

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

MCCLINTOCK FOR CONGRESS

ADDRESS (number and street) 2150 RIVER PLAZA DR. #150

Check if different than previously reported. (ACC)

SACRAMENTO

CA

95833

2. **FEC IDENTIFICATION NUMBER** ▼

C C00446815

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

CA

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)

Election on 06 / 05 / 2012 in the State of CA

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

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

Election on 06 / 05 / 2012 in the State of CA

5. Covering Period

04 / 01 / 2011

through

06 / 30 / 2011

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 David Bauer

Signature of Treasurer David Bauer

[Electronically Filed]

Date

01 / 17 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**MCCLINTOCK FOR CONGRESS**

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))....	137787.85	208113.68
(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)) .....	137787.85	208113.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	66239.18	201353.70
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	2854.73
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	66239.18	198498.97
8. Cash on Hand at Close of Reporting Period (from Line 27).....	273341.39	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	5000.00	

**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

**MCCLINTOCK FOR CONGRESS**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	56719.00	87744.00
(ii) Unitemized.....	70921.00	109826.77
(iii) TOTAL of contributions from individuals ▶	127640.00	197570.77
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	10147.85	10542.91
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	137787.85	208113.68
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	2854.73
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	137787.85	210968.41

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	66239.18	201353.70
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	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
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 .....	30000.00	80000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	96239.18	281353.70

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	231792.72
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	137787.85
25. SUBTOTAL (add Line 23 and Line 24).....	369580.57
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	96239.18
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	273341.39

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A  
Transaction ID :

To update totals from amendment of prior period

Form/Schedule:  
Transaction ID:

**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 96
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS MARION MONTAPERT**

Mailing Address 41 ROYAL ST GEORGE

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2011

**Transaction ID : INCA79446**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 01 / 2011

**Transaction ID : INCA80179**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 9 REATA LN

City State Zip Code  
ROLLING HILLS CA 90274

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

Name of Employer Occupation  
SHULTZ STEEL CO VP & GEN MGR.

Receipt For: 2012  
 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 / 2011

**Transaction ID : INCA79448**

Amount of Each Receipt this Period  
250.00

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

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

780.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SOFIA MORGAN**

Mailing Address 43761 ABELOE TER

City: FREMONT State: CA Zip Code: 94539

FEC ID number of contributing federal political committee: C

Name of Employer: LMSSC Occupation: SYSTEMS INTEGRATION

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 02 / 2011

**Transaction ID : INCA79454**

Amount of Each Receipt this Period: 250.00

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

Mailing Address 850 WIXFORD WAY

City: SACRAMENTO State: CA Zip Code: 95864

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 04 / 04 / 2011

**Transaction ID : INCA79465**

Amount of Each Receipt this Period: 2500.00

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

Mailing Address 115 STONY RIDGE CT

City: HILLSDALE State: MI Zip Code: 49242

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 04 / 04 / 2011

**Transaction ID : INCA79510**

Amount of Each Receipt this Period: 250.00

**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 8 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT FERGUSON**

Mailing Address 23072 LAKE CENTER DR STE 205

City LAKE FOREST State CA Zip Code 92630

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

Name of Employer BOB FERGUSON - INDEPENDENT Occupation OIL & GAS EXPLORATION/PRODUCTI

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2011

**Transaction ID : INCA79463**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 525 E MAGNOLIA BLVD APT C

City BURBANK State CA Zip Code 91501

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2011

**Transaction ID : INCA79456**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 518 N HANOVER ST

City ANAHEIM State CA Zip Code 92801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2011

**Transaction ID : INCA79540**

Amount of Each Receipt this Period  
 100.00

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

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

2100.00



**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. LEAH JEFFRIES**

Mailing Address 4805 ZAKON RD

City State Zip Code  
TORRANCE CA 90505

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2011

**Transaction ID : INCA79576**

Amount of Each Receipt this Period  
300.00

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

Mailing Address PO BOX 9529

City State Zip Code  
NEWPORT BEACH CA 92658

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

Name of Employer Occupation  
SELF EMPLOYED AUTHOR/WRITER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2011

**Transaction ID : INCA79462**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO BOX 9529

City State Zip Code  
NEWPORT BEACH CA 92658

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

Name of Employer Occupation  
NONE HOUSEWIFE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 04 / 2011

**Transaction ID : INCA79461**

Amount of Each Receipt this Period  
2500.00

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

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

5300.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MALCOLM MCQUEEN**

Mailing Address 1755 LA COSTA MEADOWS DR

City SAN MARCOS	State CA	Zip Code 92078
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2011

**Transaction ID : INCA79579**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 347 AVENUE F

City REDONDO BEACH	State CA	Zip Code 90277
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FEC ID number of contributing federal political committee. **C**

Name of Employer SIOULD PROJECTIONS	Occupation ENGINEER
--	------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 04 / 2011

**Transaction ID : INCA79634**

Amount of Each Receipt this Period  
100.00

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

Mailing Address PO BOX 10274

City SANTA ANA	State CA	Zip Code 92711
-------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2012  
 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 / 2011

**Transaction ID : INCA79464**

Amount of Each Receipt this Period  
1000.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 11 OF 96  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CARL LONG**

Mailing Address 237 TIN CUP RD

City State Zip Code  
DARBY MT 59829

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2011

**Transaction ID : INCA79645**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 29821 PACIFIC COAST HWY

City State Zip Code  
MALIBU CA 90265

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 05 / 2011

**Transaction ID : INCA79636**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 3490 BLACK HAWK RD

City State Zip Code  
LAFAYETTE CA 94549

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : INCA79711**

Amount of Each Receipt this Period  
250.00

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

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

550.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BARBARA DOUMAS**

Mailing Address 1207 W FORT ST APT 104

City State Zip Code  
BOISE ID 83702

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : INCA79661**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 16623 MCCOURTNEY RD

City State Zip Code  
GRASS VALLEY CA 95949

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
340.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : INCA79727**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 4100 FOLSOM BLVD UNIT 7D

