

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ISSA FOR CONGRESS

ADDRESS (number and street) P O BOX 760
 Check if different than previously reported. (ACC) VISTA CA 92085

2. **FEC IDENTIFICATION NUMBER** C00350520 **CITY** **STATE** CA **ZIP CODE** 92085 **STATE** CA **DISTRICT** 49
3. IS THIS REPORT NEW (N) OR AMENDED (A)

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 [] [] [] in the State of []
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [] [] [] in the State of []

5. Covering Period 10 01 2005 through 12 31 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer JUSTIN LEE

Signature of Treasurer Electronically Filed by JUSTIN LEE Date 06 28 2006

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

ISSA FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	147152.47	361493.85
(b) Total Contribution Refunds (from Line 20(d)).....	250.47	750.47
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	146902.00	360743.38
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	80797.22	247811.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	80797.22	247811.89
8. Cash on Hand at Close of Reporting Period (from Line 27).....	312104.43	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	1820000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
ISSA FOR CONGRESS

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

65523.47

124573.47

(ii) Unitemized.....

10079.00

16449.00

(iii) TOTAL of contributions

75602.47

141022.47

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

71550.00

220471.38

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

147152.47

361493.85

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

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

0.00

0.00

13. LOANS

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

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

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

0.00

0.00

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

0.00

0.00

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

1270.85

4610.16

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

148423.32

366104.01

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	80797.22	247811.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	40000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.47	500.47
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	250.00	250.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	250.47	750.47
21. OTHER DISBURSEMENTS.....	7446.82	12962.32
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	88494.51	301524.68

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	252175.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	148423.32
25. SUBTOTAL (add Line 23 and Line 24).....	400598.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88494.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	312104.43

CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)
(Millionaires' Amendment)

Name of Candidate		Candidate ID Number
DARRELL ISSA		H0CA48024
Name of Principal Campaign Committee		Committee ID Number
ISSA FOR CONGRESS		C C00350520
Committee Address P O BOX 760		
City	State	ZIP
VISTA	CA	92085
Report Covering Period (check one) <input type="checkbox"/> through June 30, or <input checked="" type="checkbox"/> through December 31 of the year preceding the year of the general election		
	Primary	General
1. Gross receipts of authorized committees	351604.01	14500.00
2. Aggregate amount of contributions from personal funds of the candidate	0.00	0.00
3. Gross receipts minus the candidate's personal contributions	351604.01	14500.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEIL ASH

Mailing Address PO BOX 1924

City RANCHO SANTA FE State CA Zip Code 92037

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 14 / 2005

Transaction ID: SA11A1.15708

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 3000 HILLSIDE DR

City BURLINGAME State CA Zip Code 94010

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

Name of Employer CO-OSCARTELLS Occupation EXECUTIVE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2005

Transaction ID: SA11A1.15735

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 7220 VISTAS LANE

City MCLEAN State VA Zip Code 22101

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

Name of Employer SELF-DIPLOMACY & INT'L PR-OTOCO Occupation PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2005

Transaction ID: SA11A1.15881

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAIG S BENEDETTO

Mailing Address 4369 ARGOS DR

City State Zip Code
SAN DIEGO CA 92116

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

Name of Employer Occupation
BENEDETTO & DANON PR, INC PARTNER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15797

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
GERALD S BERKE

Mailing Address 14915 RAMOS PLACE

City State Zip Code
PACIFIC PALISADES CA 90272

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

Name of Employer Occupation
UCLA CENTER HEALTH SCIENC-ES CHIEF, HEAD & NECK SURGERY

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.16252

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 8564 EL PASEO GRANDE

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
CATERING BY DESIGN CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15799

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **2000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MALIN BURNHAM

Mailing Address 535 SAN GORGONIO STREET

City State Zip Code
SAN DIEGO CA 92106

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

Name of Employer Occupation
BURNHAM REAL ESTATE SERVICES CHAIRMAN

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 0 5

Transaction ID: SA11A1.15707

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address PO BOX 5365

City State Zip Code
CARSON CA 90749

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

Name of Employer Occupation
MAGNADYNE CORP CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15736

Amount of Each Receipt this Period
2100.00

CONTRIBUTION

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

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

Mailing Address PO BOX 100

City State Zip Code
SAN LUIS REY CA 92068

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

Name of Employer Occupation
MELLANO & CO VP

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15865

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ▶ **3600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD CEDILLOS

Mailing Address 2 OHILL RIDGE

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
12 / 21 / 2005

Transaction ID: SA11A1.16395

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 324 CLARK ST

City State Zip Code
SOLANA BEACH CA 92075

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

Name of Employer THE CHASE GROUP Occupation OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2005

Transaction ID: SA11A1.15800

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
DENNIS R CLARK

Mailing Address 1220 HIGHLAND DR

City State Zip Code
DEL MAR CA 92014

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

Name of Employer INTERGRATED MICROWAVE Occupation PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
12 / 21 / 2005

Transaction ID: SA11A1.16345

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM C CLEMENT

Mailing Address 155 JACKSON ST APT 2402

City State Zip Code
SAN FRANCISCO CA 94111

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

Name of Employer Occupation
RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 5 / 2 0 0 5

Transaction ID: SA11A1.16276

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 2658 DEL MAR HEIGHTS #214

City State Zip Code
DEL MAR CA 92014

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

Name of Employer Occupation
THE DEALY GROUP OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15885

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 2534 BARTEL ST

City State Zip Code
SAN DIEGO CA 92123

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

Name of Employer Occupation
RETIRED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15802

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **600.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARION DEEB

Mailing Address 10120 RIVERSIDE DR

City State Zip Code
TOLUCA LAKE CA 91602

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

Name of Employer Occupation
XANA FLP EXECUTIVE

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.16249

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
BRIAN D DRISCOLL

Mailing Address 2535 MEADOWMIST LN

City State Zip Code
OLIVENHAIN CA 92024

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

Name of Employer Occupation
COLLIERS INTERNATIONAL SR VP OF SALES

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.16253

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 2220 OAKRIDGE WAY

City State Zip Code
VISTA CA 92083

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

Name of Employer Occupation
DDH OWNER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15737

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANTHONY DU PONT

Mailing Address 2180 CALLE FRESCOTA

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
DU PONT AEROSPACE CO INC PRESIDENT/CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15801

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
MAUREEN M ECKE

Mailing Address 1475 RAVEAN COURT

City State Zip Code
ENCINITAS CA 92024

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

Name of Employer Occupation
SELF EMPLOYED ATTORNEY

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15864

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
PAUL JR. ECKE

Mailing Address 5600 AVENIDA ENCINAS #100

City State Zip Code
CARLSBAD CA 92008

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

Name of Employer Occupation
ECKE FLOWERS OWNER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 5

Transaction ID: SA11A1.15780

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AARON FELDMAN

Mailing Address 4445 EASTGATE MALL, STE 400

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer Occupation
SUNROAD ENTERPRISES PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11A1.15726

