

**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

Doug LaMalfa Committee

ADDRESS (number and street)

9460 Tegner Road

Check if different  
than previously  
reported. (ACC)

Hilmar

CA

95324

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C

C00509422

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

CA

01

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

M M / D D / Y Y Y Y

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

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

11 / 05 / 2024

in the  
State of

CA

5. Covering Period

M M / D D / Y Y Y Y

10 / 17 / 2024

through

M M / D D / Y Y Y Y

11 / 25 / 2024

*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

Lawler, Kelly, , ,

Signature of Treasurer

Lawler, Kelly, , ,

Date

M M / D D / Y Y Y Y

04 / 08 / 2025

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only**FEC FORM 3**  
(Revised 05/2016)

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**Doug LaMalfa Committee**

Report Covering the Period:

From:

MM / DD / YYYY  
10 / 17 / 2024

To:

MM / DD / YYYY  
11 / 25 / 2024

|                                                                                                                  | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|------------------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                          |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e)) ....                                             | 163120.00               | 1008183.16                         |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....                                                        | 5000.00                 | 11672.58                           |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)) .....                            | 158120.00               | 996510.58                          |
| 7. Net Operating Expenditures                                                                                    |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....                                                         | 114383.61               | 508522.45                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14) .....                                              | 0.00                    | 925.83                             |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)) .....                                      | 114383.61               | 507596.62                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27) .....                                             | 691452.65               |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | 0.00                    |                                    |

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

## FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F3A

Transaction ID :

Amendment to update summary page

Form/Schedule:

Transaction ID:

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Doug LaMalfa Committee

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

I. RECEIPTS

| COLUMN A<br>Total this Period                              | COLUMN B<br>Election Cycle Total as of<br>11 / 05 / 2024<br>(date of general election) | COLUMN C<br>Total for<br>11 / 06 / 2024<br>(date after general election)<br><br>through<br>11 / 25 / 2024<br>(last day of reporting period) |
|------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------|
| 11. CONTRIBUTIONS<br>(other than loans) FROM:              |                                                                                        |                                                                                                                                             |
| (a) Individuals/Persons Other than<br>Political Committees |                                                                                        |                                                                                                                                             |
| (i) Itemized (use Schedule A)                              |                                                                                        |                                                                                                                                             |
| 131925.00                                                  | 589389.16                                                                              | 5000.00                                                                                                                                     |
| (ii) Unitemized                                            |                                                                                        |                                                                                                                                             |
| 3795.00                                                    | 38744.00                                                                               | 110.00                                                                                                                                      |
| (iii) Total of contributions from individuals              |                                                                                        |                                                                                                                                             |
| 135720.00                                                  | 628133.16                                                                              | 5110.00                                                                                                                                     |
| (b) Political Party Committees                             |                                                                                        |                                                                                                                                             |
| 0.00                                                       | 2650.00                                                                                | 0.00                                                                                                                                        |
| (c) Other Political Committees                             |                                                                                        |                                                                                                                                             |
| 27400.00                                                   | 377400.00                                                                              | 0.00                                                                                                                                        |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b>                                         | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
| (d) The Candidate                                                                   |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) |                                                                                                                 |                                                                                                                                                    |
| 163120.00                                                                           | 1008183.16                                                                                                      | 5110.00                                                                                                                                            |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES                                      |                                                                                                                 |                                                                                                                                                    |
| 2380.80                                                                             | 0.00                                                                                                            | 2380.80                                                                                                                                            |
| 13. LOANS:                                                                          |                                                                                                                 |                                                                                                                                                    |
| (a) Made or Guaranteed by the Candidate                                             |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (b) All Other Loans                                                                 |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b))                                           |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 925.83                                                                                                          | 0.00                                                                                                                                               |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.)                                      |                                                                                                                 |                                                                                                                                                    |
| 0.00                                                                                | 0.00                                                                                                            | 0.00                                                                                                                                               |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)                                |                                                                                                                 |                                                                                                                                                    |
| 165500.80                                                                           | 1009108.99                                                                                                      | 7490.80                                                                                                                                            |

POST-ELECTION DETAILED SUMMARY PAGE  
Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

Doug LaMalfa Committee

Report Covering the Period: From: 10 / 17 / 2024 To: 11 / 25 / 2024

II. DISBURSEMENTS

| COLUMN A<br>Total this Period                           | COLUMN B<br>Election Cycle Total as of *<br>(date of general election)<br>(* See page 5 for date) | COLUMN C<br>Total for * (date after general election)<br>through * (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|
| 17. OPERATING EXPENDITURES                              |                                                                                                   |                                                                                                                               |
| 114383.61                                               | 508522.45                                                                                         | 22598.67                                                                                                                      |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES            |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 19. LOAN REPAYMENTS:                                    |                                                                                                   |                                                                                                                               |
| (a) Of Loans Made or Guaranteed by the Candidate        |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (b) Of All Other Loans                                  |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))   |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |
| 20. REFUNDS OF CONTRIBUTIONS TO:                        |                                                                                                   |                                                                                                                               |
| (a) Individuals/Persons Other Than Political Committees |                                                                                                   |                                                                                                                               |
| 5000.00                                                 | 11672.58                                                                                          | 0.00                                                                                                                          |
| (b) Political Party Committees                          |                                                                                                   |                                                                                                                               |
| 0.00                                                    | 0.00                                                                                              | 0.00                                                                                                                          |

**POST-ELECTION DETAILED SUMMARY PAGE**

## Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

| <b>COLUMN A</b><br><b>Total this Period</b> | <b>COLUMN B</b><br><b>Election Cycle Total as of *</b><br>(date of general election)<br>(* See page 5 for date) | <b>COLUMN C</b><br><b>Total for *</b> (date after general election)<br><b>through *</b> (last day of reporting period)<br>(* See page 5 for dates) |
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|
|---------------------------------------------|-----------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|

(c) Other Political Committees (such as PACs)

|      |      |      |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

|         |          |      |
|---------|----------|------|
| 5000.00 | 11672.58 | 0.00 |
|---------|----------|------|

**21. OTHER DISBURSEMENTS**

|          |           |      |
|----------|-----------|------|
| 15000.00 | 161425.00 | 0.00 |
|----------|-----------|------|

**22. TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d) and 21)

|           |           |          |
|-----------|-----------|----------|
| 134383.61 | 681620.03 | 22598.67 |
|-----------|-----------|----------|

**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

|           |           |         |
|-----------|-----------|---------|
| 158120.00 | 996510.58 | 5110.00 |
|-----------|-----------|---------|

**IV. NET OPERATING EXPENDITURES**

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

|           |           |          |
|-----------|-----------|----------|
| 114383.61 | 507596.62 | 22598.67 |
|-----------|-----------|----------|

**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....

24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....

25. SUBTOTAL (add Line 23 and Line 24).....

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)

|           |
|-----------|
| 660335.46 |
| 165500.80 |
| 825836.26 |
| 134383.61 |
| 691452.65 |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

A Blankenberg, Tikoes, , ,

A. Mailing Address 15572 Middletown Park Drive

City  
ReddingState  
CAZip Code  
96001FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Physician

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 29 2024

Transaction ID : A-20337

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Amen, Charmaine, , ,

B. Mailing Address P.O. Box 305

City  
COTTONWOODState  
CAZip Code  
96022FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Rancher

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : A-20273

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

AMERICAN COMMODITY CO. LLC

C. Mailing Address 6133 ABEL RD.

City  
WilliamsState  
CAZip Code  
95987FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 01 2024

Transaction ID : A-20355

Amount of Each Receipt this Period

1200.00

☐ Memo Item

1800.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Antone, Gary, , ,

A.

Mailing Address 18930 Drake Rd.

City

RED BLUFF

State

CA

Zip Code

96080

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3200.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20257

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Bayles, Bonnie, , ,

B.

Mailing Address P.O. Box 372

City

GRIDLEY

State

CA

Zip Code

95948

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Del Rios Land Co.

Occupation

Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

900.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20289

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Berger, Norman, , ,

C.

Mailing Address 742 Teesdale Rd.

City

YUBA CITY

State

CA

Zip Code

95991

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

225.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20282

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

1525.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Blake, Susan, , ,

A. Mailing Address 711 San Ramon Way

City

SACRAMENTO

State

CA

Zip Code

95864

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sacramento CountyOccupation  
Attorney

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20304

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

BURRESON, DENNIS, , ,

B. Mailing Address 4844 COUNTY RD MM

City

ORLAND

State

CA

Zip Code

95963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MUSCO FAMILY OLIVE CO.Occupation  
VICE PRES.

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20313

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Burreson, Mary Jo, , ,

C. Mailing Address 4844 County Rd. MM

City

Orland

State

CA

Zip Code

95963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-65992

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

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

6900.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Caldwell, Evelyn, , ,

A.