City State Zip Code  
SACRAMENTO CA 95819

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 12 / 2011

**Transaction ID : INCA79659**

Amount of Each Receipt this Period  
200.00

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

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

1350.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**H. BRUCE HANES**

Mailing Address 4286 COACHMAN CIR

City WESTLAKE VILLAGE State CA Zip Code 91362

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

Name of Employer HANES INVESTMENT REALTY INC. Occupation REAL ESTATE BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 12 / 2011**

**Transaction ID : INCA79706**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 16156 GREENWOOD RD

City MONTE SERENO State CA Zip Code 95030

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2011**

**Transaction ID : INCA79749**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address PO BOX 7066

City CARMEL State CA Zip Code 93921

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2011**

**Transaction ID : INCA79756**

Amount of Each Receipt this Period  
**300.00**

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

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

**800.00**

**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 14 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY MACKINNON**

Mailing Address 3753 OLIVER ST NW

City State Zip Code  
WASHINGTON DC 20015

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

Name of Employer Occupation  
RYAN PHILLIPS LOBBYIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2011

**Transaction ID : INCA79807**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 11762 LAS PALMAS DR

City State Zip Code  
SANTA ANA CA 92705

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2011

**Transaction ID : INCA79769**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 21 / 2011

**Transaction ID : INCA79857**

Amount of Each Receipt this Period  
30.00

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

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

730.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PATRICIA AMTOWER**

Mailing Address PO BOX 2456

City RANCHO SANTA FE State CA Zip Code 92067

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2011

**Transaction ID : INCA79883**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 2164 HIGHGATE RD

City WESTLAKE VILLAGE State CA Zip Code 91361

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

Name of Employer THE COMDYN GROUP Occupation MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2011

**Transaction ID : INCA79868**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 22 / 2011

**Transaction ID : INCA79873**

Amount of Each Receipt this Period  
 500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**HENRY WALTHER M.D.**

Mailing Address 6845 RANCHO LOS PAVOS LN

City State Zip Code  
GRANITE BAY CA 95746

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

Name of Employer Occupation  
CASE MEDICAL GROUP PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 24 / 2011

**Transaction ID : INCA79858**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 21 / 2011

**Transaction ID : INCA79990**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 4030 CANONERO CT

City State Zip Code  
FAIR OAKS CA 95628

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

Name of Employer Occupation  
RESOURCE CAPITAL CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 23 / 2011

**Transaction ID : INCA79942**

Amount of Each Receipt this Period  
2000.00

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

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

2280.00



**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DR. JOHN HARTFORD M.D.**

Mailing Address 1400 MONTEGO

City State Zip Code  
WALNUT CREEK CA 94598

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NONE RETIRED PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA79941**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**HENRY WALTHER M.D.**

Mailing Address 6845 RANCHO LOS PAVOS LN

City State Zip Code  
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CASE MEDICAL GROUP PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA79991**

Amount of Each Receipt this Period

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

Mailing Address 5334 MOUNTAIN SPRINGS RANCH RD

City State Zip Code  
LA VERNE CA 91750

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF EMPLOYED REALTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA79959**

Amount of Each Receipt this Period

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

**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 18 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS DWELLE**

Mailing Address 1420 SHADOW MOUNTAIN CT

City State Zip Code  
AUBURN CA 95602

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

Name of Employer Occupation  
NELLA OIL COMPANY GENERAL PARTNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 01 / 2011

**Transaction ID : INCA80059**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 131 S VISTA ST

City State Zip Code  
LOS ANGELES CA 90036

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80104**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 4179 E 3RD AVE

City State Zip Code  
NAPA CA 94558

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

Name of Employer Occupation  
GENERAL EQUIPMENT OWNER - EQUIPMENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80050**

Amount of Each Receipt this Period  
100.00

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

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

1650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. HAZEL HART**

Mailing Address 842 MUIRLANDS VISTA WAY

City LA JOLLA State CA Zip Code 92037

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80003**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 518 N HANOVER ST

City ANAHEIM State CA Zip Code 92801

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80125**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 340 W CLARK ST

City UPLAND State CA Zip Code 91784

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

Name of Employer ROLYN OPTICS COMPANY Occupation BUSINESS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80009**

Amount of Each Receipt this Period  
**150.00**

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

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

**450.00**

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT STICKEL**

Mailing Address 2666 DOVE ST

City SAN DIEGO State CA Zip Code 92103

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80052**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 12594 CAMINO EMPARRADO

City SAN DIEGO State CA Zip Code 92128

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80001**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 6373 W 78TH ST

City LOS ANGELES State CA Zip Code 90045

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA79998**

Amount of Each Receipt this Period  
1000.00

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

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

1500.00

**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 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID PLATTER**

Mailing Address 3404 BLACK HAWK RD

City LAFAYETTE State CA Zip Code 94549

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 08 / 2011

**Transaction ID : INCA81324**

Amount of Each Receipt this Period  
 299.00

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

Mailing Address 6915 GULL CT

City VENTURA State CA Zip Code 93003

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80474**

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
**DONALD BOUCHARD M.D.**

Mailing Address 140 DAWN RIVER WAY

City FOLSOM State CA Zip Code 95630

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80208**

Amount of Each Receipt this Period  
 100.00

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

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

599.00

**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 22 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM BUDGE**

Mailing Address 65 DOWNEY WAY

City Hillsborough State CA Zip Code 94010

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80400**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 7856 RANCHITO AVE

City Panorama City State CA Zip Code 91402

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80204**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 1822 BEVERLY GLEN DR

City Santa Ana State CA Zip Code 92705

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

Name of Employer NONE Occupation RETIRED PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80573**

Amount of Each Receipt this Period  
**100.00**

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

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

**500.00**

**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 23 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN GILCREST**

Mailing Address 26026 ADAMOR RD

City CALABASAS State CA Zip Code 91302

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80477**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 4286 COACHMAN CIR

City WESTLAKE VILLAGE State CA Zip Code 91362

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

Name of Employer HANES INVESTMENT REALTY INC. Occupation REAL ESTATE BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80454**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 970 CORTE LA CIENEGA

City VENTURA State CA Zip Code 93006

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

Name of Employer TAFT ELECTRIC CO Occupation CONTRACTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80596**

Amount of Each Receipt this Period  
 500.00

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

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

1050.00

**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 24 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES HERLEY**

