

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

John Tavaglione for Congress

ADDRESS (number and street)

4201 Brockton Ave Ste 100

Check if different than previously reported. (ACC)

Riverside

CA

92501

2. FEC IDENTIFICATION NUMBER ▼

C C00498188

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

41

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

/  /

through

/  /

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 Richard Teaman

Signature of Treasurer Richard Teaman

[Electronically Filed]

Date

/  /

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

Office Use Only								
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**John Tavaglione for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	101660.00	1354174.12
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	101660.00	1353624.12
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	366093.69	1338852.80
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	315.62
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	366093.69	1338537.18
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	15810.27	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

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

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

Write or Type Committee Name

John Tavaglione for Congress

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

**I. RECEIPTS**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <input type="text" value="11"/> / <input type="text" value="06"/> / <input type="text" value="2012"/> (date of general election)	COLUMN C Total for <input type="text" value="11"/> / <input type="text" value="07"/> / <input type="text" value="2012"/> (date after general election)  through <input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2012"/> (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
<input type="text" value="56300.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(ii) Unitemized		
<input type="text" value="1610.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(iii) Total of contributions from individuals		
<input type="text" value="57910.00"/>	<input type="text" value="975524.12"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="5000.00"/>	<input type="text" value="10000.00"/>	<input type="text" value="0.00"/>
(c) Other Political Committees		
<input type="text" value="38750.00"/>	<input type="text" value="368050.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	600.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
101660.00	1354174.12	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	11525.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	30000.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	30000.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	315.62	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
101660.00	1396014.74	0.00

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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Write or Type Committee Name

John Tavaglione for Congress

 Report Covering the Period: From:  /  /  To:  /  / 
**II. DISBURSEMENTS**

	<b>COLUMN A</b> Total this Period	<b>COLUMN B</b> Election Cycle Total as of * (date of general election) (* See page 5 for date)	<b>COLUMN C</b> Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES	<input type="text" value="366093.69"/>	<input type="text" value="1338852.80"/>	<input type="text" value="10566.67"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate	<input type="text" value="20000.00"/>	<input type="text" value="30000.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))	<input type="text" value="20000.00"/>	<input type="text" value="30000.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees	<input type="text" value="0.00"/>	<input type="text" value="550.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

**POST-ELECTION DETAILED SUMMARY PAGE**

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

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COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

0.00	0.00	0.00
------	------	------

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

0.00	550.00	0.00
------	--------	------

**21. OTHER DISBURSEMENTS**

0.00	1135.00	0.00
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**22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)**

386093.69	1370537.80	10566.67
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**III. NET CONTRIBUTIONS (OTHER THAN LOANS)**

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

101660.00	1353624.12	0.00
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**IV. NET OPERATING EXPENDITURES**

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

366093.69	1338537.18	10566.67
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**V. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	300243.96
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	101660.00
25. SUBTOTAL (add Line 23 and Line 24).....	401903.96
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	386093.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	15810.27

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey Armour**

Mailing Address 20320 SW Birch St Ste 110

City Newport Beach	State CA	Zip Code 92660
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FEC ID number of contributing federal political committee. **C**

Name of Employer Armour Properties	Occupation real estate investors
---------------------------------------	-------------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11AI-4193**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 908 S Granville Ave # 5

City Brentwood	State CA	Zip Code 90049
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FEC ID number of contributing federal political committee. **C**

Name of Employer self	Occupation consultant/investor
--------------------------	-----------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11AI-4187**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 716 N Almanson

City Alhambra	State CA	Zip Code 91801
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FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation retired
-------------------------	-----------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4225**

Amount of Each Receipt this Period  
300.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce W Bennett**

Mailing Address 210 Via Lorca

City Newport Beach State CA Zip Code 92663

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

Name of Employer N/A Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4228**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 24 Sachem Way

City San Juan Capistrano State CA Zip Code 92694-0860

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

Name of Employer Murtaugh, Meyer Nelson & Treglia Occupation attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4234**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 17771 Cowan Ave Ste 100

City Irvine State CA Zip Code 92614

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

Name of Employer INSCO Insurance Services Inc. Occupation INSURANCE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4242**

Amount of Each Receipt this Period  
250.00

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

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

750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bill Campbell**

Mailing Address 9501 Henderson Way

City State Zip Code  
Orange CA 92861

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

Name of Employer Occupation  
County of Orange Orange County Supervisor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4229**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 1040 S Vintage Ave Ste A