Mailing Address 3279 Summit Ridge Ter.

City  
ChicoState  
CAZip Code  
95928FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northgate PetroleumOccupation  
Owner

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20255

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Caldwell, Evelyn, , ,

Mailing Address 3279 Summit Ridge Ter.

City  
ChicoState  
CAZip Code  
95928FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Northgate PetroleumOccupation  
Owner

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1150.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20309

Amount of Each Receipt this Period

150.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Carter, Jud, , ,

Mailing Address 781 Sierra View Way

City  
ChicoState  
CAZip Code  
95926FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20285

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

1400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 12 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)  
Cherokee Nation

A. Mailing Address P.O. Box 948

City  
TAHLEQUAHState  
OKZip Code  
74465FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5800.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2024

Transaction ID : A-20339

Amount of Each Receipt this Period

3300.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Compton, Craig, , ,

B. Mailing Address 8904 Stanford Lane

City  
DurhamState  
CAZip Code  
95938FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

AVAG

Business owner

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2024

Transaction ID : A-20236

Amount of Each Receipt this Period

750.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Compton, Vickie, , ,

C. Mailing Address P.O. Box 245

City  
RichvaleState  
CAZip Code  
95974FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

A&amp;P Helicopters

Owner

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 21 2024

Transaction ID : A-20235

Amount of Each Receipt this Period

750.00

☐ Memo Item

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

4800.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 13 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Conkey, Mary, , ,

A.

Mailing Address 735 Sunrise Ave Ste 155

City

Roseville

State

CA

Zip Code

95661

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JR Conkey and Associates

Occupation

Construction

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2700.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 22 |   |   | 2024 |   |   |   |

Transaction ID : A-20243

Amount of Each Receipt this Period

1200.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Coolidge, Andrew, , ,

Mailing Address 1006 W 11th Avenue

City

Chico

State

CA

Zip Code

95926

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coolidge Public Relations Inc

Occupation

Owner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

850.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 20 |   |   | 2024 |   |   |   |

Transaction ID : A-20226

Amount of Each Receipt this Period

300.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Dastmalc, Fatoollah, , ,

Mailing Address 1098 Bevinger Dr

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Caltrans

Occupation

Transportation Engineer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : A-20251

Amount of Each Receipt this Period

150.00

☐ Memo Item

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Dastmalc, Fatohllah, , ,

A.

Mailing Address 1098 Bevinger Dr

City

El Dorado Hills

State

CA

Zip Code

95762

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Caltrans

Occupation

Transportation Engineer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

450.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20253

Amount of Each Receipt this Period

150.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Dwelle, Thomas, , ,

Mailing Address 1258 Grizzly Flat Court

City

Auburn

State

CA

Zip Code

95603

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nella Holdings LLC

Occupation

Partner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7800.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 19 |   |   | 2024 |   |   |   |

Transaction ID : A-20221

Amount of Each Receipt this Period

1200.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Ellis, Thomas, W., ,

Mailing Address P.O. Box 6

City

Grimes

State

CA

Zip Code

95950

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

450.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20290

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

1450.00

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

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

|                                                                               |                                         |                              |                              |                                                         |
|-------------------------------------------------------------------------------|-----------------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)    |                              | PAGE 15 OF 81                |                                                         |
|                                                                               | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d                            |
|                                                                               | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 <input type="checkbox"/> 15 |

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)  
Doug LaMalfa Committee

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>Elphick, Enita, , ,                                                                                  |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 / 25 / 2024 |  |
| Mailing Address 5040 Fortna Road                                                                                                                |             |                                     | Transaction ID : A-20770                                   |  |
| City<br>Yuba City                                                                                                                               | State<br>CA | Zip Code<br>95993                   | Amount of Each Receipt this Period<br>200.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>Unity Forest Products                                                                                                       |             | Occupation<br>CEO                   |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1200.00 |                                                            |  |

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>ESTILL, LANI, , ,                                                                                    |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 01 / 2024 |  |
| Mailing Address PO BOX 320                                                                                                                      |             |                                     | Transaction ID : A-20350                                   |  |
| City<br>Gerlach                                                                                                                                 | State<br>CA | Zip Code<br>89412                   | Amount of Each Receipt this Period<br>1000.00              |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>ESTILL RANCHES                                                                                                              |             | Occupation<br>EXECUTIVE             |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1000.00 |                                                            |  |

|                                                                                                                                                 |             |                                     |                                                            |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-------------------------------------|------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>ESTILL, LANI, , ,                                                                                    |             |                                     | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 / 05 / 2024 |  |
| Mailing Address PO BOX 320                                                                                                                      |             |                                     | Transaction ID : A-20372                                   |  |
| City<br>Gerlach                                                                                                                                 | State<br>CA | Zip Code<br>89412                   | Amount of Each Receipt this Period<br>500.00               |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                           |                                                            |  |
| Name of Employer<br>ESTILL RANCHES                                                                                                              |             | Occupation<br>EXECUTIVE             |                                                            |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date ▼<br>1500.00 |                                                            |  |

|                                                           |         |
|-----------------------------------------------------------|---------|
| SUBTOTAL of Receipts This Page (optional).....▶           | 1700.00 |
| TOTAL This Period (last page this line number only).....▶ |         |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Etchepare, Allen, , ,

A.

Mailing Address PO Box 658

City

Maxwell

State

CA

Zip Code

95955

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Investor

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20303

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Fenn, Jomarie, , ,

Mailing Address 2196 Cartagena Dr.

City

YUBA CITY

State

CA

Zip Code

95999

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3450.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20312

Amount of Each Receipt this Period

3300.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Gergi, Stepan, , ,

Mailing Address 9960 Business Park Dr. #100

City

SACRAMENTO

State

CA

Zip Code

95827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For: 2026

☒ Primary  
☐ Other (specify) ▼☐ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20367

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

9100.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Gergi, Valentina, , ,

A.

Mailing Address 9960 Business Park Dr. #100

City

SACRAMENTO

State

CA

Zip Code

95827

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For: 2026

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20368

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Harmon, Matthew, , ,

Mailing Address 4020 Sierra College Blvd. #200

City

ROCKLIN

State

CA

Zip Code

95677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Consultant

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20261

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

HAY, WILLIAM, , , Jr.

Mailing Address PO BOX 205

City

Point Arena

State

CA

Zip Code

95468

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
X-BAR RANCHOccupation  
OWNER

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20275

Amount of Each Receipt this Period

1200.00

☐ Memo Item

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

4700.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

Horne, Sue, , ,

**A.**

Mailing Address 16467 Irene Court

City

Grass Valley

State

CA

Zip Code

95949

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Compass CommunityOccupation  
Financial Admin

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 21 |   |   | 2024 |   |   |   |

Transaction ID : A-20237

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Jansen, Andrew, , ,

**B.**

Mailing Address P.O. Box 1585

City

YUBA CITY

State

CA

Zip Code

95992

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Siller Bros. Inc.Occupation  
Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20277

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Johnson, Christopher, , ,

**C.**

Mailing Address 750 County Road D

City

Willows

State

CA

Zip Code

95988

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

750.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20298

Amount of Each Receipt this Period

300.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Kimmelshue, Tod, , ,

A.

Mailing Address 8610 Harvest Lane

City

Durham

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Butte County

Occupation

Supervisor

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2024

Transaction ID : A-20316

Amount of Each Receipt this Period

150.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Kislyanka, Elona, , ,

Mailing Address 5813 Himalaya Way

City

CITRUS HEIGHTS

State

CA

Zip Code

95662

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Federal government

Occupation

Engineer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2024

Transaction ID : A-20320

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Kislyanka, Roman, , ,

Mailing Address 5813 Himalaya Way

City

CITRUS HEIGHTS

State

CA

Zip Code

95621

FEC ID number of contributing  
federal political committee.

C

Name of Employer

ROMIK Builds

Occupation

Builder

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 26 2024

Transaction ID : A-20321

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

5150.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Kislyanka, Viktoriya, , ,

A.

Mailing Address 8945 Oak Ave.

City

ORANGEVALE

State

CA

Zip Code

95662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20318

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Kislyanka, Vladimir, , ,

Mailing Address 8945 Oak Ave.

City

Orangevale

State

CA

Zip Code

95662

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Real estate investor

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20319

Amount of Each Receipt this Period

3300.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Koehnen, Julie, , ,

Mailing Address 8150 County Road 31

City

Glenn

State

CA

Zip Code

95943

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CF Koehnen & Sons, Inc.Occupation  
Beekeeper

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20259

Amount of Each Receipt this Period

1000.00

☐ Memo Item

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

7600.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

KOEHNEN, KALIN, , ,

A.