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 1084 BANGOR ST

City State Zip Code
SAN DIEGO CA 92106

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

Name of Employer Occupation
SPORT FISHING ASSOC. OF CA PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15739

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address P.O. BOX 1921

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
BELL ENTERPRISES COO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15738

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KEVIN FORRESTER

Mailing Address 4403 MANCHESTER AVE
STE 205

City State Zip Code
ENCINITAS CA 92024

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15886

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JACK FELLER

Mailing Address PO BOX 2056

City State Zip Code
OCEANSIDE CA 92051

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.15764

Amount of Each Receipt this Period
250.00

CONTRIBUTION - (REFUND IN 12/05)

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

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

Mailing Address 7825 FAY AVENUE STE 200

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer MADISON INT'L COMMUNICATI-ON Occupation EXECUTIVE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15803

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK GOLDSTEIN

Mailing Address 224 DEL MAR HEIGHTS RD

City State Zip Code
DEL MAR CA 92014

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

Name of Employer Occupation
QUANTUM GROUP INC PRESIDENT/CEO

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15867

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
TIMOTHY P. HAIDINGER

Mailing Address 12707 HIGH BLUFF DR STE 200

City State Zip Code
SAN DIEGO CA 92130

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

Name of Employer Occupation
HAIDINGER PROPERTIES PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15805

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
LUAWANNA M. HALLSTROM

Mailing Address P O BOX 2832

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
OCEANSIDE PRODUCE BUSINESS MANAGER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15807

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	1750.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JUANITA HAYES

Mailing Address PO BOX 549

City State Zip Code
SAN MARCOS CA 92069

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

Name of Employer Occupation
STATE OF CA - CSUSM DIRECTOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2005

Transaction ID: SA11A1.15806

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address PO BOX 1743

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
HERRICK ENTERPRISES PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2005

Transaction ID: SA11A1.15742

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
SUNSHINE P HORTON

Mailing Address 1525 GRANITE HILLS DRIVE

City State Zip Code
EL CAJON CA 92019

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

Name of Employer Occupation
NONE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 18 / 2005

Transaction ID: SA11A1.15868

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN INGALLS

Mailing Address P.O. BOX 351

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
RETIREED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.15709

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
RAY R IRANI

Mailing Address 10889 WILSHIRE BLVD

City State Zip Code
LOS ANGELES CA 90024

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

Name of Employer Occupation
OCCIDENTAL PETROEUM CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.15769

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

Mailing Address 29400 RANCHO CALIFORNIA RD

City State Zip Code
TEMECULA CA 92591

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

Name of Employer Occupation
SELF EMPLOYED DEVELOPER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.16512

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAN KAHLER

Mailing Address PO BOX 104

City RANCHO SANTA FE State CA Zip Code 92067

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

Name of Employer Occupation
HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11A1.15828

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 4775 DOTY EAST

City SOUTHLINGTON State OH Zip Code 44470

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

Name of Employer Occupation
INFORMATION REQUESTED

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 5

Transaction ID: SA11A1.15771

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

Mailing Address 648 1ST ST

City HERMOSA BEACH State CA Zip Code 90254

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

Name of Employer Occupation
PACIFIC ENERGY RESOURCE MANAGEMENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: SA11A1.16028

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JANET KISTER

Mailing Address 3636 LUNETTA LANE

City FALLBROOK State CA Zip Code 92028

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

Name of Employer SUNLET NURSERY INC Occupation OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15871

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 702 PEARL ST #D

City LA JOLLA State CA Zip Code 92037

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

Name of Employer SAMMY'S CALIFORNIA WOODFI-RED PIZZA Occupation OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.16516

Amount of Each Receipt this Period
1500.00

In-kind - FOOD & BEVERAGE

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

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

Mailing Address 7860 SITO FRESCA

City CARLSBAD State CA Zip Code 92009

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

Name of Employer INVITROGEN CORP Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15876

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ▶ **2250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM LYNCH

Mailing Address PO BOX 2207

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
THE WILLIAM D LYNCH FOUNDATION PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.15767

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 5459 MITTENDORF LANE

City State Zip Code
ALEXANDRIA VA 22315

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

Name of Employer Occupation
THE FERGUSON GROUP EXECUTIVE

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: SA11A1.16152

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 2785 VISTA UMBROSA

City State Zip Code
NEWPORT BEACH CA 92606

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

Name of Employer Occupation
HIENERGY TECHNOLOGIES CHAIRMAN

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11A1.15831

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 1901 CAMINO VIDA ROBLE #100

City State Zip Code
CARLSBAD CA 92008

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

Name of Employer Occupation
MERRILL LYNCH INVESTMENTS

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15878

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 8284 LA JOLLA SHORES DR

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
MERRILL LYNCH STOCK BROKER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15854

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 1900 SPINDRIFT DRIVE

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
MANCHESTER RESORTS CHAIRMAN

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15760

Amount of Each Receipt this Period
2100.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	3350.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANNE L MARASCO

Mailing Address 12625 HIGH BLUFF DR, STE 212

City State Zip Code
SAN DIEGO CA 92130

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

Name of Employer Occupation
HOMEMAKER

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.16526

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
SAMUEL CARMINE MARASCO, III

Mailing Address 12625 HIGH BLUFF DR STE 212

City State Zip Code
SAN DIEGO CO 92130

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

Name of Employer Occupation
LANDGRANT DEVELOPMENT PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15743

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
SAMUEL CARMINE MARASCO, III

Mailing Address 12625 HIGH BLUFF DR STE 212

City State Zip Code
SAN DIEGO CO 92130

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

Name of Employer Occupation
LANDGRANT DEVELOPMENT PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼

Primary General
 Other (specify) ▼

2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15809

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DON W. MARTENS

Mailing Address 1921 PARK SKYLINE RD

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer
KNOBBE MARTENS & BEAR LAW FIRM

Occupation
ATTORNEY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.15788

Amount of Each Receipt this Period
400.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
KENNETH J MOSER

Mailing Address 11280 SPICA DR

City State Zip Code
SAN DIEGO CA 92126

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

Name of Employer
SELF MARKETING SUPPORT SY-STEMS

Occupation
OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15810

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
PHILIP E MOSSY

Mailing Address PO BOX 229

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer
MOSSY NISSAN

Occupation
PARTNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 5

Transaction ID: SA11A1.15705

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NEIL T NAGATA

Mailing Address PO BOX 74

City State Zip Code
SAN LUIS REY CA 92068

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

Name of Employer Occupation
NAGATA BROS FARMS INC OWNER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15745

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 611 S FAIRFAX ST

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation
QUALCOMM VP

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.15714

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
ONEIDA TRIBE OF INDIANS OF WISCONSIN