City State Zip Code  
Ontario CA 91761

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

Name of Employer Occupation  
Cardenas Markets Inc. Sr. Vice President of Marketing

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2012

**Transaction ID : 11AI-4260**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 1040 S Vintage Ave Ste A

City State Zip Code  
Ontario CA 91761

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

Name of Employer Occupation  
Cardenas Markets Inc. Sr. Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 06 / 2012

**Transaction ID : 11AI-4261**

Amount of Each Receipt this Period  
2500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Carey**

Mailing Address 3857 Salmon River Ln

City Ontario State CA Zip Code 91761

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

Name of Employer Titan Transportation Occupation Accountant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : 11AI-4223**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 3090 Bristol Ste 220

City Costa Mesa State CA Zip Code 92626

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

Name of Employer Brookfield Residential Occupation Land Developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4238**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 40 Vienna St

City Newport Beach State CA Zip Code 92660

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

Name of Employer Concordia University Occupation Professor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4227**

Amount of Each Receipt this Period  
 250.00

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

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Ronald A Enge**

Mailing Address 6148 E Edgemont Dr

City State Zip Code  
Orange CA 92867

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

Name of Employer Occupation  
Blue Skies Sr. Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4240**

Amount of Each Receipt this Period  
250.00

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

Mailing Address PO Box 2469

City State Zip Code  
Riverside CA 92516

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

Name of Employer Occupation  
Walker Evans Enterprises owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : 11AI-4214**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address PO Box 2469

City State Zip Code  
Riverside CA 92516

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

Name of Employer Occupation  
Walker Evans Enterprises owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : 11AI-4213**

Amount of Each Receipt this Period  
2500.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas J Evertz**

Mailing Address 6131 Sierra Bravo

City Irvine State CA Zip Code 92603

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

Name of Employer Occupation  
Murphy & Evertz attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2012

**Transaction ID : 11AI-4167**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4 Jarden

City Newport Beach State CA Zip Code 92657

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

Name of Employer Occupation  
ISI Capital Partners, LLC Investment Banking

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : 11AI-4198**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4340 Von Karman Ave Ste 110

City Newport Beach State CA Zip Code 92660

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

Name of Employer Occupation  
Citivest, Inc. Real Estate

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11AI-4189**

Amount of Each Receipt this Period  
2500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Henn**

Mailing Address 1004 W Oceanfront

City Newport Beach State CA Zip Code 92661-1025

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

Name of Employer self Occupation consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11AI-4190**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 21 Old Course Dr

City Newport Beach State CA Zip Code 92660-4278

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

Name of Employer RPM Mortgage Occupation Mortgage Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4239**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 2600 Mesa Dr

City Newport Beach State CA Zip Code 92660

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

Name of Employer Inland Group Inc. Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4230**

Amount of Each Receipt this Period  
 250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Margaret Johnson**

Mailing Address **PO Box 1052**

City **Riverside** State **CA** Zip Code **92502**

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

Name of Employer **N/A** Occupation **retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 25 / 2012**

**Transaction ID : 11AI-4188**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **8 Oak Tree Dr**

City **Newport Beach** State **CA** Zip Code **92660**

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

Name of Employer **N/A** Occupation **retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : 11AI-4177**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **3 Landport**

City **Newport Beach** State **CA** Zip Code **92660**

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

Name of Employer **N/A** Occupation **retired**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 26 / 2012**

**Transaction ID : 11AI-4200**

Amount of Each Receipt this Period  
**1000.00**

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

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

**6000.00**

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

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

FOR LINE NUMBER: PAGE 15 OF 91  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN D LYON**

Mailing Address 1130 Linda Flora Dr

City State Zip Code  
Brentwood CA 90049

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

Name of Employer Occupation  
Katsky & Lyon LP attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 31 2012

**Transaction ID : 11AI-4222**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3276 1/2 Descanso Dr

City State Zip Code  
Los Angeles CA 90026

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

Name of Employer Occupation  
Archer Norris Attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 02 2012

**Transaction ID : 11AI-4241**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 3660 Arlington Ave

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation  
Riverside Medical Clinic Physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 18 2012

**Transaction ID : 11AI-4142**

Amount of Each Receipt this Period  
500.00

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

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

1100.00

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

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

FOR LINE NUMBER: PAGE 16 OF 91  
(check only one)  
 11a  11b  11c  11d  
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

