 95765	Memo Item <input type="checkbox"/>	
Purpose of Disbursement Broadcast advertising		Category/ Type 004		
Candidate Name			Transaction ID : EXPB3860	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	91661.61
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 35 OF 40	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Political Data Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2016
Mailing Address P. O. Box 59570		Amount of Each Disbursement this Period 1381.02
City Norwalk	State CA	
Zip Code 90652	Purpose of Disbursement Mailing list	<input type="checkbox"/> Memo Item
Candidate Name	004 Category/ Type	Transaction ID : EXPB3861
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 16.75
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : EXPB3871
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. EFUNDRAISING CONNECTIONS		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2016
Mailing Address 1225 8TH ST. #425		Amount of Each Disbursement this Period 33.07
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Merchant fee	<input type="checkbox"/> Memo Item
Candidate Name	001 Category/ Type	Transaction ID : EXPB3913
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1430.84
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 36 OF 40			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. The Monaco Group			Date of Disbursement M M / D D / Y Y Y Y 05 / 18 / 2016		
Mailing Address 1011 S. Linwood Ave.			Amount of Each Disbursement this Period 17736.77		
City Santa Ana	State CA	Zip Code 92705	Memo Item <input type="checkbox"/>		
Purpose of Disbursement Postage		Category/ Type 004			
Candidate Name			Transaction ID : EXPB3880		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

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

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

SUBTOTAL of Disbursements This Page (optional).....	17736.77
TOTAL This Period (last page this line number only).....	239426.41

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 40
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. Hudson for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address P. O. Box 365		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3801
City CONCORD	State NC	
Zip Code 28027	Purpose of Disbursement 011 Category/ Type	
Candidate Name Richard Hudson	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: NC District: 08	

Full Name (Last, First, Middle Initial) B. Paul Cook for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address P.O. Box 365		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3800
City YUCCA VALLEY	State CA	
Zip Code 92286	Purpose of Disbursement 011 Category/ Type	
Candidate Name Paul Cook	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 08	

Full Name (Last, First, Middle Initial) c. Steve Knight for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2016
Mailing Address P.O. Box 984		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3802
City WILLOWS	State CA	
Zip Code 95988	Purpose of Disbursement 011 Category/ Type	
Candidate Name Steve Knight	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 25	

SUBTOTAL of Disbursements This Page (optional).....	4000.00
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 38 OF 40	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

Full Name (Last, First, Middle Initial) A. TEHAMA COUNTY REPUBLICAN PARTY		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2016
Mailing Address 14342 ST. MARY'S AVE		Amount of Each Disbursement this Period 130.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3822
City Red Bluff	State CA Zip Code 96080	
Purpose of Disbursement Transfer unneeded funds	Category/Type 008	
Candidate Name TEHAMA COUNTY REPUBLICAN PARTY	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. Don Bacon for Congress		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2016
Mailing Address 2819 S. 125th Ave. #362		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3842
City OMAHA	State NE Zip Code 68144	
Purpose of Disbursement	Category/Type 011	
Candidate Name Don Bacon	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: 02	

Full Name (Last, First, Middle Initial) c. Don Bacon for Congress		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2016
Mailing Address 2819 S. 125th Ave. #362		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Memo Item Transaction ID : EXPB3848
City OMAHA	State NE Zip Code 68144	
Purpose of Disbursement	Category/Type 011	
Candidate Name Don Bacon	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NE District: 02	

SUBTOTAL of Disbursements This Page (optional).....	2130.00
TOTAL This Period (last page this line number only).....	6130.00

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

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

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD3885	
Amount Incurred This Period 3003.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3003.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Prevail Strategies	Nature of Debt (Purpose): Fundraising commission and expenses
Mailing Address 400 First St. SE 2nd Fl.	
City State Zip Code WASHINGTON DC 20003	

Outstanding Balance Beginning This Period 0.00	Transaction ID : PAYD3879	
Amount Incurred This Period 8418.35	Payment This Period 0.00	Outstanding Balance at Close of This Period 8418.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Public Square Partners	Nature of Debt (Purpose): Online advertising
Mailing Address 1127 11th St., #548	
City State Zip Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 757.47	Transaction ID : PAYD3710	
Amount Incurred This Period 0.00	Payment This Period 757.47	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)	11421.35
2) TOTALS This Period (last page this line number only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
DOUG LAMALFA COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Monaco Group		Nature of Debt (Purpose): Mass mail
Mailing Address 1011 S. Linwood Ave.		
City State	Zip Code	
Santa Ana CA	92705	

Outstanding Balance Beginning This Period	Transaction ID : PAYD3882	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="13889.61"/>	<input type="text" value="0.00"/>	<input type="text" value="13889.61"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City State	Zip Code	

Outstanding Balance Beginning This Period		
<input type="text"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text"/>	<input type="text"/>	<input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="13889.61"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="25310.96"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="25310.96"/>