Mailing Address **PO BOX 7397**

City **LONG BEACH** State **CA** Zip Code **90807**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 09 / 2011**

**Transaction ID : INCA80305**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address **2100 JACKSON ST**

City **SAN FRANCISCO** State **CA** Zip Code **94115**

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

Name of Employer **MK ENTERPRISES** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 09 / 2011**

**Transaction ID : INCA80235**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address **48 SHADOWPLAY**

City **IRVINE** State **CA** Zip Code **92620**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 09 / 2011**

**Transaction ID : INCA80490**

Amount of Each Receipt this Period  
**500.00**

**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 25 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PETER OLMSTEAD**

Mailing Address 1648 SAN ONOFRE DR

City State Zip Code  
PACIFIC PALISADES CA 90272

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

Name of Employer Occupation  
WEDBUSH MORGAN SECURITIES FINANCIAL ADVISOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80580**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 18 OLD COURSE DR

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
PERRICONE INVESTMENTS CFO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80592**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1109 EMERALD BAY

City State Zip Code  
LAGUNA BEACH CA 92651

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80322**

Amount of Each Receipt this Period  
500.00

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

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

1000.00

**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 26 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN RODGERS**

Mailing Address 5440 WASHINGTON ST

City NAPA State CA Zip Code 94558

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

Name of Employer NONE Occupation RETIRED MARINE ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80353**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 20525 NORDHOFF ST

City CHATSWORTH State CA Zip Code 91311

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

Name of Employer LUMBER CITY CORP. Occupation PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80595**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. W. LEONARD SEELEY**

Mailing Address 10351 KENWOOD DR

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 09 / 2011

**Transaction ID : INCA80450**

Amount of Each Receipt this Period  
250.00

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

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

800.00

**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 27 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY SKINNER**

Mailing Address **PO BOX 7007**

City **NORTHRIDGE** State **CA** Zip Code **91327**

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

Name of Employer **PRISM MANAGEMENT** Occupation **ACTUARY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 09 / 2011**

**Transaction ID : INCA80589**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address **2197 SUTTER VIEW LN**

City **LINCOLN** State **CA** Zip Code **95648**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 09 / 2011**

**Transaction ID : INCA80436**

Amount of Each Receipt this Period  
**750.00**

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

Mailing Address **7030 BURRO AVE**

City **INYOKERN** State **CA** Zip Code **93527**

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

Name of Employer **SELF EMPLOYED** Occupation **NEC BUSINESS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2011**

**Transaction ID : INCA80662**

Amount of Each Receipt this Period  
**200.00**

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

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

**1950.00**

**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 28 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENDALL MILLER**

Mailing Address 7350 WAKEFIELD AVE

City REEDLEY State CA Zip Code 93654

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

Name of Employer KENCAROL, INC. Occupation FARM MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2011

**Transaction ID : INCA80621**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address PO BOX 10090

City TERRA BELLA State CA Zip Code 93270

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2011

**Transaction ID : INCA80663**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address 2669 YORKTON DR

City MOUNTAIN VIEW State CA Zip Code 94040

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80721**

Amount of Each Receipt this Period  
**500.00**

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

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

**3250.00**

**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 29 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PAUL FLEISCHMAN**

Mailing Address 16623 MCCOURTNEY RD

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **340.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80673**

Amount of Each Receipt this Period  
**150.00**

**B.** Full Name (Last, First, Middle Initial)  
**DR. JOHN HARTFORD M.D.**

Mailing Address 1400 MONTEGO

City WALNUT CREEK State CA Zip Code 94598

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

Name of Employer NONE Occupation RETIRED PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80670**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address PO BOX 7066

City CARMEL State CA Zip Code 93921

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80688**

Amount of Each Receipt this Period  
**400.00**

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

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

**700.00**

**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 30 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NIKOLAUS SCHOENBERGER**

Mailing Address 29821 PACIFIC COAST HWY

City MALIBU State CA Zip Code 90265

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80854**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 2055 VIA VISALIA

City PALOS VERDES ESTAT State CA Zip Code 90274

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80677**

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
**LT. COL. JAMES STANHOPE USAF R**

Mailing Address 2346 CASTILLEJO WAY

City FREMONT State CA Zip Code 94539

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80789**

Amount of Each Receipt this Period  
250.00

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

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

1000.00

**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 31 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. BEATRICE WEBB**

Mailing Address 11762 LAS PALMAS DR

City State Zip Code  
SANTA ANA CA 92705

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80715**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 7970 S LAKE CIR

City State Zip Code  
GRANITE BAY CA 95746

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2011

**Transaction ID : INCA80906**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 4100 FOLSOM BLVD UNIT 7D

City State Zip Code  
SACRAMENTO CA 95819

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 17 / 2011

**Transaction ID : INCA80888**

Amount of Each Receipt this Period  
200.00

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

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

1650.00

**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 32 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**BARNUM TIMBER COMPANY**

Mailing Address PO BOX 1365

City State Zip Code  
EUREKA CA 95502

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

Name of Employer Occupation  
SOLE PROP.

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 20 / 2011

**Transaction ID : INCA80895**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Nelson Family Trust Dtd 2-14-97**

Mailing Address 10933 TRADE CENTER DR STE 106

City State Zip Code  
RANCHO CORDOVA CA 95670

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 20 / 2011

**Transaction ID : INCA80900**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
240.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 21 / 2011

**Transaction ID : INCA81336**

Amount of Each Receipt this Period  
30.00

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

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

530.00



**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 33 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN NAGLE**

Mailing Address 960 VILLA DEL SOL

City State Zip Code  
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ENVISION PHARMACEUTICAL HOILDINGS, IN PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA80907**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**SNIDER EXECUTIVE OFFICE, AN UNINCORPORAT**

Mailing Address 5150 MADISON AVE

City State Zip Code  
SACRAMENTO CA 95841

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA81142**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**HENRY WALTHER M.D.**

Mailing Address 6845 RANCHO LOS PAVOS LN

City State Zip Code  
GRANITE BAY CA 95746

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CASE MEDICAL GROUP PHYSICIAN

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA81338**

Amount of Each Receipt this Period

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

**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 34 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEITH MILLER**