Mailing Address 3100 HWY 45

City

Glenn

State

CA

Zip Code

95943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

DSL FARM

Occupation

FARMER

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20305

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Koehnen, Yvonne, , ,

Mailing Address 3191 Highway 45

City

Glenn

State

CA

Zip Code

95943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1800.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20266

Amount of Each Receipt this Period

200.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Kraemer, Nancy, , ,

Mailing Address 343 Bell Way

City

Orland

State

CA

Zip Code

95963

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kraemer &amp; Co. Mfg.

Occupation

Owner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20295

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

3800.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

LaGrande, Julie, , ,

A. Mailing Address PO Box 491

City  
Fort KlamathState  
ORZip Code  
97626FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmers

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : A-20358

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LaGrande, KM, , ,

B. Mailing Address PO Box 491

City  
Fort KlamathState  
ORZip Code  
97626FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : A-20357

Amount of Each Receipt this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

LAGRANDE, RON, , ,

C. Mailing Address P.O. Box 370

City  
WilliamsState  
CAZip Code  
95987FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024

Transaction ID : A-20274

Amount of Each Receipt this Period

250.00

☐ Memo Item

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

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

6850.00

SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS

|                                                                               |                                         |                              |                              |                                                         |
|-------------------------------------------------------------------------------|-----------------------------------------|------------------------------|------------------------------|---------------------------------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)    |                              | PAGE 23 OF 81                |                                                         |
|                                                                               | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d                            |
|                                                                               | <input type="checkbox"/> 12             | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 <input type="checkbox"/> 15 |

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)  
Doug LaMalfa Committee

|                                                                                                                                                 |             |                                  |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>LaMalfa, Bobbye, , ,                                                                                 |             |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>10 25 2024 |  |
| Mailing Address 8501 E. Side Drive                                                                                                              |             |                                  | Transaction ID : A-20265                               |  |
| City<br>Potter Valley                                                                                                                           | State<br>CA | Zip Code<br>95469                | Amount of Each Receipt this Period<br>300.00           |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                        |                                                        |  |
| Name of Employer<br>Self-Employed                                                                                                               |             | Occupation<br>Farmer             |                                                        |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>550.00 |                                                        |  |

|                                                                                                                                                 |             |                                  |                                                        |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|----------------------------------|--------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>Lavy, Mark, , ,                                                                                      |             |                                  | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 01 2024 |  |
| Mailing Address PO BOX 1081<br>69 W. RIO BONITO                                                                                                 |             |                                  | Transaction ID : A-21112                               |  |
| City<br>Biggs                                                                                                                                   | State<br>CA | Zip Code<br>95917                | Amount of Each Receipt this Period<br>600.00           |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                        |                                                        |  |
| Name of Employer<br>Self-Employed                                                                                                               |             | Occupation<br>Farmer             |                                                        |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>600.00 | Earmark via Lavy Brothers on 2024-11-01                |  |

|                                                                                                                                                 |             |                                   |                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-------------|-----------------------------------|---------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br>Lavy Brothers                                                                                        |             |                                   | Date of Receipt<br>M M / D D / Y Y Y Y Y<br>11 01 2024              |  |
| Mailing Address P.O. Box 536                                                                                                                    |             |                                   | Transaction ID : A-21112CM                                          |  |
| City<br>Biggs                                                                                                                                   | State<br>CA | Zip Code<br>95917                 | Amount of Each Receipt this Period<br>1200.00                       |  |
| FEC ID number of contributing federal political committee.<br>C                                                                                 |             | Memo Item                         |                                                                     |  |
| Name of Employer                                                                                                                                |             | Occupation                        |                                                                     |  |
| Receipt For: 2024<br><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |             | Election Cycle-to-Date<br>1200.00 | Earmarked-Conduit Details. Conduit Contribution Limit not affected. |  |

|                                                           |        |
|-----------------------------------------------------------|--------|
| SUBTOTAL of Receipts This Page (optional).....▶           | 900.00 |
| TOTAL This Period (last page this line number only).....▶ |        |

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

LAVY, MERIDITH, , ,

A.

Mailing Address P.O. Box 1081

City  
BiggsState  
CAZip Code  
95917FEC ID number of contributing  
federal political committee.

C

Name of Employer  
POINT FOUR INC.Occupation  
FARMER

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1800.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-21113

Amount of Each Receipt this Period

600.00

☐ Memo Item

Earmark via Lavy Brothers on 2024-11-01

B.

Full Name (Last, First, Middle Initial)

Lavy Brothers

Mailing Address P.O. Box 536

City  
BiggsState  
CAZip Code  
95917FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-21113CM

Amount of Each Receipt this Period

1200.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

C.

Full Name (Last, First, Middle Initial)

Leech Lake Band of Ojibwe

Mailing Address 190 Sailstar Dr. NW

City  
CASS LAKEState  
MNZip Code  
56633FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 04  |   | 2024        |

Transaction ID : A-20366

Amount of Each Receipt this Period

2000.00

☐ Memo Item

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

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

2600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)  
Leighton, Lloyd, , Jr.

Mailing Address 1212 Highland Ave.

City  
YUBA CITYState  
CAZip Code  
95991FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Lloyd Leighton RealtorsOccupation  
Real Estate

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1400.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : A-20248

Amount of Each Receipt this Period

300.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Leland, Gayle, , ,

Mailing Address PO Box 549

City  
DurhamState  
CAZip Code  
95938FEC ID number of contributing  
federal political committee.

C

Name of Employer  
selfOccupation  
farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20278

Amount of Each Receipt this Period

300.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Levko, Aleksey, , ,

Mailing Address 1298 Antelope Creek Dr. #414

City  
RosevilleState  
CAZip Code  
95661FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Exodus LogistixOccupation  
COO

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20324

Amount of Each Receipt this Period

3000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3600.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 26 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Levko, Dariya, , ,

A.

Mailing Address 1298 Antelope Creek Dr. #414

City

Roseville

State

CA

Zip Code

95678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Levkorp Logistics

Occupation

Board member

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

6300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20325

Amount of Each Receipt this Period

3000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Lundberg, Bryce, , ,

B.

Mailing Address 114 Estates Drive

City

Chico

State

CA

Zip Code

95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Lundberg Family Farms

Occupation

Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1150.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 19 |   |   | 2024 |   |   |   |

Transaction ID : A-20219

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Masarik, David, , ,

C.

Mailing Address 2111 Avalon Drive

City

Laughlin

State

NV

Zip Code

89029

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

240.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 28 |   |   | 2024 |   |   |   |

Transaction ID : A-20333

Amount of Each Receipt this Period

10.00

☐ Memo Item

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

3160.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Masula, Larry, , ,

A.

Mailing Address 30 Philadelphia Dr.

City

CHICO

State

CA

Zip Code

95973

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Chiropractor

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20306

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCAMIS, JOHN, , ,

B.

Mailing Address 3263 SHADY BROOK LANE

City

Chico

State

CA

Zip Code

95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCAMIS FAMILY LLCOccupation  
CONTRACTOR

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20345

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

MCAMIS, RENEE, , ,

C.

Mailing Address 3263 SHADYBROOK LANE

City

Chico

State

CA

Zip Code

95928

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20286

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

1800.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 28 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

McCorkle, Leland, , ,

**A.**

Mailing Address 2470 Co. Rd. WW

City

Glenn

State

CA

Zip Code

95943

FEC ID number of contributing  
federal political committee.

C

Name of Employer

McCorkle Farms

Occupation

farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

750.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20308

Amount of Each Receipt this Period

150.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

McDaniels, Patricia, , ,

Mailing Address 647 Bird Street

City

Yuba City

State

CA

Zip Code

95991

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

850.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20292

Amount of Each Receipt this Period

300.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

McKenzie, Kathryn, , ,

Mailing Address 40 Little Creek Road

City

Orville

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

600.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20216

Amount of Each Receipt this Period

600.00

☐ Memo Item**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 29 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

McKenzie, Kent, , ,

**A.**

Mailing Address 40 Little Creek Road

City

Oroville

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Kent McKenzie Ag Consulting KMAC

Occupation

Rice Breeding and Genetics

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 17 2024

Transaction ID : A-20217

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

mclaughlin, jack, , , Jr.

**B.**

Mailing Address po box 92

City

crescent mills

State

CA

Zip Code

95934

FEC ID number of contributing  
federal political committee.

C

Name of Employer

selfemployed

Occupation

log transportation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : A-20268

Amount of Each Receipt this Period

200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Moffitt, Gail, , ,

**C.**

Mailing Address 2770 Larkin Road

City

Biggs

State

CA

Zip Code

95917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

self

Occupation

farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : A-20258

Amount of Each Receipt this Period

1000.00

☐ Memo Item

1800.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 30 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Montna, Alfred, , ,

A.