Mailing Address PO BOX 365

City State Zip Code
ONEIDA WI 54155

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

Name of Employer Occupation

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 0 5

Transaction ID: SA11A1.15729

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BILL PALMER

Mailing Address 27315 JEFFERSON AVE J134

City State Zip Code
TEMECULA CA 92590

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

Name of Employer Occupation
PAULSON MFG CORP VP MARKETING

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15860

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 2506 LYNN WAY

City State Zip Code
VISTA CA 92081

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.15710

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 17135 COYOTE BUSH DR

City State Zip Code
SAN DIEGO CA 92127

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

Name of Employer Occupation
ADVANCED NETWORK, INC MANAGEMENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.15719

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONRAD PREBYS

Mailing Address 5847 EL CAJON BLVD

City State Zip Code
SAN DIEGO CA 92115

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

Name of Employer Occupation
SELF EMPLOYED CONTRACTOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15749

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 821 CRESCENT DR

City State Zip Code
VISTA CA 92084

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

Name of Employer Occupation
DDH VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15752

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 821 CRESCENT DR

City State Zip Code
VISTA CA 92084

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

Name of Employer Occupation
DDH VP

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15812

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GENE RAY		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 5
Mailing Address 6025 VIA CANADA DEL OSITO		Transaction ID: SA11A1.16514
City State Zip Code FAIRBANKS RANCH CA 92067	Amount of Each Receipt this Period 511.00	
FEC ID number of contributing federal political committee. C	In-kind - FOOD & BEVERAGE	
Name of Employer Occupation TITAN CORPORATION CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 511.00	

Full Name (Last, First, Middle Initial) B. GENE RAY		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 7 / 2 0 0 5
Mailing Address 6025 VIA CANADA DEL OSITO		Transaction ID: SA11A1.15783
City State Zip Code FAIRBANKS RANCH CA 92067	Amount of Each Receipt this Period 1589.47	
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer Occupation TITAN CORPORATION CEO	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.47	

Full Name (Last, First, Middle Initial) C. LAWRENCE RICHMAN		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 8 / 2 0 0 5
Mailing Address 4807 VISTA RD		Transaction ID: SA11A1.15856
City State Zip Code LA MESA CA 91941	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer Occupation HERITAGE SECURITY SERVICES PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3100.47
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAURA A RIDER

Mailing Address 7339 PASEO VERDE

City State Zip Code
CARLSBAD CA 92009

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

Name of Employer Occupation
MERRILL LYNCH SENIOR ASSOCIATE

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15753

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 5186 CARROLL CANYON RD #100

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer Occupation
WESTERN FINANCIAL PLANNING

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15866

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 400 WEST BROADWAY #2600

City State Zip Code
SAN DIEGO CA 92101

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

Name of Employer Occupation
SHAPERY ENTERPRISES PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15872

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TIMOTHY T SIDLEY

Mailing Address 109 AUTUMN OAKS LANE

City State Zip Code
GLENDDORA CA 91741

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

Name of Employer Occupation
WESCORP VP

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11A1.15701

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
JAMES D SIMMONS

Mailing Address 3534 AVENIDA AMOROSA

City State Zip Code
ESCONDIDO CA 92029

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

Name of Employer Occupation
CONSULTANTS COLLABRATE INC PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15815

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 15517 OAKSTAND COURT

City State Zip Code
POWAY CA 92064

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

Name of Employer Occupation
LIFE SETTLEMENT SOLUTION PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

500.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15879

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NASSIF E SIMON

Mailing Address 2241 B 100 MFIELD LN

City State Zip Code
CORONA CA 92882

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

Name of Employer Occupation
SOS MARKETING INC OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15862

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address PO BOX 1666

City State Zip Code
OCEANSIDE CA 92051

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

Name of Employer Occupation
HARRY SINGH & SONS OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15814

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address PO BOX 1596

City State Zip Code
RANCHO SANTA FE CA 92067

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

Name of Employer Occupation
HARRY SINGH & SONS OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15813

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT A SIRAVO

Mailing Address 4330 ALMOND LANE

City State Zip Code
DAVIS CA 95616

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

Name of Employer Occupation
WESCORP CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.15703

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address PO BOX 7126

City State Zip Code
STOCKTON CA 95267

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

Name of Employer Occupation
A G SPANOS COMPANIES PRESIDENT

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 7 / 2 0 0 5

Transaction ID: SA11A1.15784

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
LAWRENCE W STIRLING

Mailing Address 2261 SAN JUAN RD

City State Zip Code
SAN DIEGO CA 92103

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

Name of Employer Occupation
SELF-EMPLOYED ATTORNEY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11A1.15712

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	1750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD STONE

Mailing Address 27069 SEA VISTA DR

City MALIBU State CA Zip Code 92065

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

Name of Employer STONE CONSTRUCTION Occupation OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15755

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 2563 CALLEDEL ORO

City LA JOLLA State CA Zip Code 92037

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

Name of Employer WESTERN STATES INVESTMENT Occupation INVESTOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15883

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address PO BOX 12331

City LA JOLLA State CA Zip Code 92039

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15884

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NORMAN A TANBER

Mailing Address 13 PORTO CERVO DR

City State Zip Code
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation
MERRILL LYNCH FINANCIAL ADVISOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15874

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
PETER J TANOUS

Mailing Address 1100 CONNECTICUT AVE NW #5540

City State Zip Code
WASHINGTON DC 20036

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

Name of Employer Occupation
LYNX INVESTMENT ADVISORY LLC EXECUTIVE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15817

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address 565 PEARL ST #225

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
HOUSEWIFE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
373.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.16518

Amount of Each Receipt this Period
373.00

In-kind - FOOD & BEVERAGE

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

SUBTOTAL of Receipts This Page (optional) ► **1623.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHARON TEABAK

Mailing Address 565 PEARL ST #225

City LA JOLLA State CA Zip Code 92037

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

Name of Employer Occupation
HOUSEWIFE

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 873.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.16531

Amount of Each Receipt this Period
500.00

In-kind - FOOD & BEVERAGE

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

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

Mailing Address 476 SILVER SHADOW DR

City SAN MARCOS State CA Zip Code 92078

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

Name of Employer Occupation
PARAMOUNT PETROEUM CORP MARKETING DIRECTOR

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 2 / 2 0 0 5

Transaction ID: SA11A1.16131

Amount of Each Receipt this Period
250.00

C

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

C. Full Name (Last, First, Middle Initial)
THOMAS H. TRIMBLE

Mailing Address 1820 AVE. DEL MUNDO #310

City CORONADO State CA Zip Code 92118

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

Name of Employer Occupation
TITAN CORPORATION SENIOR VICE PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15858

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS H. TRIMBLE

Mailing Address 1820 AVE. DEL MUNDO #310

City State Zip Code
CORONADO CA 92118

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

Name of Employer Occupation
TITAN CORPORATION SENIOR VICE PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15870

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 517 2ND STREET NW

City State Zip Code
WASHINGTON DC 20002

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

Name of Employer Occupation
DAVID TURCH & ASSOCIATES GOVERNMENT RELATIONS

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 0 / 2 0 0 5

Transaction ID: SA11A1.15838

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 3733 WARNER STREET

City State Zip Code
SAN DIEGO CA 92106

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

Name of Employer Occupation
KLINEDINST FLIEHMAN & MCK-ILLIP ATTORNEY

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11A1.15796

Amount of Each Receipt this Period
400.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM VANDEWEGHE