Mailing Address 16760 WINCHESTER CLUB DR

City State Zip Code  
MEADOW VISTA CA 95722

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

Name of Employer Occupation  
SUBWAY FRANCHISE BUSINESS OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2011

**Transaction ID : INCA80923**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 15 CLARK DR

City State Zip Code  
SAN MATEO CA 94401

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

Name of Employer Occupation  
AUDREY BELL INC CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81021**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 445 OAK HILL TER

City State Zip Code  
LOMPOC CA 93436

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80946**

Amount of Each Receipt this Period  
100.00

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

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

600.00

**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 35 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH CAMPBELL**

Mailing Address 3636 MCCOURTNEY RD

City State Zip Code  
LINCOLN CA 95648

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

Name of Employer Occupation  
KENNETH WADE CAMPBELL INVESTMENTS

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81141**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 1541 GLENCREST DR

City State Zip Code  
SAN JOSE CA 95118

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

Name of Employer Occupation  
LOCKHEED MARTIN ESTIMATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81076**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 356 TOPAZ ST

City State Zip Code  
REDWOOD CITY CA 94062

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81097**

Amount of Each Receipt this Period  
300.00

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

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

1800.00

**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 36 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. LYLE JONES**

Mailing Address 1310 E OCEAN BLVD UNIT 201

City State Zip Code  
LONG BEACH CA 90802

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81043**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1600 W HILLSDALE BLVD

City State Zip Code  
SAN MATEO CA 94402

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

Name of Employer Occupation  
LISI CEO

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80978**

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. FREDERICK MIELKE JR.**

Mailing Address 23300 VIA ESPLENDOR UNIT 57

City State Zip Code  
CUPERTINO CA 95014

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80973**

Amount of Each Receipt this Period  
400.00

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

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

2100.00

**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 37 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. WILLIAM MOERSHEL**

Mailing Address 2090 CHARGER DR

City SAN JOSE State CA Zip Code 95131

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81005**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 12861 CHATSWORTH LN

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80937**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address PO BOX 159

City MEADOW VISTA State CA Zip Code 95722

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

Name of Employer SELF Occupation ARCHITECT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80986**

Amount of Each Receipt this Period  
 300.00

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

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

900.00

**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 38 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. NANCY ROTH**

Mailing Address 8545 CARMEL VALLEY RD

City State Zip Code  
CARMEL CA 93923

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA80966**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. HERMAN ROWLAND SR,**

Mailing Address 1 JELLY BELLY LN

City State Zip Code  
FAIRFIELD CA 94533

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

Name of Employer Occupation  
JELLY BELLY CANDY CO. CHAIRMAN OF THE BOARD

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81004**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 3760 J ST

City State Zip Code  
EUREKA CA 95503

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 27 / 2011

**Transaction ID : INCA81001**

Amount of Each Receipt this Period  
**250.00**

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

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

**1350.00**

**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 39 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MR. R. ZINSER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 27 / 2011
Mailing Address 3158 ORLEANS E		<b>Transaction ID : INCA81113</b>
City SAN DIEGO	State CA	Zip Code 92110
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>WILLIAM ALLEN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 28 / 2011
Mailing Address 1331 C ST		<b>Transaction ID : INCA81232</b>
City SACRAMENTO	State CA	Zip Code 95814
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1250.00	
Name of Employer AMADOR STAGE LINES	Occupation PRESIDENT	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) <b>MR. WARDELL CONNERLY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 06 / 29 / 2011
Mailing Address 2215 21ST ST		<b>Transaction ID : INCA81268</b>
City SACRAMENTO	State CA	Zip Code 95818
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer CONNERLY & ASSOC. INC.	Occupation CEO	
Receipt For: 2012 <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).....	2250.00
<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 40 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**FATOHLLAH DASTMALCHI**

Mailing Address 1098 BEVINGER DR

City State Zip Code  
EL DORADO HILLS CA 95762

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

Name of Employer Occupation  
ST. OF CALIF. ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2011

**Transaction ID : INCA81274**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 8012 CHRIS CT

City State Zip Code  
GRANITE BAY CA 95746

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2011

**Transaction ID : INCA81271**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 8130 REDWOOD LKN

City State Zip Code  
GRANITE BAY CA 95746

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

Name of Employer Occupation  
SELF EMPLOYED CPA

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2011

**Transaction ID : INCA81280**

Amount of Each Receipt this Period  
300.00

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

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

1100.00



**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 41 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DON CARROLL**

Mailing Address 2290 BRENNANS RD

City State Zip Code  
NEWCASTLE CA 95658

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

Name of Employer Occupation  
WESTERN ENGINEERING CONTRACTORS PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81267**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address 5029 JACOBS CT

City State Zip Code  
OAK PARK CA 91377

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

Name of Employer Occupation  
SECURITY DOOR CONTROLS MFG SECURITY HDWE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81168**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 237 TIN CUP RD

City State Zip Code  
DARBY MT 59829

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81190**

Amount of Each Receipt this Period  
100.00

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

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

1600.00

**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 42 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN MUNROE**

Mailing Address **347 AVENUE F**

City **REDONDO BEACH** State **CA** Zip Code **90277**

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

Name of Employer **SIOULD PROJECTIONS** Occupation **ENGINEER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2011**

**Transaction ID : INCA81201**

Amount of Each Receipt this Period  
**100.00**

**B.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH O'BRIEN**

Mailing Address **4372 RHONE CT**

City **LOOMIS** State **CA** Zip Code **95650**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2011**

**Transaction ID : INCA81281**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address **4520 ADELAIDA RD**

City **PASO ROBLES** State **CA** Zip Code **93446**

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

Name of Employer **RE/MAX PARKSIDE** Occupation **R.E. BROKER, RANCHER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2011**

**Transaction ID : INCA81216**

Amount of Each Receipt this Period  
**250.00**

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

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

**600.00**

**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 43 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILMA SINCLAIR**

Mailing Address 764 SUTRO AVE

City NOVATO State CA Zip Code 94947

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81192**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address 3196 ALLEGHENY CT

City WESTLAKE VILLAGE State CA Zip Code 91362

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81179**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address PO BOX 298