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

Mailing Address 1825 University Ave

City Riverside State CA Zip Code 92507

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

Name of Employer Campus B & I Occupation business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4249**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 1281 Flemington Rd

City Riverside State CA Zip Code 92506

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

Name of Employer N/A Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : 11AI-4201**

Amount of Each Receipt this Period  
 2000.00

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

Mailing Address 6103 Esperanza

City Irvine State CA Zip Code 92618

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

Name of Employer Vanir Occupation Business Development

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4236**

Amount of Each Receipt this Period  
 250.00

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

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

3750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Menzia**

Mailing Address 11 Landport

City State Zip Code  
Newport Beach CA 92660

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

Name of Employer Occupation  
Alliant Insurance Insurance Consultant

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : 11AI-4199**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 16 Oroville

City State Zip Code  
Irvine CA 92602-0922

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

Name of Employer Occupation  
Archer Norris Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4233**

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
**Morongo Band of Mission Indians**

Mailing Address 12700 Pumarra Rd

City State Zip Code  
Banning CA 92220

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 31 / 2012

**Transaction ID : 11AI-4217**

Amount of Each Receipt this Period  
2500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

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

Mailing Address 17 Half Moon Bay Dr

City Laguna Beach State CA Zip Code 92656

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

Name of Employer Murphy & Evertz LLP Occupation attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4226**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 3334 E Coast Hwy # 511

City Corona Del Mar State CA Zip Code 92625

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

Name of Employer Fitness International Occupation PRINCIPAL

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11AI-4191**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 17333 Brookhurst Unit A-3

City Fountain Valley State CA Zip Code 92708

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

Name of Employer Martin Aircraft Tool Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4243**

Amount of Each Receipt this Period  
500.00

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Jeffrey L Osborn**

Mailing Address 9 Rockingham Dr

City State Zip Code  
Newport Beach CA 92660-4219

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

Name of Employer Occupation  
CBRE Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4232**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 6942 Brockton Ave

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation  
Spencer's Prescription Pharmacy business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 26 / 2012

**Transaction ID : 11AI-4207-I**

Amount of Each Receipt this Period  
250.00

Earmarked through Spencer's Prescription Pharmacy. Date received by conduit in memo record below.

**C.** Full Name (Last, First, Middle Initial)  
**Spencer's Prescription Pharmacy**

Mailing Address 6842 Brockton Ave

City State Zip Code  
Riverside CA 92506

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
10 / 29 / 2012

**Transaction ID : 11AI-4207-I-MEMO**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Total earmarked through conduit, PAC limits not affected.

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**William Patton**

Mailing Address 17842 Mitchell N

City Irvine State CA Zip Code 92614

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

Name of Employer self Occupation developer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 01 / 2012

**Transaction ID : 11AI-4224**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 215 Lewis Ct

City Corona State CA Zip Code 92882

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

Name of Employer Coast Framing Occupation President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4235**

Amount of Each Receipt this Period  
 750.00

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

Mailing Address 2012 The Strand

City Manhattan Beach State CA Zip Code 90266

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

Name of Employer The Strand Partners Occupation General Partner of Real Estate Fund

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : 11AI-4208**

Amount of Each Receipt this Period  
 2500.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Peggy A Rickard**

Mailing Address 8378 Brittany Ln

City Rancho Cucamonga State CA Zip Code 91701

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

Name of Employer Rickard Metals Inc. Occupation owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 18 / 2012

**Transaction ID : 11AI-4143**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 30215 Via Norte

City Temecula State CA Zip Code 92591-1656

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

Name of Employer KB Homes Occupation Vice President

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11AI-4237**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address PO Box 9049

City Newport Beach State CA Zip Code 92658

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

Name of Employer N/A Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : 11AI-4173**

Amount of Each Receipt this Period  
 250.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**RH Parvathama Setty**

Mailing Address 1523 Heirloom Ave

City Perris State CA Zip Code 92571

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

Name of Employer N/A Occupation retired

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : 11AI-4248**

Amount of Each Receipt this Period  
**2000.00**

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

Mailing Address 2913 Saturn St # E

City Brea State CA Zip Code 92821

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

Name of Employer Discovery Medical Occupation business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 02 / 2012**