Mailing Address 3733 WARNER STREET

City State Zip Code
SAN DIEGO CA 92106

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

Name of Employer Occupation
KLINEDINST FLIEHMAN & MCK-ILLIP ATTORNEY

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15818

Amount of Each Receipt this Period
600.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
FRANK N VESSELS

Mailing Address 5772 CAMINO DEL REY

City State Zip Code
BONSALL CA 92003

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

Name of Employer Occupation
VESSELS STALLION FARM LLC MEMBER

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15756

Amount of Each Receipt this Period
2100.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
THOMAS P WALTERS

Mailing Address 3808 COLONIAL AVENUE

City State Zip Code
ALEXANDRIA VA 22309

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

Name of Employer Occupation
THOMAS WALTERS & ASSOCIAT-ES, INC. PRESIDENT

Receipt For: 2006 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11A1.15875

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	2950.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIC WENAAS

Mailing Address 12936 VIA LATINA

City State Zip Code
DEL MAR CA 92014

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

Name of Employer Occupation
RETIRE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15819

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

Mailing Address 6015 VISTA DE LA MESA

City State Zip Code
LA JOLLA CA 92037

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

Name of Employer Occupation
SENTRIE PARTNERS PARTNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11A1.15757

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

Mailing Address 7472 COLLINS RANCH TERRACE

City State Zip Code
SAN DIEGO CA 92130

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

Name of Employer Occupation
MERRILL LYNCH COMPLEX DIRECTOR

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11A1.15820

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROGER S WOOLLEY

Mailing Address PO BOX R

City RANCHO SANTA FE State CA Zip Code 92067

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

Name of Employer LAW OFFICES OF ROGER WOOLLEY Occupation ATTORNEY

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 07 / 2005

Transaction ID: SA11A1.15786

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 1156 SUGARBUSH DR

City VISTA State CA Zip Code 92084

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

Name of Employer BIOFILM, INC Occupation CEO

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2005

Transaction ID: SA11A1.15758

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Mailing Address PO BOX 85587

City SAN DIEGO State CA Zip Code 92186

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

Name of Employer CUBIC CORP Occupation EXECUTIVE

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
11 / 06 / 2005

Transaction ID: SA11A1.15821

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	2250.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 39 / 82	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JULIUS ZOLEZZI

Mailing Address 1050 ROSECRANS STE E

City State Zip Code
SAN DIEGO CA 92106

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
ZOLEZZI ENTERPRISES OWNER

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
11 / 02 / 2005

Transaction ID: SA11A1.15759

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	65523.47

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 5 / 2 0 0 5
Mailing Address 120 Park Avenue		Transaction ID: SA11C.16250
City State Zip Code New York NY 10017		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00089136		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. AMERICAN HOSPITAL ASSOCIATION PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 2 / 2 0 0 5
Mailing Address 325 Seventh Street NW Suite 700		Transaction ID: SA11C.15833
City State Zip Code Washington DC 20004		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00106146		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. AMERICAN NURSERY AND LANDSCAPE ASSOCIATION - POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 1 / 2 0 0 5
Mailing Address 1000 Vermont Avenue NW Suite #300		Transaction ID: SA11C.15774
City State Zip Code Washington DC 20005		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00022988		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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

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

FOR LINE NUMBER: PAGE 41 / 82
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. AMERICAN PODIATRIC MEDICAL ASSOCIATION INC PODIATRY POLITICAL ACTION COMMITTEE

Mailing Address 9312 OLD GEORGETOWN ROAD

City State Zip Code
BETHESDA MD 20814

FEC ID number of contributing federal political committee. **C** C00008839

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11C.15762

Amount of Each Receipt this Period
1000.00

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

Full Name (Last, First, Middle Initial)
B. AMERICAN TASK FORCE FOR LEBANON POLICY COUNCIL PAC

Mailing Address 2213 M STREET NW 3RD FLOOR

City State Zip Code
WASHINGTON DC 20037

FEC ID number of contributing federal political committee. **C** C00246827

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 3 / 2 0 0 5

Transaction ID: SA11C.15773

Amount of Each Receipt this Period
250.00

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

Full Name (Last, First, Middle Initial)
C. AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 555 13th Street Suite 600 West

City State Zip Code
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11C.15839

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BUILD PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 8 / 2 0 0 5	
Mailing Address 1201 15TH ST, NW		Transaction ID: SA11C.15731	
City State Zip Code WASHINGTON DC DC 20005	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C C00000901		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 3500.00		
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) B. CHEVRONTEXACO EMPLOYEES PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 5	
Mailing Address PO BOX 6016		Transaction ID: SA11C.15721	
City State Zip Code SAN RAMON CA 94583	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00035006		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

Full Name (Last, First, Middle Initial) C. EDISON INTERNATIONAL PAC		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 6 / 2 0 0 5	
Mailing Address 2244 WALNUT GROVE AVE		Transaction ID: SA11C.15716	
City State Zip Code ROSEMEAD CA 91770	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C C00019653		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 3000.00		
		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 2244 WALNUT GROVE AVE

City State Zip Code
ROSEMEAD CA 91770

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11C.15841

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
ELECTRIC DELIVERY POLITICAL ACTION COMMITTEE OF TXU CORP

Mailing Address 500 N Akard Suite 12-045

City State Zip Code
Dallas TX 75201

FEC ID number of contributing federal political committee. **C** C00255992

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11C.15775

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
FEDERAL EXPRESS POLITICAL ACTION COMMITTEE

Mailing Address 942 South Shady Grove Road

City State Zip Code
Memphis TN 38120

FEC ID number of contributing federal political committee. **C** C00068692

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 2 9 / 2 0 0 5

Transaction ID: SA11C.16426

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	8000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FLUOR CORPORATION PUBLIC AFFAIRS COMMITTEE (FLUOR PAC)		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 4 / 2 0 0 5
Mailing Address ONE FLUOR DANIEL DRIVE		Transaction ID: SA11C.17013
City State Zip Code ALISO VIEJO CA 92698		Amount of Each Receipt this Period 1500.00
FEC ID number of contributing federal political committee. C C00034132		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4990.38	

Full Name (Last, First, Middle Initial) B. FLUOR CORPORATION PUBLIC AFFAIRS COMMITTEE (FLUOR PAC)		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address ONE FLUOR DANIEL DRIVE		Transaction ID: SA11C.17014
City State Zip Code ALISO VIEJO CA 92698		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00034132		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5990.38	