City GREENVILLE State CA Zip Code 95947

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

Name of Employer EVERGREEN MARKETS INC Occupation SECRETARY/TREASURER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81187**

Amount of Each Receipt this Period  
**500.00**

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

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

**950.00**

**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 44 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN WEST**

Mailing Address 561 TOPEKA LN

City VACAVILLE State CA Zip Code 95687

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2011

**Transaction ID : INCA81176**

Amount of Each Receipt this Period  
500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

56719.00

**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 45 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2011

**Transaction ID : INCA79802**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1701 JFK BLVD

City State Zip Code  
PHILADELPHIA PA 19103

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2011

**Transaction ID : INCA79805**

Amount of Each Receipt this Period  
2000.00

**C.** Full Name (Last, First, Middle Initial)  
**NATL ASSN OF INS & FIN ADV PAC**

Mailing Address 2901 TELESTAR CT

City State Zip Code  
FALLS CHURCH VA 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
04 / 18 / 2011

**Transaction ID : INCA79803**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

**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 46 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**OCCIDENTAL PETROLEUM CORP. PAC**

Mailing Address 10889 WILSHIRE BLVD

City State Zip Code  
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee. **C** C00083857

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 18 / 2011

**Transaction ID : INCA79804**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL PAC**

Mailing Address 208 S AKARD ST STE 3521

City State Zip Code  
DALLAS TX 75202

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 / 26 / 2011

**Transaction ID : INCA79832**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AMERICAN BANKERS ASSOCIATION PAC**

Mailing Address 1120 CONNECTICUT AVE NW

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80155**

Amount of Each Receipt this Period  
 1500.00

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

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

3500.00

**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 47 OF 96
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CA RICE INDUSTRY ASN FUND**

Mailing Address 801 FOLSOM BLVD STE 172

City State Zip Code  
SACRAMENTO CA 95826

FEC ID number of contributing federal political committee. **C C00362624**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 03 / 2011

**Transaction ID : INCA80154**

Amount of Each Receipt this Period  
1250.00

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

Mailing Address PO BOX 15245

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C C00009704**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
792.91

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2011

**Transaction ID : NONA80880**

Amount of Each Receipt this Period  
397.85

BROADCAST FAX

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

Mailing Address 2301 M ST NW STE 300

City State Zip Code  
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C C00161570**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 14 / 2011

**Transaction ID : INCA80887**

Amount of Each Receipt this Period  
750.00

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

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

2397.85

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

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

FOR LINE NUMBER: PAGE 48 OF 96  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**AMERICANS IN CONTACT PAC**

Mailing Address 13800 COPPERMINE RD

City State Zip Code  
HERNDON VA 20171

FEC ID number of contributing federal political committee. **C** C00455444

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 29 / 2011

**Transaction ID : INCA81273**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

250.00

10147.85



**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 49 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 47.55
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB79833</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 66.54
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB79834</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGNER BY PROTUS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2011
Mailing Address 685 CATHCARD ST. #300		Amount of Each Disbursement this Period 1175.00
City Montreal	State QC	
Zip Code 317	Purpose of Disbursement BROADCAST E-MAIL	<b>Transaction ID : EXPB79847</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1289.09
<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)	PAGE 50 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 6.43
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB79835
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 155.71
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement BANK FEES	
Candidate Name		Transaction ID : EXPB79856
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 15.46
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB79836
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	177.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2011
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 125.40 <b>Transaction ID : EXPB79848</b>
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011
Mailing Address P. O. BOX 60017		Amount of Each Disbursement this Period 98.44 <b>Transaction ID : EXPB79630</b>
City LOS ANGELES	State CA	
Zip Code 90060	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. FIA CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 219.58 <b>Transaction ID : EXPB79629</b>
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	443.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USAIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 25.00
City Sacramento	State CA Zip Code 95838	
Purpose of Disbursement AIRFARE	Category/Type 002	Transaction ID : EDTB214EXPB79629 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 60.07
City DALLAS	State TX Zip Code 74266	
Purpose of Disbursement PHONE SVC	Category/Type 001	Transaction ID : EDTB215EXPB79629 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PITNEY BOWES</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011
Mailing Address P. O. BOX 856390		Amount of Each Disbursement this Period 41.27
City LOUISVILLE	State KY Zip Code 40295	
Purpose of Disbursement POSTAGE	Category/Type 001	Transaction ID : EDTB216EXPB79629 <b>[MEMO ITEM]</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HYATT REGENCY</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011	
Mailing Address 1203 L ST.			Amount of Each Disbursement this Period 15.75	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EDTB217EXPB79629	
Purpose of Disbursement MEETING		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. SUREWEST</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011	
Mailing Address P. O. BOX 30697			Amount of Each Disbursement this Period 208.34	
City LOS ANGELES	State CA	Zip Code 90030	Transaction ID : EXPB79628	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. VOTE RITE SYSTEMS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2011	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 1194.20	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB79626	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1402.54
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.50	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79837	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. STOR N LOK</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2011	
Mailing Address 21 MASSIE CT.			Amount of Each Disbursement this Period 140.00	
City SACRAMENTO	State CA	Zip Code 95828	Transaction ID : EXPB79849	
Purpose of Disbursement STORAGE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.85	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79838	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	143.35
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PUBLIC STORAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2011	
Mailing Address 715 CIRBY WAY			Amount of Each Disbursement this Period 61.00	
City Roseville	State CA	Zip Code 95678	Transaction ID : EXPB79851	
Purpose of Disbursement STORAGE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. JON HUEY</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2011	
Mailing Address 2124 STEWART CIR.			Amount of Each Disbursement this Period 1781.61	
City WOODLAND	State CA	Zip Code 95776	Transaction ID : EXPB79654	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 3.35	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79839	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1845.96
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2011		
Mailing Address 300 FIRST ST. SE			Amount of Each Disbursement this Period 253.81		
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : EXPB79852		
Purpose of Disbursement FUNDRAISING DINNER		Category/ Type 003			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2011		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 13.68		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79840		
Purpose of Disbursement MERCHANT FEE		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2011		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.96		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79841		
Purpose of Disbursement MERCHANT FEE		Category/ Type 001			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	268.45
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.85 <b>Transaction ID : EXPB79842</b>
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 6.68 <b>Transaction ID : EXPB79843</b>
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.85 <b>Transaction ID : EXPB79844</b>
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8.38
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 96		
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 220.63 <b>Transaction ID : EXPB79822</b>
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 46.88 <b>Transaction ID : EXPB79823</b>
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 115.08 <b>Transaction ID : EXPB79821</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 96		
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 572.70 <b>Transaction ID : EXPB79819</b>
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMPLOYMENT DEVELOPMENT DEPT.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 270.28 <b>Transaction ID : EXPB79817</b>
City SACRAMENTO State CA Zip Code 94230	Purpose of Disbursement TAXES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB79816</b>
City WOODLAND State CA Zip Code 95776	Purpose of Disbursement PAYROLL Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2624.59
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INTERNAL REVENUE SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address		Amount of Each Disbursement this Period 1549.00
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	<b>Transaction ID : EXPB79818</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. STATE COMPENSATION INSURANCE FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 28 / 2011
Mailing Address P. O. BOX 9102		Amount of Each Disbursement this Period 11.45
City Pleasanton	State CA	
Zip Code 94566	Purpose of Disbursement INSURANCE	<b>Transaction ID : EXPB79820</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DELUXE BUSINESS FORMS</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2011
Mailing Address P. O. BOX 742572		Amount of Each Disbursement this Period 201.02
City CINCINNATI	State OH	
Zip Code 45274	Purpose of Disbursement SUPPLIES	<b>Transaction ID : EXPB79855</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1761.47
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.52	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79845	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.40	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79846	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGNER BY PROTUS</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2011	
Mailing Address 685 CATHCARD ST. #300			Amount of Each Disbursement this Period 1175.00	
City Montreal	State QC	Zip Code 317	Transaction ID : EXPB80164	
Purpose of Disbursement BROADCAST E-MAIL		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1177.92
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 02 / 2011	
Mailing Address 600 PENNSYLVANIA AVE. #330			Amount of Each Disbursement this Period 211.02	
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB79824	
Purpose of Disbursement MEETINGS		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T MOBILITY</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011	
Mailing Address P. O. BOX 60017			Amount of Each Disbursement this Period 98.31	
City LOS ANGELES	State CA	Zip Code 90060	Transaction ID : EXPB79825	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. FIA CARD SERVICES</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011	
Mailing Address P. O. BOX 15716			Amount of Each Disbursement this Period 205.17	
City WILMINGTON	State DE	Zip Code 19886	Transaction ID : EXPB79827	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	514.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. NATIONAL CAR RENTAL</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011	
Mailing Address 9020 AVIATION BLVD.			Amount of Each Disbursement this Period 41.98	
City Inglewood	State CA	Zip Code 90301	Transaction ID : EDTB221EXPB79827	
Purpose of Disbursement AUTO RENTAL		Category/ Type 002	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PITNEY BOWES</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011	
Mailing Address P. O. BOX 856390			Amount of Each Disbursement this Period 41.27	
City LOUISVILLE	State KY	Zip Code 40295	Transaction ID : EDTB219EXPB79827	
Purpose of Disbursement POSTAGE		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EARTHLINK</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011	
Mailing Address WWW.EARTHLINK.NET			Amount of Each Disbursement this Period 21.95	
City CYBERSPACE	State CA	Zip Code 90000	Transaction ID : EDTB220EXPB79827	
Purpose of Disbursement INTERNET SVC.		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