**Transaction ID : 11AI-4231**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 6152 Hawarden Dr

City Riverside State CA Zip Code 92506

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

Name of Employer RCRMC Occupation physician

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2012**

**Transaction ID : 11AI-4185**

Amount of Each Receipt this Period  
**1500.00**

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

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

**3750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A. Temecula Valley Republican Women Federated**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1872

City: Temecula State: CA Zip Code: 92593

FEC ID number of contributing federal political committee: C

Name of Employer: Occupation:

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 26 / 2012

**Transaction ID : 11AI-4197**

Amount of Each Receipt this Period: 500.00

**B. Bonny Thompson**

Full Name (Last, First, Middle Initial)  
Mailing Address 1612 W Ocean Front

City: Newport Beach State: CA Zip Code: 92663

FEC ID number of contributing federal political committee: C

Name of Employer: Thompson Company Occupation: business owner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 10 / 31 / 2012

**Transaction ID : 11AI-4220**

Amount of Each Receipt this Period: 500.00

**C. Richard W Vanis Jr.**

Full Name (Last, First, Middle Initial)  
Mailing Address 8 Mission Bay Dr

City: Corona Del Mar State: CA Zip Code: 92625

FEC ID number of contributing federal political committee: C

Name of Employer: Archer Norris, PLC Occupation: attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 10 / 24 / 2012

**Transaction ID : 11AI-4184**

Amount of Each Receipt this Period: 2500.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Bruce D Varner**

Mailing Address 3750 University Ave Ste 610

City Riverside State CA Zip Code 92501

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

Name of Employer: Varner & Brandt Occupation: attorney

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 10 / 31 / 2012

**Transaction ID : 11AI-4215**

Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
**Jacques S Yeager Sr.**

Mailing Address 3483 Chicago Ave

City Riverside State CA Zip Code 92507

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

Name of Employer: self employed Occupation: Civil Engineer

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2650.00

Date of Receipt: 10 / 26 / 2012

**Transaction ID : 11AI-4203**

Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Baric, Tran & Minesinger**

Mailing Address 2603 Main St Ste 1050

City Irvine State CA Zip Code 92614

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 02 / 2012

**Transaction ID : 11AI-4205-P**

Amount of Each Receipt this Period: 250.00

See attribution below.

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

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

1750.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Steve Baric**

Mailing Address 2603 Main St Ste 1050

City Irvine State CA Zip Code 92614

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

Name of Employer Baric, Tran & Minesinger Occupation partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4244-PA**

Amount of Each Receipt this Period  
250.00

**[MEMO ITEM]**  
Partnership Attribution

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

Mailing Address 1825 University Ave

City Riverside State CA Zip Code 92507

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4211-P**

Amount of Each Receipt this Period  
1500.00

See attribution below.

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

Mailing Address 1825 University Ave

City Riverside State CA Zip Code 92507

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

Name of Employer Campus Family Dentistry Occupation Dentist

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 02 / 2012

**Transaction ID : 11AI-4250-PA**

Amount of Each Receipt this Period  
1500.00

**[MEMO ITEM]**  
Partnership Attribution

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 91
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**J & L Properties**

Mailing Address 3405 Arlington Ave

City Riverside State CA Zip Code 92506

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : 11AI-4219-P**

Amount of Each Receipt this Period  
2500.00

See attribution below.

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

Mailing Address 3405 Arlington Ave

City Riverside State CA Zip Code 92506

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

Name of Employer Occupation  
Tavaglione Construction & Development contractor

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : 11AI-4258-PA**

Amount of Each Receipt this Period  
2500.00

**[MEMO ITEM]**  
Partnership Attribution

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

2500.00

56300.00

# SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 OF 91  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Republican National Committee**

Mailing Address 310 First St SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 11B-4176**

Amount of Each Receipt this Period  
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Hudson for Congress**

Mailing Address PO Box 5053

City Concord State NC Zip Code 28027-1500

FEC ID number of contributing federal political committee. **C** C00504522

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : 11C-4218**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address PO Box 760

City Vista State CA Zip Code 92085

FEC ID number of contributing federal political committee. **C** C00350520

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : 11C-4216**

Amount of Each Receipt this Period  
 2000.00

**C.** Full Name (Last, First, Middle Initial)  
**Lewis for Congress Committee**

Mailing Address PO Box 247

City Redlands State CA Zip Code 92373

FEC ID number of contributing federal political committee. **C** C00090357

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11C-4251**

Amount of Each Receipt this Period  
 2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Committee to Re-Elect Congressman Dana Rohrabacher**