Full Name (Last, First, Middle Initial) C. FOLEY& LARDER POLITICAL FUND		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 3000 K ST. SUITE 500		Transaction ID: SA11C.15842
City State Zip Code WASHINGTON DC 20007		Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C C00105338		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	3500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 45 / 82
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEN-PROBE INCORPORATED PAC (GEN-PROBE PAC)
 Mailing Address 10210 GENETIC CENTER DRIVE
 City State Zip Code
 SAN DIEGO CA 92121
 FEC ID number of contributing federal political committee. **C** C00405100
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 6 / 2 0 0 5
Transaction ID: SA11C.15822
 Amount of Each Receipt this Period
 250.00
CONTRIBUTION
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
GENERAL ATOMICS POLITICAL ACTION COMMITTEE
 Mailing Address Po Box 85608
 City State Zip Code
 San Diego CA 92186
 FEC ID number of contributing federal political committee. **C** C00215285
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 9 / 2 0 0 5
Transaction ID: SA11C.15722
 Amount of Each Receipt this Period
 1000.00
CONTRIBUTION
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
GENERAL ATOMICS POLITICAL ACTION COMMITTEE
 Mailing Address Po Box 85608
 City State Zip Code
 San Diego CA 92186
 FEC ID number of contributing federal political committee. **C** C00215285
 Name of Employer Occupation
 Receipt For: 2006
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 2 / 2 0 0 5
Transaction ID: SA11C.15763
 Amount of Each Receipt this Period
 1000.00
CONTRIBUTION
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2250.00**
TOTAL This Period (last page this line number only) ►

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HOLLAND & KNIGHT COMMITTEE FOR EFFECTIVE GOVERNMENT PAC

Mailing Address 2099 PENNSYLVANIA AVE NW SUITE 100

City State Zip Code
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C00171330

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 5

Transaction ID: SA11C.15845

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
JOHNSON & JOHNSON EMPLOYEES' GOOD GOVERNMENT FUND

Mailing Address ONE JOHNSON & JOHNSON PLAZA

City State Zip Code
NEW BRUNSWICK NJ 08933

FEC ID number of contributing federal political committee. **C** C00010983

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11C.15777

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
LIBERTY MUTUAL INSURANCE COMPANY-PAC

Mailing Address 175 Berkeley Steet

City State Zip Code
Boston MA 02117

FEC ID number of contributing federal political committee. **C** C00171843

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 5

Transaction ID: SA11C.15846

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ▶ **4000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 1155 21st Street NW
Suite 300

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00402602

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 50.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 7 / 2 0 0 5

Transaction ID: SA11C.16528

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
MCKENNA LONG AND ALDRIDGE LLP POLITICAL ACTION COMMITTEE

Mailing Address 303 PEACHTREE STREET SUITE 5300

City ATLANTA State GA Zip Code 30308

FEC ID number of contributing federal political committee. **C** C00391383

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 5

Transaction ID: SA11C.15723

Amount of Each Receipt this Period
2000.00

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

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

Mailing Address 16011 NE 36TH WAY

City REDMOND State WA Zip Code 98073

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11C.15848

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional)	▶	3050.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MINEPAC A POLITICAL ACTION COMMITTEE OF THE NATIONAL MINING ASSOCIATION

Mailing Address 101 Constution Ave. NW 500 East
Suite 500 East

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00304634

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 1 / 2 0 0 5

Transaction ID: SA11C.15725

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
NACS POLITICAL ACTION COMMITTEE

Mailing Address 1600 Duke Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00126763

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 0 / 2 0 0 5

Transaction ID: SA11C.15734

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION & RADIO PAC (TARPAC)

Mailing Address 1771 N STREET NW

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11C.15849

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 2901 Telestar Court		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 6 / 2 0 0 5
City	State	Zip Code
Falls Church	VA	22042
FEC ID number of contributing federal political committee.	<input type="text"/> C C00005249	Transaction ID: SA11C.15824
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: 2006	Election Cycle-to-Date ▼	<input type="text"/> 500.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		CONTRIBUTION
<input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. NRA - POLITICAL VICTORY FUND		Date of Receipt
Mailing Address 11250 WAPLES MILL ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 7 / 2 0 0 5
City	State	Zip Code
FAIRFAX	VA	22030
FEC ID number of contributing federal political committee.	<input type="text"/> C c00053553	Transaction ID: SA11C.15834
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: 2006	Election Cycle-to-Date ▼	<input type="text"/> 2000.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		CONTRIBUTION
<input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. PETROLEUM MARKETERS ASSOCIATION OF AMERICAN SMALL BUSINESS COMMITTEE		Date of Receipt
Mailing Address 1901 North Fort Myer Drive Suite 1200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 3 / 2 0 0 5
City	State	Zip Code
Arlington	VA	22209
FEC ID number of contributing federal political committee.	<input type="text"/> C C00035204	Transaction ID: SA11C.15717
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: 2006	Election Cycle-to-Date ▼	<input type="text"/> 1000.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		CONTRIBUTION
<input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3500.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 82
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 235 E 42ND ST

City State Zip Code
NEW YORK NY 10017

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
MM / DD / YYYY
10 / 01 / 2005

Transaction ID: SA11C.15692

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 77 BEALE ST

City State Zip Code
SAN FRANCISCO CA 94177

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
12 / 05 / 2005

Transaction ID: SA11C.16251

Amount of Each Receipt this Period
1000.00

C

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

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

Mailing Address 5325 ZUNI ST.
ROOM 724

City State Zip Code
DENVER CO 80221

FEC ID number of contributing federal political committee. **C** C00184374

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2005

Transaction ID: SA11C.15696

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 1605 KING STREET

City State Zip Code
ALEXANDRIA VA 22314

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 5

Transaction ID: SA11C.16149

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
SAF PAC/SOCIETY OF AMERICAN FLORISTS PAC

Mailing Address 1601 DUKE ST

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00111302

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 0 5

Transaction ID: SA11C.15718

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

Mailing Address 10260 CAMPUS POINT DR F2

City State Zip Code
SAN DIEGO CA 92121

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 9 / 2 0 0 5

Transaction ID: SA11C.15826

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SANOFI PASTEUR POLITICAL ACTION COMMITTEE		Date of Receipt MM / DD / YYYY 12 / 16 / 2005
Mailing Address DISCOVERY DRIVE		Transaction ID: SA11C.16428
City SWIFTWATER	State PA	Zip Code 18370
FEC ID number of contributing federal political committee. C C00215236		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) B. SBC COMMUNICATIONS EMPLOYEE FEDERAL PAC		Date of Receipt MM / DD / YYYY 11 / 17 / 2005
Mailing Address 175 E HOUSTON RM 4-J-01		Transaction ID: SA11C.15837
City SAN ANTONIO	State TX	Zip Code 78205
FEC ID number of contributing federal political committee. C c00109017		Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. SIEBEL PAC		Date of Receipt MM / DD / YYYY 11 / 16 / 2005
Mailing Address 2207 BRIDGEPOINTE PARKWAY		Transaction ID: SA11C.15835
City SAN MATEO	State CA	Zip Code 94404
FEC ID number of contributing federal political committee. C C00364711		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	12000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 82
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 2207 BRIDGEPOINTE PARKWAY

City State Zip Code
SAN MATEO CA 94404

FEC ID number of contributing federal political committee. **C** C00364711

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11C.15836

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

B. Full Name (Last, First, Middle Initial)
SONY PICTURES ENTERTAINMENT INC. PAC

Mailing Address 10202 W. WASHINGTON BLVD.