Mailing Address 12755 Garden Hwy

City

Yuba City

State

CA

Zip Code

95991

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Montna Farms

Occupation

Farmer

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 23 / 2024

23

2024

Transaction ID : A-17629

Amount of Each Receipt this Period

3300.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Murphy, Susan, , ,

Mailing Address PO BOX 237

City

Durham

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

3400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024

25

2024

Transaction ID : A-20296

Amount of Each Receipt this Period

1200.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

neben, susan, , ,

Mailing Address 90 Quail Hill Place

City

Oroville

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2024

☐ Primary☒ General☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024

25

2024

Transaction ID : A-20288

Amount of Each Receipt this Period

300.00

☐ Memo Item

4800.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 31 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Nechay, Julia, , ,

A.

Mailing Address 301 Gibson Dr.

City

Roseville

State

CA

Zip Code

95678

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20317

Amount of Each Receipt this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nevis, Sam, , ,

B.

Mailing Address PO Box 3775

City

Yuba City

State

CA

Zip Code

95992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self

Occupation

Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 22 |   |   | 2024 |   |   |   |

Transaction ID : A-20241

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nielsen, Norm, , ,

C.

Mailing Address 36 West Eaton Road

City

Chico

State

CA

Zip Code

95973

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chico Electric

Occupation

Self

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2700.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 22 |   |   | 2024 |   |   |   |

Transaction ID : A-20242

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

5600.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 32 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)  
Oneida Nation

Mailing Address P.O. Box 365

City  
ONEIDAState  
WIZip Code  
54155FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 31 2024

Transaction ID : A-20338

Amount of Each Receipt this Period

1000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Pamma, Gurnam, , ,

Mailing Address 9850 Sheldon Avenue

City  
Live OakState  
CAZip Code  
95953FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Self-Employed

Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 04 2024

Transaction ID : A-20360

Amount of Each Receipt this Period

1200.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Penne, Dale, , ,

Mailing Address 736 Silverado Estates Ct

City  
ChicoState  
CAZip Code  
95973FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

A Firm Foundation, Inc.

Insurance Sales

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 25 2024

Transaction ID : A-20271

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

2300.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 33 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Penne, Dale, , ,

A.

Mailing Address 736 Silverado Estates Ct

City

Chico

State

CA

Zip Code

95973

FEC ID number of contributing  
federal political committee.

C

Name of Employer

A Firm Foundation, Inc.

Occupation

Insurance Sales

Receipt For: 2004

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

40.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 28 |   |   | 2024 |   |   |   |

Transaction ID : A-20334

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Putman, John, T., ,

B.

Mailing Address 958 Stewart Rd.

City

Yuba City

State

CA

Zip Code

95991

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Louis F. Putman Auctioneers

Occupation

Auctioneer/Realtor

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20299

Amount of Each Receipt this Period

1200.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Rehmann, Rolawn, , ,

C.

Mailing Address 6475 Apple Creek Drive

City

Paradise

State

CA

Zip Code

95969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

n/a

Occupation

Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1050.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20291

Amount of Each Receipt this Period

400.00

☐ Memo Item

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

1640.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 34 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

Reinhardt, Cecelia, , ,

**A.**

Mailing Address 3854 Hildale Ave.

City

Oroville

State

CA

Zip Code

95966

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1900.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024D D / Y Y Y Y Y  
25 / 2024Y Y Y Y Y  
2024

Transaction ID : A-20287

Amount of Each Receipt this Period

750.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Rocchi, Marina, , ,

Mailing Address 3401 Esplanade

City

Chico

State

CA

Zip Code

95973

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chico Eye CenterOccupation  
Optometrist

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 17 / 2024D D / Y Y Y Y Y  
17 / 2024Y Y Y Y Y  
2024

Transaction ID : A-17584

Amount of Each Receipt this Period

300.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Rominger, Elaine, , ,

Mailing Address 6925 County Line Rd.

City

Arbuckle

State

CA

Zip Code

95912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024D D / Y Y Y Y Y  
25 / 2024Y Y Y Y Y  
2024

Transaction ID : A-20297

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

1550.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 35 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Rue, Michael, , ,

A. Mailing Address PO BOX 8

City

RIO OSO

State

CA

Zip Code

95674

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Rancher

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20301

Amount of Each Receipt this Period

3300.00

☐ Memo Item

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

Ruschhaupt, Joyce, , ,

Mailing Address 15 Red River Drive

City

Lake Almanor Peninsula

State

CA

Zip Code

96137

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Real Estate

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20340

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

Sandulyak, Danil, , ,

Mailing Address 640 Striped Moss St.

City

ROSEVILLE

State

CA

Zip Code

95678

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Premier Building SupplyOccupation  
Owner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20322

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

6100.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 36 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Sandulyak, Vitaliya, , ,

**A.** Mailing Address 640 Striped Moss St.City  
ROSEVILLEState  
CAZip Code  
95678FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20323

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Seth, Mohnish, , ,

**B.** Mailing Address 2879 Oak WayCity  
CHICOState  
CAZip Code  
95973FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Farmers Int'lOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20263

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Sheppard, Josh, , ,

**C.** Mailing Address 694 Watson RdCity  
BiggsState  
CAZip Code  
95917FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : A-20246

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3300.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 37 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Sohnrey, Casey, , ,

A.

Mailing Address 9592 Cummings Rd.

City

DURHAM

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-21110

Amount of Each Receipt this Period

250.00

☐ Memo ItemEarmark via SOHNREY AND SON FAMILY FARMS on  
2024-11-01

B.

Full Name (Last, First, Middle Initial)

SOHNREY AND SON FAMILY FARMS

Mailing Address 9592 CUMMINGS RD.

City

Durham

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-21110CM

Amount of Each Receipt this Period

500.00

☒ Memo ItemEarmarked-Conduit Details. Conduit Contribution Limit  
not affected.

C.

Full Name (Last, First, Middle Initial)

Sohnrey, Greg, , ,

Mailing Address 9592 Cummings Rd

City

Durham

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Sohnrey and Son Family Farm /PAR Farms

Occupation  
Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

250.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-21111

Amount of Each Receipt this Period

250.00

☐ Memo ItemEarmark via SOHNREY AND SON FAMILY FARMS on  
2024-11-01

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

500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 38 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

SOHNREY AND SON FAMILY FARMS

Mailing Address 9592 CUMMINGS RD.

City

Durham

State

CA

Zip Code

95938

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-21111CM

Amount of Each Receipt this Period

500.00

☒ Memo Item

Earmarked-Conduit Details. Conduit Contribution Limit not affected.

Full Name (Last, First, Middle Initial)

Solem, Denise, , ,

Mailing Address P.O. Box 214

City

Janesville

State

CA

Zip Code

96114

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

400.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20351

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

TATE, JAMES, , ,

Mailing Address 2888 EUREKA WAY, STE 200

City

Redding

State

CA

Zip Code

96001

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

SELF

DOCTOR

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

900.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20310

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 39 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

Tennis, Audrey, , ,

**A.**

Mailing Address 806 WESTGATE COURT

City  
ChicoState  
CAZip Code  
95926FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20264

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Van Vleck, Nicole, , ,

**B.**

Mailing Address 12755 Garden Highway

City  
Yuba CityState  
CAZip Code  
95991FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Montna FarmsOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 23 |   |   | 2024 |   |   |   |

Transaction ID : A-20245

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vanoverbeek, Thomas, , ,

**C.**

Mailing Address 55 Lazy S Lane

City  
CHICOState  
CAZip Code  
95928FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Chico City CouncilOccupation  
Councilman

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20332

Amount of Each Receipt this Period

1000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

2500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 40 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Vecchiarelli, Daniel, , ,

A.

Mailing Address 1830 W. 38th Ave.

City

DENVER

State

CO

Zip Code

80211

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Leprino Foods

Occupation

Executive

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : A-20347

Amount of Each Receipt this Period

1500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Vinson, Carolyn, , ,

Mailing Address 11629 Melones Cir.

City

GOLD RIVER

State

CA

Zip Code

95670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Requested

Occupation

Requested

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 04 |   |   | 2024 |   |   |   |

Transaction ID : A-20363

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Vinson, George, , ,

Mailing Address 11629 Melones Cir.

City

GOLD RIVER

State

CA

Zip Code

95670

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Requested

Occupation

Requested

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 04 |   |   | 2024 |   |   |   |

Transaction ID : A-20362

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

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

6500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Vinson, Linda, , ,

A.

Mailing Address 2236 Cummings Dr.

City

SANTA ROSA

State

CA

Zip Code

95404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20327

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Vinson, Michael, , ,

B.

Mailing Address 2236 Cummings Dr.

City

SANTA ROSA

State

CA

Zip Code

95404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20326

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Ward, Laurel, , ,

C.

Mailing Address 6873 State Hwy 162

City

WILLOWS

State

CA

Zip Code

95988

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hill & Wood ApiariesOccupation  
Pres.