**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 64 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 60.07
City DALLAS State TX Zip Code 74266	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name		Transaction ID : EDTB218EXPB79827 <b>[MEMO ITEM]</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PARKWAY PLAZA INVESTORS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00
City Roseville State CA Zip Code 95678	Purpose of Disbursement RENT Category/Type 001	
Candidate Name		Transaction ID : EXPB79828
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Category/Type 001	
Candidate Name		Transaction ID : EXPB80175
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1353.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POLITICAL DYNAMICS, LLC</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2011
Mailing Address 1029 K ST. #44		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB79829</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement CAMPAIGN ADVICE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. SUREWEST</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2011
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 205.31 <b>Transaction ID : EXPB79830</b>
City LOS ANGELES	State CA	
Zip Code 90030	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. U.S. POSTAL SVC.</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2011
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 53.18 <b>Transaction ID : EXPB79826</b>
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5258.49
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 03 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 45.97
City DALLAS	State TX	
Zip Code 74266	Purpose of Disbursement PHONE SVC.	<b>Transaction ID : EXPB79831</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 107.28
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEES	<b>Transaction ID : EXPB80177</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.80
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB79975</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	154.05
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STOR N LOK</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2011
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : EXPB80166</b>
City SACRAMENTO	State CA	
Zip Code 95828	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB79890</b>
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. STATE COMPENSATION INSURANCE FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2011
Mailing Address P. O. BOX 9102		Amount of Each Disbursement this Period 102.61 <b>Transaction ID : EXPB79891</b>
City Pleasanton	State CA	
Zip Code 94566	Purpose of Disbursement INSURANCE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2024.22
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VOTE RITE SYSTEMS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2011	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 607.80	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB79892	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 8.41	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79976	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2011	
Mailing Address 300 FIRST ST. SE			Amount of Each Disbursement this Period 98.00	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : EXPB80169	
Purpose of Disbursement MEETING		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	714.21
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 16 / 2011
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 61.00
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement STORAGE	<b>Transaction ID : EXPB80171</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 646.30
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	<b>Transaction ID : EXPB79926</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2011
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 220.00
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement BOX RENTAL	<b>Transaction ID : EXPB79927</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	927.30
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 21 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.05 <b>Transaction ID : EXPB79977</b>
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DELUXE BUSINESS FORMS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address P. O. BOX 742572		Amount of Each Disbursement this Period 45.89 <b>Transaction ID : EXPB80176</b>
City CINCINNATI State OH Zip Code 45274	Purpose of Disbursement SUPPLIES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 57.91 <b>Transaction ID : EXPB79978</b>
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	104.85
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SALESFORCE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address 1 MARKET ST. #300		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : EXPB80173</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.43 <b>Transaction ID : EXPB79979</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EMPLOYMENT DEVELOPMENT DEPT.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 270.28 <b>Transaction ID : EXPB79947</b>
City SACRAMENTO	State CA	
Zip Code 94230	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	652.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB79946</b>
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. INTERNAL REVENUE SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address		Amount of Each Disbursement this Period 1549.00 <b>Transaction ID : EXPB79948</b>
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. THE MONACO GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address 14352 FRANKLIN AVE. #B		Amount of Each Disbursement this Period 6493.63 <b>Transaction ID : EXPB79950</b>
City TUSTIN	State CA	
Zip Code 92780	Purpose of Disbursement MASS MAIL	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9824.24
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TIM MACY &amp; ASSOC.</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011	
Mailing Address 7996 CALIFORNIA AVE. #F			Amount of Each Disbursement this Period 999.68	
City FAIR OAKS	State CA	Zip Code 95628	Transaction ID : EXPB79949	
Purpose of Disbursement MASS MAIL		Category/ Type 003		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 28 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 14.26	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79980	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.10	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB79981	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1016.04
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.41
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB79982
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 27.45
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB79951
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 220.41
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB79952
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	250.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 114.11 <b>Transaction ID : EXPB79953</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PARKWAY PLAZA INVESTORS</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00 <b>Transaction ID : EXPB79955</b>
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement RENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.84 <b>Transaction ID : EXPB79983</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1410.95
<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)	PAGE 76 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POLITICAL DYNAMICS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011	
Mailing Address 1029 K ST. #44			Amount of Each Disbursement this Period 5000.00	
City SACRAMENTO	State CA	Zip Code 95814	Transaction ID : EXPB79956	
Purpose of Disbursement CAMPAIGN ADVICE		001 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. THE MONACO GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011	
Mailing Address 14352 FRANKLIN AVE. #B			Amount of Each Disbursement this Period 6681.56	
City TUSTIN	State CA	Zip Code 92780	Transaction ID : EXPB79954	
Purpose of Disbursement MASS MAIL		003 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. VOTERLINK</b>			Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011	
Mailing Address 11299 NORTH 6000 WEST			Amount of Each Disbursement this Period 2300.00	
City HIGHLAND	State UT	Zip Code 84003	Transaction ID : EXPB80174	
Purpose of Disbursement MAILING LIST		001 Category/ Type		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	13981.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