Mailing Address PO Box 623

City State Zip Code  
Huntington Beach CA 92648

FEC ID number of contributing federal political committee. **C C00224691**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11C-4245**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal Political Action Committee (AT&T Federal PAC)**

Mailing Address 208 S Akard St Ste 2701

City State Zip Code  
Dallas TX 75202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : 11C-4253**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**AT&T Inc. Federal Political Action Committee (AT&T Federal PAC)**

Mailing Address 208 S Akard St Ste 2701

City State Zip Code  
Dallas TX 75202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012

**Transaction ID : 11C-4254**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

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

Mailing Address **PO Box 442**

City **Sharpsburg** State **GA** Zip Code **30277**

FEC ID number of contributing federal political committee. **C C00411579**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 22 / 2012**

**Transaction ID : 11C-4172**

Amount of Each Receipt this Period  
**1000.00**

**B.** Full Name (Last, First, Middle Initial)  
**American Association of Clincial Urologists - American Urological Association (UROPAC)**

Mailing Address **1100 E Woodfield Rd Ste 520**

City **Hoffman Estates** State **IL** Zip Code **60173**

FEC ID number of contributing federal political committee. **C C00273003**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 24 / 2012**

**Transaction ID : 11C-4183**

Amount of Each Receipt this Period  
**2500.00**

**C.** Full Name (Last, First, Middle Initial)  
**Anesthesia Service Medical Group Inc. Good Government Fund**

Mailing Address **7185 Navajo Rd Ste P**

City **San Diego** State **CA** Zip Code **92119**

FEC ID number of contributing federal political committee. **C C00216184**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
**10 / 24 / 2012**

**Transaction ID : 11C-4175**

Amount of Each Receipt this Period  
**500.00**

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

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

**4000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
Build Political Action Committee of the National Association of Home Builders (BUILD PAC)

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : 11C-4262**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
Capital One Financial Corp. Associates Political Fund

Mailing Address 1680 Capital One Dr

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 25 / 2012

**Transaction ID : 11C-4186**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Capital One Financial Corp. Associates Political Fund

Mailing Address 1680 Capital One Dr

City Mc Lean State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00326595

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 02 / 2012

**Transaction ID : 11C-4252**

Amount of Each Receipt this Period  
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 32 OF 91
<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Chesapeake Energy Corporation FED-PAC**

Mailing Address **PO Box 18496**

**B**

City Oklahoma City	State OK	Zip Code 73154
-----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00389288**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : 11C-4211**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Conservative Oppurtunity Leadership and Enterprise PAC (COLE PAC)**

Mailing Address **12175 Chancery Station Cir**

City Herndon	State VA	Zip Code 20190
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00404392**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2012

**Transaction ID : 11C-4206**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Cooperative of American Physicians-Mutual Protection Trust (CAP-MPT) Federal PAC**

Mailing Address **333 S Hope St 8th floor**

City Los Angeles	State CA	Zip Code 90071
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00161604**

Name of Employer	Occupation
------------------	------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 11C-4181**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 1500.00

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

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

\_\_\_\_\_ 7500.00

\_\_\_\_\_



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A. Guardian Leadership PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2140 Three M Trail  
 City Deland State FL Zip Code 32720  
 FEC ID number of contributing federal political committee. **C** C00493221  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2012  
**Transaction ID : 11C-4255**  
 Amount of Each Receipt this Period  
 500.00

**B. National Roofing Contractors Association Roof PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 324 Fourth St NE  
 City Washington State DC Zip Code 20002  
 FEC ID number of contributing federal political committee. **C** C00244863  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012  
**Transaction ID : 11C-4202**  
 Amount of Each Receipt this Period  
 1000.00

**C. New Pioneers PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 S Washington St Ste 115  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00459123  
 Name of Employer Occupation  
 Receipt For: 2012  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 22 / 2012  
**Transaction ID : 11C-4171**  
 Amount of Each Receipt this Period  
 2500.00

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Online Lenders Alliance Political Action Committee (OLA PAC)**

Mailing Address P Obox 15480SE Station

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C C00427781**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 26 / 2012

**Transaction ID : 11C-4196**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Political Action Committee of the American Association of Orthopedic Surgeons**

Mailing Address 317 Massachusetts Ave NE 1st Floor

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C C00343137**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 06 / 2012

**Transaction ID : 11C-4263**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Safari Club International PAC (SCI-PAC)**