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20307

Amount of Each Receipt this Period

500.00

☐ Memo Item

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

5500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 42 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

Waugh, Colleen, , ,

**A.**

Mailing Address 376 Woodbridge dr

City  
ChicoState  
CAZip Code  
95926FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

310.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20250

Amount of Each Receipt this Period

300.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

Wells, Mary, , ,

Mailing Address P.O. Box 667

City  
MaxwellState  
CAZip Code  
95955FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-EmployedOccupation  
Farmer

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20343

Amount of Each Receipt this Period

150.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Wilbur, Emily, , ,

Mailing Address P.O. Box 3730

City  
YUBA CITYState  
CAZip Code  
95992FEC ID number of contributing  
federal political committee.

C

Name of Employer  
n/aOccupation  
Not employed

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-65990

Amount of Each Receipt this Period

1000.00

☒ Memo Item

Reattribution To

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

450.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 43 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Wilbur, Richard, , ,

Mailing Address P.O. Box 3730

City

YUBA CITY

State

CA

Zip Code

95992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wilbur Packing Co.

Occupation

Executive

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20276

Amount of Each Receipt this Period

3300.00

☐ Memo Item

A.

Full Name (Last, First, Middle Initial)

Wilbur, Richard, , ,

Mailing Address P.O. Box 3730

City

YUBA CITY

State

CA

Zip Code

95992

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Wilbur Packing Co.

Occupation

Executive

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

7600.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-65991

Amount of Each Receipt this Period

- 1000.00

☒ Memo Item

Reattribution From

B.

Full Name (Last, First, Middle Initial)

Wright, Rob, , ,

Mailing Address 3931 Rainbow Ranch Lane

City

Paradise

State

CA

Zip Code

95969

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rob Wright Construction

Occupation

Builder

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1800.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 20 |   |   | 2024 |   |   |   |

Transaction ID : A-20225

Amount of Each Receipt this Period

1200.00

☐ Memo Item

C.

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

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

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 44 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Wylie, Gordon, , ,

A.

Mailing Address 314 10th Street

City

Colusa

State

CA

Zip Code

95932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Rice Farmer

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1700.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 22 / 2024D D / Y Y Y Y Y  
22 / 2024Y Y Y Y Y  
2024

Transaction ID : A-20240

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yarovenko, Alina, , ,

B.

Mailing Address 4024 Expedition Ln.

City

ROSEVILLE

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KJAX Inc.Occupation  
Property Manager

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2024D D / Y Y Y Y Y  
26 / 2024Y Y Y Y Y  
2024

Transaction ID : A-20329

Amount of Each Receipt this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Yarovenko, Bohdan, , ,

C.

Mailing Address 4024 Expedition Ln.

City

ROSEVILLE

State

CA

Zip Code

95747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American Building DevelopmentOccupation  
Partner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 26 / 2024D D / Y Y Y Y Y  
26 / 2024Y Y Y Y Y  
2024

Transaction ID : A-20328

Amount of Each Receipt this Period

2500.00

☐ Memo Item

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

5150.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 45 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Yarovenko, Dmytzo, , ,

A.

Mailing Address 23218 Broadmoor Ct.

City

AUBURN

State

CA

Zip Code

95602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Building Development

Occupation

Partner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20330

Amount of Each Receipt this Period

2500.00

☐ Memo Item

B.

Full Name (Last, First, Middle Initial)

Yarovenko, Olena, , ,

Mailing Address 23218 Broadmoor Ct.

City

AUBURN

State

CA

Zip Code

95602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

American Building Development

Occupation

Partner

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 26 |   |   | 2024 |   |   |   |

Transaction ID : A-20331

Amount of Each Receipt this Period

2500.00

☐ Memo Item

C.

Full Name (Last, First, Middle Initial)

Young, John, M, ,

Mailing Address 10450 Rincon Way

City

Auburn

State

CA

Zip Code

95602

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Nevada County GOP

Occupation

Chairman

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1200.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 24 |   |   | 2024 |   |   |   |

Transaction ID : A-20249

Amount of Each Receipt this Period

1200.00

☐ Memo Item

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

6200.00

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

131925.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 46 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

AT&amp;T INC. EMPLOYEE FEDERAL PAC

Mailing Address 208 S. AKARD ST., STE. 2701

City  
DallasState  
TXZip Code  
75202FEC ID number of contributing  
federal political committee.

C C00109017

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : A-20361

Amount of Each Receipt this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Calif. Cotton Ginners and Growers Assoc. PAC

Mailing Address 1785 North Fine Ave.

City  
FRESNOState  
CAZip Code  
93727FEC ID number of contributing  
federal political committee.

C C00250464

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
10 / 25 / 2024

Transaction ID : A-20293

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Calif. Farm Bureau Fund to Protect the Family Farm (FARM PAC)

Mailing Address 2600 River Plaza Dr.

City  
SACRAMENTOState  
CAZip Code  
95833FEC ID number of contributing  
federal political committee.

C C00041954

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 04 / 2024

Transaction ID : A-20365

Amount of Each Receipt this Period

2500.00

☐ Memo Item

3800.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 47 OF 81

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

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)

**Doug LaMalfa Committee**Full Name (Last, First, Middle Initial)  
Calif. Water Service Group PAC

Mailing Address 621 Capitol Mall #200

City  
SacramentoState  
CAZip Code  
95814FEC ID number of contributing  
federal political committee.**C** C00357608

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : A-20349

Amount of Each Receipt this Period

5000.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Edison International PAC

Mailing Address 2244 Walnut Grove

City  
RosemeadState  
CAZip Code  
91770FEC ID number of contributing  
federal political committee.**C** C00019653

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2500.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 11 |   |   | 01 |   |   | 2024 |   |   |   |

Transaction ID : A-20353

Amount of Each Receipt this Period

2500.00

☐ Memo ItemFull Name (Last, First, Middle Initial)  
Farmers' Rice Cooperative

Mailing Address P.O. Box 15223

City  
SacramentoState  
CAZip Code  
95851FEC ID number of contributing  
federal political committee.**C** C00146605

Name of Employer

Occupation

Receipt For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

|    |   |   |    |   |   |      |   |   |   |
|----|---|---|----|---|---|------|---|---|---|
| M  | M | / | D  | D | / | Y    | Y | Y | Y |
| 10 |   |   | 25 |   |   | 2024 |   |   |   |

Transaction ID : A-20279

Amount of Each Receipt this Period

3000.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

10500.00

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

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 48 OF 81

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

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)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

Nat'l Assoc. of Home Builders PAC (Build PAC)

Mailing Address 1201 15th St. NW

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing  
federal political committee.

C C00000901

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

8500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 11  |   | 01  |   | 2024        |

Transaction ID : A-20341

Amount of Each Receipt this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Nat'l Pro-Life Alliance PAC

Mailing Address 5211 Port Royal Rd. #500

City

Springfield

State

VA

Zip Code

22151

FEC ID number of contributing  
federal political committee.

C C00358051

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

1000.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 23  |   | 2024        |

Transaction ID : A-20247

Amount of Each Receipt this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

Specialty Equipment Market Assoc. Federal PAC

Mailing Address 1575 S. Valley Vista Dr.

City

DIAMOND BAR

State

CA

Zip Code

91765

FEC ID number of contributing  
federal political committee.

C C00389403

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

4500.00

Date of Receipt

|     |   |     |   |             |
|-----|---|-----|---|-------------|
| M M | / | D D | / | Y Y Y Y Y Y |
| 10  |   | 25  |   | 2024        |

Transaction ID : A-20267

Amount of Each Receipt this Period

2500.00

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

4500.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 81

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

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

NAME OF COMMITTEE (In Full)

**Doug LaMalfa Committee**

Full Name (Last, First, Middle Initial)

The One America PAC

**A.**

Mailing Address P.O. Box 736

City

HILMAR

State

CA

Zip Code

95324

FEC ID number of contributing  
federal political committee.**C** C00875823

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

3300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20374

Amount of Each Receipt this Period

3300.00

☐ Memo Item**B.**

Full Name (Last, First, Middle Initial)

USA RICE FEDERATION PAC

Mailing Address 2101 Wilson Blvd. #610

City

ARLINGTON

State

VA

Zip Code

22201

FEC ID number of contributing  
federal political committee.**C** C00308478

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

8500.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20359

Amount of Each Receipt this Period

5000.00

☐ Memo Item**C.**

Full Name (Last, First, Middle Initial)

Western Agricultural Processors Assoc. Federal PAC

Mailing Address 1785 North Fine Ave.

City

FRESNO

State

CA

Zip Code

93727

FEC ID number of contributing  
federal political committee.**C** C00683235

Name of Employer

Occupation

Receipt For: 2024

☐ Primary  
☐ Other (specify) ▼☒ General

Election Cycle-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

Transaction ID : A-20294

Amount of Each Receipt this Period

300.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶

8600.00

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

27400.00

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 81

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

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

NAME OF COMMITTEE (In Full)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

Aircraft Owners and Pilots Assoc. PAC (AOPA)

Mailing Address 421 Aviation Way

City

FREDERICK

State

MD

Zip Code

21701

FEC ID number of contributing  
federal political committee.