**A. PAYPAL**

Full Name (Last, First, Middle Initial)  
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 01 / 2011

Amount of Each Disbursement this Period  
65.23

Transaction ID : EXPB81245

Category/Type: 001

**B. CAMPAIGNER BY PROTUS**

Full Name (Last, First, Middle Initial)  
Mailing Address 685 CATHCARD ST. #300

City Montreal State QC Zip Code 317

Purpose of Disbursement  
BROADCAST E-MAIL

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 02 / 2011

Amount of Each Disbursement this Period  
1175.00

Transaction ID : EXPB81376

Category/Type: 004

**C. CHASE BANK**

Full Name (Last, First, Middle Initial)  
Mailing Address 801 K ST. #110

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
BANK FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 03 / 2011

Amount of Each Disbursement this Period  
38.28

Transaction ID : EXPB81394

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 1278.51

**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 78 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 03 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.73 <b>Transaction ID : EXPB81246</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 04 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.55 <b>Transaction ID : EXPB81247</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.55 <b>Transaction ID : EXPB81248</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6.83
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STOR N LOK</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 05 / 2011
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : EXPB81377</b>
City SACRAMENTO	State CA	
Zip Code 95828	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 <b>Transaction ID : EXPB81249</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 07 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.68 <b>Transaction ID : EXPB81250</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	141.56
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPMAIL, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011
Mailing Address 1779 TRIBUTE RD. #D		Amount of Each Disbursement this Period 1119.60 <b>Transaction ID : EXPB80162</b>
City SACRAMENTO	State CA	
Zip Code 95815	Purpose of Disbursement MASS MAIL	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. FIA CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 1496.79 <b>Transaction ID : EXPB80160</b>
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SAM'S CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011
Mailing Address 3671 N. FREEWAY BLVD.		Amount of Each Disbursement this Period 372.50 <b>Transaction ID : EDTB222EXPB80160</b> <b>[MEMO ITEM]</b>
City Sacramento	State CA	
Zip Code 95834	Purpose of Disbursement SUPPLIES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2616.39
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PETE'S RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011		
Mailing Address 5540 DOUGLAS BLVD.			Amount of Each Disbursement this Period 129.82		
City GRANITE BAY	State CA	Zip Code 95746	Transaction ID : EDTB224EXPB80160		
Purpose of Disbursement MEETING		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011		
Mailing Address SACRAMENTO INT'L AIRPORT			Amount of Each Disbursement this Period 399.40		
City SACRAMENTO	State CA	Zip Code 95838	Transaction ID : EDTB223EXPB80160		
Purpose of Disbursement AIRFARE		Category/ Type 002	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. OFFICE DEPOT</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011		
Mailing Address 25 E. HILLCREST DR.			Amount of Each Disbursement this Period 261.94		
City THOUSAND OAKS	State CA	Zip Code 93160	Transaction ID : EDTB225EXPB80160		
Purpose of Disbursement SUPPLIES		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

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

**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 82 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PITNEY BOWES</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address P. O. BOX 856390		Amount of Each Disbursement this Period 41.27
City LOUISVILLE	State KY	
Purpose of Disbursement POSTAGE	Zip Code 40295	Transaction ID : EDTB226EXPB80160 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NATIONAL CAR RENTAL</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address BURBANK AIRPORT		Amount of Each Disbursement this Period 104.86
City Burbank	State CA	
Purpose of Disbursement CAR RENTAL	Zip Code 91506	Transaction ID : EDTB227EXPB80160 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EARTHLINK</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address WWW.EARTHLINK.NET		Amount of Each Disbursement this Period 21.95
City CYBERSPACE	State CA	
Purpose of Disbursement INTERNET SVC.	Zip Code 90000	Transaction ID : EDTB228EXPB80160 <b>[MEMO ITEM]</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