City State Zip Code
CULVER CITY CA 90232

FEC ID number of contributing federal political committee. **C** C00282038

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 5

Transaction ID: SA11C.15691

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
THE HOME DEPOT INC. BETTER GOVERNMENT COMMITTEE

Mailing Address 2455 PACES FERRY RD NW
FLOOR C-17

City State Zip Code
ATLANTA GA 30339

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11C.15844

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	8000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 82
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
UPSPAC

Mailing Address 55 GLENLAKE PKWY NE

City ATLANTA State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11C.15779

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

Mailing Address 1655 N FORT MYER DRIVE SUITE 850

City ARLINGTON State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11C.15778

Amount of Each Receipt this Period
1500.00

CONTRIBUTION

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

C. Full Name (Last, First, Middle Initial)
WALT DISNEY PRODUCTIONS EMPLOYEES PAC (DISNEY EMPLOYEES POLITICAL ACTION COM

Mailing Address 1150 17TH STREET NW SUITE 400

City WASHINGTON State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11C.15693

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional) ▶ **4500.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 82
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WESTERN GROWERS PAC - FEDERAL

Mailing Address 17620 FITCH STREET

City State Zip Code
IRVINE CA 92614

FEC ID number of contributing federal political committee.
C C00193979

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 6 / 2 0 0 5

Transaction ID: SA11C.15827

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	71550.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 82	
	(check only one)	
<input 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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

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

Mailing Address 1000 WEST SAN MARCOS BLVD

City State Zip Code
SAN MARCOS CA 92069

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3991.84

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	0	5

Transaction ID: SA15.16509

Amount of Each Receipt this Period
1270.85

INTEREST INCOME

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

SUBTOTAL of Receipts This Page (optional)	▶	1270.85
TOTAL This Period (last page this line number only)	▶	1270.85

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 / 82

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ABIGAIL'S CATERING		Transaction ID: SB17.16437 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 7829 NICHALS ST		Amount of Each Disbursement this Period 597.20
City LEMON GROVE State CA Zip Code 91945	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EVENT EXPENSE - CATERING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. CALIFORNIA REPUBLICAN PARTY		Transaction ID: SB17.16443 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 5
Mailing Address 1903 W MAGNOLIA BLVD		Amount of Each Disbursement this Period 350.00
City BURBANK State CA Zip Code 91506	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EVENT ROOM RENTAL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB		Transaction ID: SB17.16498 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 300 FIRST ST., SE		Amount of Each Disbursement this Period 184.41
City WASHINGTON State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FOOD & BEVERAGE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1131.61
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 58 / 82

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KRISTEN CRISTIANO		Transaction ID: SB17.16441 Date of Disbursement 10 / 14 / 2005
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 375.00
City SAN MARCOS State CA Zip Code 92078	Purpose of Disbursement DATABASE MANAGEMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) B. KRISTEN CRISTIANO		Transaction ID: SB17.16451 Date of Disbursement 10 / 28 / 2005
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 405.82
City SAN MARCOS State CA Zip Code 92078	Purpose of Disbursement DATABASE MANAGEMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) C. KRISTEN CRISTIANO		Transaction ID: SB17.16461 Date of Disbursement 11 / 11 / 2005
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 346.43
City SAN MARCOS State CA Zip Code 92078	Purpose of Disbursement DATABASE MANAGEMENT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	1127.25
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KRISTEN CRISTIANO		Transaction ID: SB17.16472 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 1 / 2 0 0 5
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 230.00
City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DATABASE MANAGEMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KRISTEN CRISTIANO		Transaction ID: SB17.16497 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 397.50
City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DATABASE MANAGEMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KRISTEN CRISTIANO		Transaction ID: SB17.16505 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 505 RUCH DRIVE #30		Amount of Each Disbursement this Period 400.00
City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement DATABASE MANAGEMENT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1027.50
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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DORSEE PRODUCTIONS		Transaction ID: SB17.16449 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address PO BOX 455		Amount of Each Disbursement this Period 111.00
City RANCHO SANTA FE State CA Zip Code 92067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement STAMPS Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DORSEE PRODUCTIONS		Transaction ID: SB17.16474 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 5
Mailing Address PO BOX 455		Amount of Each Disbursement this Period 250.00
City RANCHO SANTA FE State CA Zip Code 92067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE EXPENSE Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DORSEE PRODUCTIONS		Transaction ID: SB17.16499 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address PO BOX 455		Amount of Each Disbursement this Period 300.00
City RANCHO SANTA FE State CA Zip Code 92067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TELEPHONE Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	661.00
TOTAL This Period (last page this line number only) ▶	_____