C C00131185

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
05 29 2024

Transaction ID : A-21114

Amount of Each Receipt this Period

2000.00

☒ Memo ItemMemo Transfer from Authorized Committee-  
Transportation Trust Fund

Full Name (Last, First, Middle Initial)

Atlas Air Worldwide Holdings, Inc. PAC

Mailing Address 2000 Westchester Ave.

City

PURCHASE

State

NY

Zip Code

10577

FEC ID number of contributing  
federal political committee.

C C00478099

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
04 03 2024

Transaction ID : A-21115

Amount of Each Receipt this Period

400.00

☒ Memo ItemMemo Transfer from Authorized Committee-  
Transportation Trust Fund

Full Name (Last, First, Middle Initial)

Transportation Trust Fund

Mailing Address 555 Metro Pl. N. #525

City

Dublin

State

OH

Zip Code

43017

FEC ID number of contributing  
federal political committee.

C C00834739

Name of Employer

Occupation

Receipt For: 2024

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2380.80

Date of Receipt

M M / D D / Y Y Y Y Y  
11 15 2024

Transaction ID : A-20373

Amount of Each Receipt this Period

2380.80

☐ Memo ItemTransfer of Joint Fundraising Proceeds  
Transfer from Authorized Committee

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

2380.80

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

2380.80

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 51 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. 3AM Communications**

Mailing Address 1850 Berthold St.

City  
MANTECAState  
CAZip Code  
95336Purpose of Disbursement  
Mail design

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

400.00

Transaction ID : B-65091

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. 3AM Communications**

Mailing Address 1850 Berthold St.

City  
MANTECAState  
CAZip Code  
95336Purpose of Disbursement  
Ad design

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

300.00

Transaction ID : B-65129

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. 3AM Communications**

Mailing Address 1850 Berthold St.

City  
MANTECAState  
CAZip Code  
95336Purpose of Disbursement  
Brochure design

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-65141

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1700.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 52 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Amazon.com**

Mailing Address 410 Terry Ave. North

City  
SEATTLEState  
WAZip Code  
98109Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

326.96

Transaction ID : B-65696

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Amazon.com**

Mailing Address 410 Terry Ave. North

City  
SEATTLEState  
WAZip Code  
98109Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

32.13

Transaction ID : B-65698

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 410 Terry Ave. North

City  
SEATTLEState  
WAZip Code  
98109Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

969.07

Transaction ID : B-65699

☒ Memo Item MEMO: Subvendor of-Chase Card Services**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 53 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Amazon.com**

Mailing Address 410 Terry Ave. North

City  
SEATTLEState  
WAZip Code  
98109Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

194.03

Transaction ID : B-65700

☒ Memo Item MEMO: Subvendor of Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Anedot, Inc.**

Mailing Address 1340 Poydras Street #1770

City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.70

Transaction ID : B-65089

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Anedot, Inc.**

Mailing Address 1340 Poydras Street #1770

City  
New OrleansState  
LAZip Code  
70112Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7.60

Transaction ID : B-65128

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9.30

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 54 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Armed Guard Private Security**

Mailing Address 500 Cohasset Road, Ste 27

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Security for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1112.37

Transaction ID : B-65702

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Breuker, John, , , Jr.**

Mailing Address 1341 Sustin Dr. Apt 68

City  
YUBA CITYState  
CAZip Code  
95993Purpose of Disbursement  
Campaign consulting

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-51642

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Breuker, John, , , Jr.**

Mailing Address 1341 Sustin Dr. Apt 68

City  
YUBA CITYState  
CAZip Code  
95993Purpose of Disbursement  
Campaign consulting

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1000.00

Transaction ID : B-51645

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3000.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 55 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Breuker, John, , Jr.**

Mailing Address 1341 Sustin Dr. Apt 68

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 2 | 2 |   | 2 | 0 | 2 | 4 |

City  
YUBA CITYState  
CAZip Code  
95993

FEC Identification Number

C

Purpose of Disbursement  
Campaign consulting

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

3000.00

Transaction ID : B-65135

☐ Memo Item

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. Campaign Solutions**

Mailing Address 117 N. St. Asaph St.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

City  
ALEXANDRIAState  
VAZip Code  
22314

FEC Identification Number

C

Purpose of Disbursement  
Text messaging

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-65710

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 1st St. SE

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 6 |   | 2 | 0 | 2 | 4 |

City  
WASHINGTONState  
DCZip Code  
20006

FEC Identification Number

C

Purpose of Disbursement  
Catering

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

416.58

Transaction ID : B-65697

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

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

3000.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 56 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Carpenter Core LLC**

Mailing Address 143-C JB Hawkins Rd.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

City  
GURLEYState  
ALZip Code  
37548

FEC Identification Number

C

Purpose of Disbursement  
Gifts for caucus members

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

249.15

Transaction ID : B-65715

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Certified Employment Group**

Mailing Address 2000 Powell St. #970

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

City  
EMERYVILLEState  
CAZip Code  
94608

FEC Identification Number

C

Purpose of Disbursement  
Staffing

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4376.82

Transaction ID : B-65103

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Certified Employment Group**

Mailing Address 2000 Powell St. #970

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

City  
EMERYVILLEState  
CAZip Code  
94608

FEC Identification Number

C

Purpose of Disbursement  
Staffing

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

5179.07

Transaction ID : B-65132

☐ Memo Item

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:

District:

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

9555.89

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 57 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Certified Employment Group**

Mailing Address 2000 Powell St. #970

City  
EMERYVILLEState  
CAZip Code  
94608Purpose of Disbursement  
Staffing

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2026

|                                     |                   |                                  |
|-------------------------------------|-------------------|----------------------------------|
| <input checked="" type="checkbox"/> | Primary           | <input type="checkbox"/> General |
| <input type="checkbox"/>            | Other (specify) ▼ |                                  |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8146.17

Transaction ID : B-51651

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chase Card Services**

Mailing Address P.O. Box 6294

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card payment

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7000.00

Transaction ID : B-65105

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chase Card Services**

Mailing Address P.O. Box 6294

City  
Carol StreamState  
ILZip Code  
60197Purpose of Disbursement  
Credit card payment

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

8940.75

Transaction ID : B-65120

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

24086.92

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Chico Chamber of Commerce**

Mailing Address 180 E. 4th St. STE 120

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Dues

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

950.00

Transaction ID : B-65124

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Chico Party Rentals**

Mailing Address 641 Entler Avenue, Suite 49A

City  
CHICAState  
CAZip Code  
95928Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3183.50

Transaction ID : B-65692

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**C. Circa 53**

Mailing Address 2753 Walnut Ave.

City  
MARYSVILLEState  
CAZip Code  
95901Purpose of Disbursement  
Catering

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

11247.09

Transaction ID : B-65106

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12197.09

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 59 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Circa 53**

Mailing Address 2753 Walnut Ave.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 25  |   | 2024    |

City  
MARYSVILLEState  
CAZip Code  
95901

FEC Identification Number

C

Purpose of Disbursement  
Catering

001

Amount of Each Disbursement this Period

2300.52

Transaction ID : B-65108

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**B. CORDI WINERY**

Mailing Address 10401 INGRAM LN.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 22  |   | 2024    |

City  
LIVE OAKState  
CAZip Code  
95953

FEC Identification Number

C

Purpose of Disbursement  
Fundraising expenses

001

Amount of Each Disbursement this Period

1235.52

Transaction ID : B-65102

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Efundraising Connections**

Mailing Address 2831 G St. #200

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2024    |

City  
SacramentoState  
CAZip Code  
95816

FEC Identification Number

C

Purpose of Disbursement  
Merchant fee

001

Amount of Each Disbursement this Period

17.25

Transaction ID : B-65095

☐ Memo Item

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

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

3553.29

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 60 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1.15

Transaction ID : B-65094

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

30.25

Transaction ID : B-65100

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

89.25

Transaction ID : B-65101

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

120.65

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 61 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

357.63

Transaction ID : B-65118

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

90.25

Transaction ID : B-65117

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

94.13

Transaction ID : B-65115

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

542.01

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 62 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

27.50

Transaction ID : B-65116

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

419.00

Transaction ID : B-65119

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 3 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

215.00

Transaction ID : B-65121

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

661.50

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 63 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

22.13

Transaction ID : B-65136

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

2.45

Transaction ID : B-65137

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

20.00

Transaction ID : B-65138

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

44.58

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 64 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

433.25

Transaction ID : B-65139

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Efundraising Connections**

Mailing Address 2831 G St. #200

City  
SacramentoState  
CAZip Code  
95816Purpose of Disbursement  
Merchant fee

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 1 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

7.00

Transaction ID : B-65140

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Farmers Brewing Co., LLC**

Mailing Address 1950 Market Pl.