**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 83 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 38.13
City San Jose	State CA Zip Code 95125	
Purpose of Disbursement MERCHANT FEE	Category/Type 001	<b>Transaction ID : EXPB81251</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SUREWEST</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 206.31
City LOS ANGELES	State CA Zip Code 90030	
Purpose of Disbursement PHONE SVC.	Category/Type 001	<b>Transaction ID : EXPB80159</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TC PRINTING</b>		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address 1215 G ST.		Amount of Each Disbursement this Period 1071.23
City SACRAMENTO	State CA Zip Code 95814	
Purpose of Disbursement PRINTING	Category/Type 003	<b>Transaction ID : EXPB80158</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1315.67
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VOTE RITE SYSTEMS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : EXPB80157</b>
City SACRAMENTO	State CA	
Zip Code 95827	Purpose of Disbursement DATA PROCESSING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 128.80 <b>Transaction ID : EXPB81252</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CONSERVATIVE VICTORY FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2011
Mailing Address PO BOX 15245		Amount of Each Disbursement this Period 397.85 <b>Transaction ID : NONB80880</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement BROADCAST FAX	Category/ Type
Candidate Name <b>CONSERVATIVE VICTORY FUND</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	676.65
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2011
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 67.80 <b>Transaction ID : EXPB81253</b>
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. SUSIE'S COUNTRY OAKS RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2011
Mailing Address 8595 AUBURN FOLSOM RD.			Amount of Each Disbursement this Period 102.47 <b>Transaction ID : EXPB81381</b>
City Granite Bay	State CA	Zip Code 95746	
Purpose of Disbursement MEETING		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 12 / 2011
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.55 <b>Transaction ID : EXPB81254</b>
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	170.82
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2011
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 61.00
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement STORAGE	<b>Transaction ID : EXPB81382</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 492.20
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	<b>Transaction ID : EXPB80665</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	<b>Transaction ID : EXPB80664</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2334.81
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 54.82
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81255
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 1.68
City Rocklin State CA Zip Code 95677	Purpose of Disbursement POSTAGE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81383
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VOTE RITE SYSTEMS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 100.00
City SACRAMENTO State CA Zip Code 95827	Purpose of Disbursement DATA PROCESSING	
Candidate Name	Category/Type 001	Transaction ID : EXPB80666
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	156.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 96		
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T MOBILITY</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address P. O. BOX 60017		Amount of Each Disbursement this Period 97.84 <b>Transaction ID : EXPB80879</b>
City LOS ANGELES	State CA	
Zip Code 90060	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 161.33 <b>Transaction ID : EXPB81384</b>
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. U.S. POSTAL SVC.</b>		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : EXPB80878</b>
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1009.17
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2011	
Mailing Address P. O. BOX 660720			Amount of Each Disbursement this Period 45.92	
City DALLAS	State TX	Zip Code 74266	Transaction ID : EXPB80877	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.80	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB81256	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 2.80	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB81257	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	51.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 21 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period ..... 1.05
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81258
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 22 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period ..... 31.55
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81259
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 23 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period ..... 6.15
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81260
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	..... 38.75
<b>TOTAL</b> This Period (last page this line number only).....	.....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 24 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.43
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 002	Transaction ID : EXPB81261
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 8.41
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB81262
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 47.52
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC.	
Candidate Name	Category/Type 001	Transaction ID : EXPB80920
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	63.36
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 220.41 <b>Transaction ID : EXPB80919</b>
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 114.11 <b>Transaction ID : EXPB80918</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 35.79 <b>Transaction ID : EXPB81263</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	370.31
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 96			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE BOVEE CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011
Mailing Address 1127 11TH ST. #310		Amount of Each Disbursement this Period 1529.75 <b>Transaction ID : EXPB80917</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement FUNDRAISING COMMISSION	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. EMPLOYMENT DEVELOPMENT DEPT.</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2011
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 270.28 <b>Transaction ID : EXPB81133</b>
City SACRAMENTO	State CA	
Zip Code 94230	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB81132</b>
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3581.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 96		
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. INTERNAL REVENUE SVC.**

Mailing Address

City State Zip Code  
OGDEN UT 84201

Purpose of Disbursement  
TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 29 / 2011

Amount of Each Disbursement this Period  
1549.00

Transaction ID : EXPB81134

Category/Type  
001

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

Mailing Address 2145 Hamilton Avenue

City State Zip Code  
San Jose CA 95125

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 29 / 2011

Amount of Each Disbursement this Period  
1.43

Transaction ID : EXPB81264

Category/Type  
001

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

Mailing Address 2145 Hamilton Avenue

City State Zip Code  
San Jose CA 95125

Purpose of Disbursement  
MERCHANT FEE

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
06 / 30 / 2011

Amount of Each Disbursement this Period  
172.87

Transaction ID : EXPB81265

Category/Type  
001

**SUBTOTAL** of Disbursements This Page (optional)..... 1723.30

**TOTAL** This Period (last page this line number only)..... 65247.54

**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 95 OF 96	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 05 / 20 / 2011
Mailing Address 320 First Street, S.E.		Amount of Each Disbursement this Period 30000.00 <b>Transaction ID : EXPB79928</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF UNNEEDED FUNDS Category/Type 008	
Candidate Name <b>National Republican Congressional Committee</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	30000.00
<b>TOTAL</b> This Period (last page this line number only).....	30000.00

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)

**MCCLINTOCK FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**POLITICAL DYNAMICS, LLC**

Mailing Address 1029 K ST. #44

City State Zip Code  
SACRAMENTO CA 95814

Nature of Debt (Purpose):  
CAMPAIGN ADVICE

Outstanding Balance Beginning This Period **0.00** Transaction ID : **PAYD81136**

Amount Incurred This Period **5000.00** Payment This Period **0.00** Outstanding Balance at Close of This Period **5000.00**

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**VOTE RITE SYSTEMS, INC.**

Mailing Address 3440 VIKING DR. #105

City State Zip Code  
SACRAMENTO CA 95827

Nature of Debt (Purpose):  
DATA PROCESSING

Outstanding Balance Beginning This Period **1194.20** Transaction ID : **PAYD79625**

Amount Incurred This Period **0.00** Payment This Period **1194.20** Outstanding Balance at Close of This Period **0.00**

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<b>5000.00</b>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<b>5000.00</b>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<b>0.00</b>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<b>5000.00</b>