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DORSEE PRODUCTIONS		Transaction ID: SB17.16501 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address PO BOX 455		Amount of Each Disbursement this Period 9300.00
City RANCHO SANTA FE State CA Zip Code 92067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING EXPENSE Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JOHN FRANKLIN		Transaction ID: SB17.16448 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 1 / 2 0 0 5
Mailing Address 23 SECOND ST NE #46		Amount of Each Disbursement this Period 575.00
City WASHINGTON State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement WEB DESIGN Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JOHN FRANKLIN		Transaction ID: SB17.16452 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 3 1 / 2 0 0 5
Mailing Address 23 SECOND ST NE #46		Amount of Each Disbursement this Period 313.30
City WASHINGTON State DC Zip Code 20002	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement TRAVEL REIMBURSEMENT Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10188.30
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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JOHN FRANKLIN		Transaction ID: SB17.16476 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 23 SECOND ST NE #46		Amount of Each Disbursement this Period 575.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement WEB DESIGN Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. JOHN FRANKLIN		Transaction ID: SB17.16503 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 23 SECOND ST NE #46		Amount of Each Disbursement this Period 575.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement WEB DESIGN Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. GILLIARD BLANNING WYSOCKI & ASSOCI		Transaction ID: SB17.16484 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 921 11TH STREET STE 400		Amount of Each Disbursement this Period 9227.14 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SACRAMENTO State CA Zip Code 95014	Purpose of Disbursement DIRECT MAIL PRINTING & POSTAGE Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10377.14
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOLDEN PACIFIC REAL ESTATE		Transaction ID: SB17.16504 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 2 / 2 0 0 5
Mailing Address 809 W SAN MARCOS		Amount of Each Disbursement this Period 2097.56
City SAN MARCOS State CA Zip Code 92078	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement RENT Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. NICO GUTIEREZ		Transaction ID: SB17.16453 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 5
Mailing Address 4348 PARKDALE AVE		Amount of Each Disbursement this Period 300.00
City LAS VEGAS State NV Zip Code 89121	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement EVENT EXPENSE - MUSICIAN Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HAMMOND & ASSOCIATES		Transaction ID: SB17.16432 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 801 NORTH PITT STREET STE 120		Amount of Each Disbursement this Period 2336.80
City ALEXANDRIA State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4734.36
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAMMOND & ASSOCIATES		Transaction ID: SB17.16459 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 4 / 2 0 0 5
Mailing Address 801 NORTH PITT STREET STE 120		Amount of Each Disbursement this Period 2381.95
City ALEXANDRIA State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. HAMMOND & ASSOCIATES		Transaction ID: SB17.16478 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address 801 NORTH PITT STREET STE 120		Amount of Each Disbursement this Period 2202.20
City ALEXANDRIA State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. HAMMOND & ASSOCIATES		Transaction ID: SB17.16500 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 1 / 2 0 0 5
Mailing Address 801 NORTH PITT STREET STE 120		Amount of Each Disbursement this Period 2000.00
City ALEXANDRIA State VA Zip Code 22314	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	6584.15
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DARRIN HERT		Transaction ID: SB17.16466 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5
Mailing Address 2806 ENCINO WOODS		Amount of Each Disbursement this Period 1400.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SAN ANTONIO State TX Zip Code 78259	Purpose of Disbursement SOFTWARE PROGRAMMER Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. DARRIN HERT		Transaction ID: SB17.16506 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 6 / 2 0 0 5
Mailing Address 2806 ENCINO WOODS		Amount of Each Disbursement this Period 675.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SAN ANTONIO State TX Zip Code 78259	Purpose of Disbursement SOFTWARE PROGRAMMER Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. SAMI LADEKI		Transaction ID: SB17.16517 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 5
Mailing Address 702 PEARL ST #D		Amount of Each Disbursement this Period 1500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City LA JOLLA State CA Zip Code 92037	Purpose of Disbursement In-kind - FOOD & BEVERAGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3575.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PATTON BOGGS		Transaction ID: SB17.16440 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 2550 M STREET NW		Amount of Each Disbursement this Period 6120.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement ATTORNEY FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PATTON BOGGS		Transaction ID: SB17.16464 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 1 / 2 0 0 5
Mailing Address 2550 M STREET NW		Amount of Each Disbursement this Period 486.61 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City WASHINGTON State DC Zip Code 20037	Purpose of Disbursement ATTORNEY FEES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PHOENIX DIRECT MAIL SERVICES		Transaction ID: SB17.16430 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 5
Mailing Address 7243 ENGINEER ROAD STE B		Amount of Each Disbursement this Period 2922.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SAN DIEGO State CA Zip Code 92111	Purpose of Disbursement PRINTING & MAILING Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9528.61
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PHOENIX DIRECT MAIL SERVICES		Transaction ID: SB17.16475 Date of Disbursement
Mailing Address 7243 ENGINEER ROAD STE B		<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
City SAN DIEGO	State CA	Zip Code 92111
Purpose of Disbursement MAILING SERVICE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="171.33"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. POSTMASTER		Transaction ID: SB17.16460 Date of Disbursement
Mailing Address 960 POSTAL WAY		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2005"/>
City VISTA	State CA	Zip Code 92083
Purpose of Disbursement ANNUAL PO BOX FEE	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="625.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. POSTMASTER		Transaction ID: SB17.16477 Date of Disbursement
Mailing Address 960 POSTAL WAY		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2005"/>
City VISTA	State CA	Zip Code 92083
Purpose of Disbursement BUSINESS REPLY ACCOUNT	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5796.33"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KAREN PRESCOTT		Transaction ID: SB17.16447 Date of Disbursement 10 / 21 / 2005
Mailing Address 1440 LOS CEDROS LANE		Amount of Each Disbursement this Period 2753.09
City ESCONDIDO State CA Zip Code 92026	Purpose of Disbursement POLITICAL CONSULTANT	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KAREN PRESCOTT		Transaction ID: SB17.16471 Date of Disbursement 11 / 21 / 2005
Mailing Address 1440 LOS CEDROS LANE		Amount of Each Disbursement this Period 2250.00
City ESCONDIDO State CA Zip Code 92026	Purpose of Disbursement POLITICAL CONSULTANT	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. KAREN PRESCOTT		Transaction ID: SB17.16502 Date of Disbursement 12 / 21 / 2005
Mailing Address 1440 LOS CEDROS LANE		Amount of Each Disbursement this Period 2250.00
City ESCONDIDO State CA Zip Code 92026	Purpose of Disbursement POLITICAL CONSULTANT	
Candidate Name		<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7253.09
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL TOUCH		Transaction ID: SB17.16439 Date of Disbursement
Mailing Address 815 S ROSE STREET		<input type="text" value="10"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City ESCONDIDO	State CA	Zip Code 92027
Purpose of Disbursement DATABASE MANAGEMENT	<input type="text" value="304.00"/>	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PROFESSIONAL TOUCH		Transaction ID: SB17.16463 Date of Disbursement
Mailing Address 815 S ROSE STREET		<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City ESCONDIDO	State CA	Zip Code 92027
Purpose of Disbursement DATABASE MANAGEMENT	<input type="text" value="316.54"/>	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PROFESSIONAL TOUCH		Transaction ID: SB17.16473 Date of Disbursement
Mailing Address 815 S ROSE STREET		<input type="text" value="11"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="05"/>
City ESCONDIDO	State CA	Zip Code 92027
Purpose of Disbursement DATABASE MANAGEMENT	<input type="text" value="38.00"/>	
Candidate Name	Amount of Each Disbursement this Period	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="658.54"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GENE RAY		Transaction ID: SB17.16515 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 5
Mailing Address 6025 VIA CANADA DEL OSITO		Amount of Each Disbursement this Period 511.00
City FAIRBANKS RANCH State CA Zip Code 92067	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind - FOOD & BEVERAGE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) B. SHARON TEABAK		Transaction ID: SB17.16520 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 5
Mailing Address 565 PEARL ST #225		Amount of Each Disbursement this Period 373.00
City LA JOLLA State CA Zip Code 92037	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind - FOOD & BEVERAGE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. SHARON TEABAK		Transaction ID: SB17.16532 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 5
Mailing Address 565 PEARL ST #225		Amount of Each Disbursement this Period 500.00
City LA JOLLA State CA Zip Code 92037	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement In-kind - FOOD & BEVERAGE Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1384.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE GREENSBURG GROUP, INC		Transaction ID: SB17.16442 Date of Disbursement
Mailing Address 245 FISCHER AVENUE C-3		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2005"/>
City COSTA MESA	State CA	Zip Code 92626
Purpose of Disbursement DATA REPORTS	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="900.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. THE MONACO GROUP		Transaction ID: SB17.16436 Date of Disbursement
Mailing Address 1000 ORTEGA WAY BUILDING C		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2005"/>
City PLACENTIA	State CA	Zip Code 92870
Purpose of Disbursement PRINTING	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2934.03"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. THE MONACO GROUP		Transaction ID: SB17.16479 Date of Disbursement
Mailing Address 1000 ORTEGA WAY BUILDING C		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>
City PLACENTIA	State CA	Zip Code 92870
Purpose of Disbursement PRINTING & MAILING	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="6300.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10134.03"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE UNIVERSITY CLUB		Transaction ID: SB17.16485 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 750 B STREET STE 3400		Amount of Each Disbursement this Period 1768.82 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SAN DIEGO State CA Zip Code 92101	Purpose of Disbursement EVENT EXPENSE - FOOD & BEVERAGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. U S TREASURY		Transaction ID: SB17.16507 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5
Mailing Address U S TREASURY		Amount of Each Disbursement this Period 270.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City OGDEN State UT Zip Code 84201	Purpose of Disbursement FORM 1120POL TAX Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. WESTERN PRESS		Transaction ID: SB17.16450 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
Mailing Address 4401 TWAIN AVE STE 20		Amount of Each Disbursement this Period 4139.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City SAN DIEGO State CA Zip Code 92120	Purpose of Disbursement PRINTING Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	6178.58
TOTAL This Period (last page this line number only) ▶	80339.49