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Refreshments

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

795.45

Transaction ID : B-65112

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1235.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 65 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Fifty Three Consulting**

Mailing Address 1270 E Ave. #212

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Campaign consulting

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

4000.00

Transaction ID : B-65125

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Flores, Chase, , ,**

Mailing Address 1543 Oro Grande

City  
YUBA CITYState  
CAZip Code  
95993Purpose of Disbursement  
Audio equipment

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 0 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

375.00

Transaction ID : B-65097

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Foodmax**

Mailing Address 2051 Whitman Ave.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Food for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

224.70

Transaction ID : B-65688

☒ Memo Item MEMO: Subvendor of-Jill LaMalfa**SUBTOTAL** of Disbursements This Page (optional).....▶

4375.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Foodmax**

Mailing Address 2051 Whitman Ave.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Fundraising supplies

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

224.70

Transaction ID : B-65708

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Gilliard, Blanning & Assoc.**

Mailing Address 5701 Lonetree Blvd. #301

City  
RocklinState  
CAZip Code  
95765Purpose of Disbursement  
Mass mail

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 7 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

14935.45

Transaction ID : B-65092

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Hobby-Lobby**

Mailing Address 1919 E 20th St,

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 4 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

456.62

Transaction ID : B-65690

☒ Memo Item MEMO: Subvendor of-Chase Card Services**SUBTOTAL** of Disbursements This Page (optional).....▶

14935.45

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. House Gift Shop**

Mailing Address House of Representatives

City  
WASHINGTONState  
DCZip Code  
20515Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

541.75

Transaction ID : B-65689

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Joann Stores**

Mailing Address 2485 Notre Dame Blvd, #310

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

359.00

Transaction ID : B-65695

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**C. LaMalfa, Jill, , ,**

Mailing Address P.O. Box 304

City  
RichvaleState  
CAZip Code  
95974Purpose of Disbursement  
Food for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

224.70

Transaction ID : B-65113

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

224.70

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 68 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. LS Sohnrey Family Foods**

Mailing Address 41 Skillin Ln.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
OROVILLEState  
CAZip Code  
95965

FEC Identification Number

C

Purpose of Disbursement  
Election night gathering

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

394.39

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65711

☒ Memo Item MEMO: Subvendor of-Chase Card Services

State:

District:

Full Name (Last, First, Middle Initial)

**B. Mac's Hardware and Rental**

Mailing Address 550 E Gridley Rd

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 07  |   | 2024    |

City  
GRIDLEYState  
CAZip Code  
95948

FEC Identification Number

C

Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

104.18

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65691

☒ Memo Item MEMO: Subvendor of-Chase Card Services

State:

District:

Full Name (Last, First, Middle Initial)

**C. Mooney Farms**

Mailing Address 120 Independence Cir.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 01  |   | 2024    |

City  
CHICOState  
CAZip Code  
95973

FEC Identification Number

C

Purpose of Disbursement  
Fundraisng event

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

600.00

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65122

☐ Memo Item

State:

District:

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

600.00

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

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 69 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Mooney Farms**

Mailing Address 120 Independence Cir.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
CHICOState  
CAZip Code  
95973

FEC Identification Number

C

Purpose of Disbursement  
Election night gathering

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

42.00

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

Transaction ID : B-65712

☒ Memo Item MEMO: Subvendor of-Chase Card Services

State:

District:

Full Name (Last, First, Middle Initial)

**B. Murphy, Emma, , ,**

Mailing Address 519 Juniper St.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 23  |   | 2024    |

City  
CHICOState  
CAZip Code  
95926

FEC Identification Number

C

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

475.00

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

Transaction ID : B-65683

☒ Memo Item MEMO: Subvendor of-Certified Employment Group

State:

District:

Full Name (Last, First, Middle Initial)

**C. Murphy, Emma, , ,**

Mailing Address 519 Juniper St.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 02  |   | 2024    |

City  
CHICOState  
CAZip Code  
95926

FEC Identification Number

C

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

647.80

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) ▼ |                                  |

Transaction ID : B-65703

☒ Memo Item MEMO: Subvendor of-Certified Employment Group

State:

District:

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

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 70 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Murphy, Emma, , ,**

Mailing Address 519 Juniper St.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

820.00

Transaction ID : B-51838

☒ Memo Item MEMO: Debt Subvendor of Certified Employment Group

Full Name (Last, First, Middle Initial)

**B. Murphy, Reed, , ,**

Mailing Address 519 Juniper St.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

790.00

Transaction ID : B-65684

☒ Memo Item MEMO: Subvendor of-Certified Employment Group

Full Name (Last, First, Middle Initial)

**C. Murphy, Reed, , ,**

Mailing Address 519 Juniper St.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

790.00

Transaction ID : B-65704

☒ Memo Item MEMO: Subvendor of-Certified Employment Group**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 71 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Murphy, Reed, , ,**

Mailing Address 519 Juniper St.

City  
CHICOState  
CAZip Code  
95926Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1230.00

Transaction ID : B-51839

☒ Memo Item MEMO: Debt Subvendor of Certified Employment Group

Full Name (Last, First, Middle Initial)

**B. Nava, Juan, , ,**

Mailing Address 3458 Schill Ln.

City  
ChicoState  
CAZip Code  
95973Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

710.00

Transaction ID : B-65685

☒ Memo Item MEMO: Subvendor of-Certified Employment Group

Full Name (Last, First, Middle Initial)

**C. Nava, Juan, , ,**

Mailing Address 3458 Schill Ln.

City  
ChicoState  
CAZip Code  
95973Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

900.00

Transaction ID : B-65705

☒ Memo Item MEMO: Subvendor of-Certified Employment Group**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 72 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Nava, Juan, , ,**

Mailing Address 3458 Schill Ln.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

City  
ChicoState  
CAZip Code  
95973Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

1580.00

Transaction ID : B-51840

☒ Memo Item MEMO: Debt Subvender of Certified Employment Group

Full Name (Last, First, Middle Initial)

**B. New Clairvaux**

Mailing Address P.O. Box 80

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 1 |   | 2 | 0 | 2 | 4 |

City  
FlournoyState  
CAZip Code  
96029Purpose of Disbursement  
Fundraising supplies

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

654.38

Transaction ID : B-65709

☒ Memo Item MEMO: Subvender of-Chase Card Services

Full Name (Last, First, Middle Initial)

**C. New Clairvaux**

Mailing Address P.O. Box 80

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

City  
FlournoyState  
CAZip Code  
96029Purpose of Disbursement  
Election night gathering

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

252.21

Transaction ID : B-65714

☒ Memo Item MEMO: Subvender of-Chase Card Services**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 73 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Office Depot**

Mailing Address 1607 Douglas Blvd.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 3 |   | 2 | 0 | 2 | 4 |

City  
ROSEVILLEState  
CAZip Code  
95661

FEC Identification Number

C

Purpose of Disbursement  
Supplies for fundraiser

001

Amount of Each Disbursement this Period

225.70

Candidate Name

Category/  
Type

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65694

☒ Memo Item MEMO: Subvendor of-Chase Card Services

State:

District:

Full Name (Last, First, Middle Initial)

**B. Public Square Partners, LLC**

Mailing Address 105 Saddlebred Lane

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 1 | 8 |   | 2 | 0 | 2 | 4 |

City  
GeorgetownState  
TXZip Code  
78633

FEC Identification Number

C

Purpose of Disbursement  
Online advertising

001

Amount of Each Disbursement this Period

12134.51

Candidate Name

Category/  
Type

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65093

☐ Memo Item

State:

District:

Full Name (Last, First, Middle Initial)

**C. Public Square Partners, LLC**

Mailing Address 105 Saddlebred Lane

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 8 |   | 2 | 0 | 2 | 4 |

City  
GeorgetownState  
TXZip Code  
78633

FEC Identification Number

C

Purpose of Disbursement  
Fundraising consulting and event expenses

001

Amount of Each Disbursement this Period

16970.79

Candidate Name

Category/  
Type

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

Transaction ID : B-65114

☐ Memo Item

State:

District:

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

29105.30

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Public Square Partners, LLC**

Mailing Address 105 Saddlebred Lane

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 7 |   | 2 | 0 | 2 | 4 |

City  
GeorgetownState  
TXZip Code  
78633

FEC Identification Number

C

Purpose of Disbursement  
Text Messaging

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

4831.48

Transaction ID : B-51644

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**B. Redding Republican Women Federated**

Mailing Address 19681 Soceola Ct.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

City  
REDDINGState  
CAZip Code  
96002

FEC Identification Number

C

Purpose of Disbursement  
Meeting

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

200.00

Transaction ID : B-65104

☐ Memo Item

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

Full Name (Last, First, Middle Initial)

**C. Reyes, Aristeo, , ,**

Mailing Address 18 Westminster Ct.

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

City  
CHICOState  
CAZip Code  
95928

FEC Identification Number

C

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

350.00

Transaction ID : B-65686

☒ Memo Item MEMO: Subvendor of-Certified  
Emolvment Group

Office Sought:

|                                    |
|------------------------------------|
| <input type="checkbox"/> House     |
| <input type="checkbox"/> Senate    |
| <input type="checkbox"/> President |

Disbursement For: 2024

|                                            |                                             |
|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼ |                                             |

State:

District:

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

5031.48

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 75 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Reyes, Aristeo, , ,**

Mailing Address 18 Westminster Ct.

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

640.00

Transaction ID : B-65706

☒ Memo Item MEMO: Subvendor of-Certified  
Employment Group

Full Name (Last, First, Middle Initial)

**B. Reyes, Aristeo, , ,**

Mailing Address 18 Westminster Ct.

City  
CHICOState  
CAZip Code  
95928Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

974.60

Transaction ID : B-51841

☒ Memo Item MEMO: Debt Subvendor of Certified  
Employment Group

Full Name (Last, First, Middle Initial)

**C. Riley's Jerky**

Mailing Address 203 Kinder Ave.

City  
GREENVILLEState  
CAZip Code  
95947Purpose of Disbursement  
Election night gathering

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 5 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

500.00

Transaction ID : B-65713

☒ Memo Item MEMO: Subvendor of-Chase Card  
Services**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 76 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Tableclothsfactory**

Mailing Address www.tableclothsfactory.com

City  
CYBERSPACEState  
CAZip Code  
90000Purpose of Disbursement  
Supplies for fundraiser

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 0 | 9 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

372.74

Transaction ID : B-65693

☒ Memo Item MEMO: Subvendor of-Chase Card Services

Full Name (Last, First, Middle Initial)

**B. Tate, Cooper, , ,**

Mailing Address 3112 Eagle Lake Ct.

City  
CHICOState  
CAZip Code  
95973Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 3 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

740.00

Transaction ID : B-65687

☒ Memo Item MEMO: Subvendor of-Certified Employment Group

Full Name (Last, First, Middle Initial)

**C. Tate, Cooper, , ,**

Mailing Address 3112 Eagle Lake Ct.

City  
CHICOState  
CAZip Code  
95973Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 |   | 0 | 2 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

680.00

Transaction ID : B-65707

☒ Memo Item MEMO: Subvendor of-Certified Employment Group**SUBTOTAL** of Disbursements This Page (optional).....▶

0.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 77 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Tate, Cooper, , ,**

Mailing Address 3112 Eagle Lake Ct.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 05  |   | 2024    |

City  
CHICOState  
CAZip Code  
95973

FEC Identification Number

C

Purpose of Disbursement  
Payroll

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

Amount of Each Disbursement this Period

1100.00

Transaction ID : B-51842

☒ Memo Item MEMO: Debt Subvendor of Certified Employment Group

State:

District:

Full Name (Last, First, Middle Initial)

**B. Ticketmaster**

Mailing Address 640 W. 28th St. 9th Fl.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 23  |   | 2024    |

City  
NEW YORKState  
NYZip Code  
10001

FEC Identification Number

C

Purpose of Disbursement  
Tickets for Fundraising event

003

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

Amount of Each Disbursement this Period

1018.70

Transaction ID : B-65716

☒ Memo Item MEMO: Subvendor of-Chase Card Services

State:

District:

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address P. O. Box 660108

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 04  |   | 2024    |

City  
DallasState  
TXZip Code  
75266

FEC Identification Number

C

Purpose of Disbursement  
Phone svc.

001

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                             |
|--------------------------|-------------------|---------------------------------------------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> General |
| <input type="checkbox"/> | Other (specify) ▼ |                                             |

Amount of Each Disbursement this Period

248.05

Transaction ID : B-65127

☐ Memo Item

State:

District:

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

248.05

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

114226.91

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 78 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Burreson, Mary Jo, , ,**

Mailing Address 4844 County Rd. MM

City  
OrlandState  
CAZip Code  
95963Purpose of Disbursement  
Refund

010

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

3300.00

Transaction ID : B-20314

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Nechay, Julia, , ,**

Mailing Address 301 Gibson Dr.

City  
RosevilleState  
CAZip Code  
95678Purpose of Disbursement  
Refund

010

Candidate Name

Category/  
Type

Office Sought:

|                          |           |
|--------------------------|-----------|
| <input type="checkbox"/> | House     |
| <input type="checkbox"/> | Senate    |
| <input type="checkbox"/> | President |

Disbursement For: 2024

|                          |                   |                                     |         |
|--------------------------|-------------------|-------------------------------------|---------|
| <input type="checkbox"/> | Primary           | <input checked="" type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                                     |         |

State:

District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 |   | 2 | 6 |   | 2 | 0 | 2 | 4 |

FEC Identification Number

C

Amount of Each Disbursement this Period

1700.00

Transaction ID : B-66077

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|   |   |   |   |   |   |   |   |   |   |

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

5000.00

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

5000.00

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 79 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Amodei for Nevada**

Mailing Address 503 N. Division St.

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 25  |   | 2024    |

City  
CARSON CITYState  
NVZip Code  
89703

FEC Identification Number

**C** C00496760Purpose of Disbursement  
Political contribution

001

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-65944

☐ Memo ItemCandidate Name  
Amodei, Mark, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV

District: 02

Full Name (Last, First, Middle Initial)

**B. Fischbach for Congress**

Mailing Address 2776 S. Arlington Mill Dr. #161

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 25  |   | 2024    |

City  
ARLINGTONState  
VAZip Code  
22206

FEC Identification Number

**C** C00717959Purpose of Disbursement  
Political contribution

001

Amount of Each Disbursement this Period

2000.00

Transaction ID : B-65886

☐ Memo ItemCandidate Name  
Fischbach, Michelle, , ,Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2024

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN

District: 07

Full Name (Last, First, Middle Initial)

**C. NEVADA COUNTY REPUBLICAN PARTY**

Mailing Address P. O. BOX 403

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 11  |   | 01  |   | 2024    |

City  
GRASS VALLEYState  
CAZip Code  
95949

FEC Identification Number

**C** C00556605Purpose of Disbursement  
Transfer Unneeded funds

011

Amount of Each Disbursement this Period

5000.00

Transaction ID : B-65988

☐ Memo Item

Candidate Name

NEVADA COUNTY REPUBLICAN PARTY

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

9000.00

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

**SCHEDULE B (FEC Form 3)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 80 OF 81

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

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)

Doug LaMalfa Committee

Full Name (Last, First, Middle Initial)

**A. Patriots for Perry**

Mailing Address 4075 Linglestown Rd. #119

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2024    |

City  
LINGLESTOWNState  
PAZip Code  
17112

FEC Identification Number

**C** C00510164Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

2000.00

Candidate Name  
Perry, Scott, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 10

Transaction ID : B-65899

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Pete Stauber for Congress**

Mailing Address 23 W. Central Entrance PMB 333

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 25  |   | 2024    |

City  
DULUTHState  
MNZip Code  
55811

FEC Identification Number

**C** C00650697Purpose of Disbursement  
Political contribution

001

Amount of Each Disbursement this Period

2000.00

Candidate Name  
Stauber, Pete, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 08

Transaction ID : B-65847

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Zinke for Congress**

Mailing Address 824 S. Milledge Ave. #101

Date of Disbursement

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 24  |   | 2024    |

City  
AthensState  
GAZip Code  
30605

FEC Identification Number

**C** C00778159Purpose of Disbursement  
Political contribution

001

Amount of Each Disbursement this Period

2000.00

Candidate Name  
Zinke, Ryan, , ,Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2024  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MT District: 01

Transaction ID : B-65904

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

6000.00

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

15000.00

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 81 OF 81

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**Doug LaMalfa Committee**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Breuker, John, , , Jr.

Nature of Debt (Purpose):

Campaign consulting

Mailing Address 1341 Sustin Dr. Apt 68

City

YUBA CITY

State

CA

Zip Code

95993

Outstanding Balance Beginning This Period

3000.00

Transaction ID : D-51641

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Certified Employment Group

Nature of Debt (Purpose):

Staffing

Mailing Address 2000 Powell St. #970

City

EMERYVILLE

State

CA

Zip Code

94608

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-51646

Amount Incurred This Period

8146.17

Payment This Period

8146.17

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Public Square Partners, LLC

Nature of Debt (Purpose):

Text messaging

Mailing Address 105 Saddlebred Lane

City

Georgetown

State

TX

Zip Code

78633

Outstanding Balance Beginning This Period

0.00

Transaction ID : D-51643

Amount Incurred This Period

4831.48

Payment This Period

4831.48

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) .....

0.00

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

0.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....