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

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

FOR LINE NUMBER:
(check only one)

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<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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENE RAY

Mailing Address 6025 VIA CANADA DEL OSITO

City FAIRBANKS RANCH State CA Zip Code 92067

Purpose of Disbursement REFUND - EXCESS CONTRIBUTION

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB20A.16524

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	2		2	8		2	0	0	5

Amount of Each Disbursement this Period

0.47

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

SUBTOTAL of Disbursements This Page (optional)

0.47

TOTAL This Period (last page this line number only)

0.47

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

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

FOR LINE NUMBER:
(check only one)

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<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 checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. FRIENDS OF JACK FELLER

Transaction ID: SB20C.16523
Date of Disbursement

Mailing Address PO BOX 2056

M	M	/	D	D	/	Y	Y	Y	Y
1	2		2	8		2	0	0	5

City OCEANSIDE State CA Zip Code 92051

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
REFUND FOR 11/4/05 CONTRIBUTION

--

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

250.00

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

250.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOYS AND GIRLS CLUB OF SOUTHWEST COUNTY		Transaction ID: SB21.16490 Date of Disbursement
Mailing Address 28790 PUJOL ST		<input type="text" value="12"/> <input type="text" value="06"/> / <input type="text" value="2005"/>
City TEMECULA	State CA	Zip Code 92590
Purpose of Disbursement CHARITABLE CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. BOYS AND GIRLS CLUB OF VISTA		Transaction ID: SB21.16488 Date of Disbursement
Mailing Address 410 W CALIFORNIA AVENUE		<input type="text" value="12"/> <input type="text" value="06"/> / <input type="text" value="2005"/>
City VISTA	State CA	Zip Code 92083
Purpose of Disbursement CHARITABLE CONTRIBUTION	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. CAMPBELL FOR CONGRESS		Transaction ID: SB21.16470 Date of Disbursement
Mailing Address 18004 Sky Park Circle Suite 155		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="2005"/>
City Irvine	State CA	Zip Code 92660
Purpose of Disbursement IN-KIND CONTRIBUTION, P. ANDERSON TRAVEL	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="198.97"/>
Candidate Name	Category/ Type	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]
State: CA District: 48		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAMPBELL FOR CONGRESS		Transaction ID: SB21.16483 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address 18004 Sky Park Circle Suite 155		Amount of Each Disbursement this Period 665.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Irvine State CA Zip Code 92660	Purpose of Disbursement IN-KIND CONTRIBUTION - LODGING EXP Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. CAMP PENDLETON ARMED SERVICES YMCA		Transaction ID: SB21.16495 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 5
Mailing Address BOX 555028		Amount of Each Disbursement this Period 1000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City CAMP PENDLETON State CA Zip Code 92055	Purpose of Disbursement CHARITABLE CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. CEDARS BANK		Transaction ID: SB21.16511 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address 444 S FLOWER STREET		Amount of Each Disbursement this Period 549.95 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City LOS ANGELES State CA Zip Code 90071	Purpose of Disbursement BANK PROCESSING FEES FOR CREDIT CARD Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1549.95
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GARRICK FOR ASSEMBLY		Transaction ID: SB21.16445 Date of Disbursement 10 / 18 / 2005
Mailing Address 7185 NAVAJO ROAD STE L		Amount of Each Disbursement this Period 1000.00
City SAN DIEGO State CA Zip Code 92119	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. NORMAN, RALPH WARREN JR		Transaction ID: SB21.16456 Date of Disbursement 11 / 03 / 2005
Mailing Address 907 MAPLE HILL LANE		Amount of Each Disbursement this Period 1000.00
City ROCK HILL State SC Zip Code 29732	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NORTH COUNTY SOLUTIONS FOR CHANGE		Transaction ID: SB21.16492 Date of Disbursement 12 / 06 / 2005
Mailing Address 722 WEST CALIFORNIA AVENUE		Amount of Each Disbursement this Period 1000.00
City VISTA State CA Zip Code 92083	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement CHARITABLE CONTRIBUTION Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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 Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
ISSA FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RED ROOF INNS

Mailing Address 1717 E DYER RD

City SANTA ANA State CA Zip Code 92705

Purpose of Disbursement
IN-KIND LODGING EXP - CAMPBELL FOR CONGR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2006
 Primary General
 Other (specify) ▼

Transaction ID: SB21.16482

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
1	2		0	2		2	0	0	5

Amount of Each Disbursement this Period

665.90

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

SUBTOTAL of Disbursements This Page (optional)

665.90

TOTAL This Period (last page this line number only)

7215.85

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 79 / 82
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
 ISSA FOR CONGRESS

Transaction ID: SC/10.4350

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

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

TERMS

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

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

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

SUBTOTALS This Period This Page (optional)	200000.00
TOTALS This Period (last page in this line only)	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 80 / 82
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
 ISSA FOR CONGRESS

Transaction ID: SC/10.4359

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

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
300000.00	0.00	300000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 03 D D 21 Y Y Y Y 2000	03/21/2004	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

SUBTOTALS This Period This Page (optional)	300000.00
TOTALS This Period (last page in this line only)	<input type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 81 / 82
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
 ISSA FOR CONGRESS

Transaction ID: SC/10.4361

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

Original Amount of Loan 20000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 20000.00
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TERMS

Date Incurred M M 05 D D 16 Y Y Y Y 2000	Date Due 05/16/2004	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	20000.00
TOTALS This Period (last page in this line only)	
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 82 / 82
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
 ISSA FOR CONGRESS

Transaction ID: SC/10.4308

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

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

Date Incurred M M 09 D D 29 Y Y Y Y 2000	Date Due 09/29/2004	Interest Rate 0 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

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

SUBTOTALS This Period This Page (optional)	1300000.00
TOTALS This Period (last page in this line only)	1820000.00

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