Mailing Address 4800 W Gates Pass Rd

City Tucson State AZ Zip Code 85745

FEC ID number of contributing federal political committee. **C C00122101**

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 11C-4182**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**The Doctors' Company Federal PAC (DOCPAC)**

Mailing Address 185 Greenwood Rd

City Napa State CA Zip Code 94558

FEC ID number of contributing federal political committee. **C** C00300376

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2012

**Transaction ID : 11C-4180**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**The Fund for American Exceptionalism**

Mailing Address 1801 N Shutt Hill Rd

City Huntington State IN Zip Code 46750

FEC ID number of contributing federal political committee. **C** C00512855

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2012

**Transaction ID : 11C-4210**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
**The Home Depot Inc. Political Action Committee**

Mailing Address 1155 F St NW

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 23 / 2012

**Transaction ID : 11C-4174**

Amount of Each Receipt this Period  
2500.00

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

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

6000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 91
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**The Tea Party Leadership Fund**

Mailing Address 209 Pennsylvania Ave SE Ste 2109

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00520825

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : 11C-4256**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**Trucking Political Action Committee of the American Trucking Associations Inc.**

Mailing Address 430 First St SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C** C00002881

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2012

**Transaction ID : 11C-4212**

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Voice for Freedom PAC**

Mailing Address 2700 Cumberland Parkway Ste 150

City Atlanta State GA Zip Code 30339

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2012

**Transaction ID : 11C-4257**

Amount of Each Receipt this Period  
1000.00

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

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

2250.00

38750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. 3 Thirty 3</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2012</b>
Mailing Address 333 Bayside Drive		Amount of Each Disbursement this Period <b>237.99</b>
City Newport Beach	State CA	
Zip Code 92660		<b>Transaction ID : 17-7867</b>
Purpose of Disbursement lunch & refreshments w/supporters after Orange County event		
Candidate Name		Category/ Type <b>001</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. AMERICAN AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address 4255 Amon Carter Blvd. MD 2400		Amount of Each Disbursement this Period <b>400.00</b>
City Fort Worth	State TX	
Zip Code 76155-2603		<b>Transaction ID : 17-7855</b>
Purpose of Disbursement air fare		
Candidate Name		Category/ Type <b>002</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. ANCHOS INC.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 20 / 2012</b>
Mailing Address 10773 HOLE AVE.		Amount of Each Disbursement this Period <b>2693.75</b>
City Riverside	State CA	
Zip Code 92505		<b>Transaction ID : 17-7731</b>
Purpose of Disbursement food 10/17 event		
Candidate Name		Category/ Type <b>003</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3331.74</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>A. AT&amp;T Data</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>18</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		18		2012
M M	/	D D	/	Y Y Y Y								
10		18		2012								
Mailing Address P. O. Box 105503		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Atlanta</td> <td>GA</td> <td>30348</td> </tr> </table>		City	State	Zip Code	Atlanta	GA	30348	<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00			
City	State	Zip Code										
Atlanta	GA	30348										
25.00												
Purpose of Disbursement iPhone monthly usage		Transaction ID : 17-7861										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For:											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>B. AT&amp;T Data</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>29</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		29		2012
M M	/	D D	/	Y Y Y Y								
10		29		2012								
Mailing Address P. O. Box 105503		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Atlanta</td> <td>GA</td> <td>30348</td> </tr> </table>		City	State	Zip Code	Atlanta	GA	30348	<table border="1"> <tr> <td>29.99</td> </tr> </table>	29.99			
City	State	Zip Code										
Atlanta	GA	30348										
29.99												
Purpose of Disbursement iPad monthly usage		Transaction ID : 17-7866										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For:											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

Full Name (Last, First, Middle Initial)		Date of Disbursement										
<b>C. AT&amp;T</b>		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>26</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		26		2012
M M	/	D D	/	Y Y Y Y								
10		26		2012								
Mailing Address PAYMENT CENTER		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Sacramento</td> <td>CA</td> <td>95887-0001</td> </tr> </table>		City	State	Zip Code	Sacramento	CA	95887-0001	<table border="1"> <tr> <td>377.86</td> </tr> </table>	377.86			
City	State	Zip Code										
Sacramento	CA	95887-0001										
377.86												
Purpose of Disbursement telephone		Transaction ID : 17-7864										
Candidate Name												
Office Sought:		Category/ Type										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> </tr> <tr> <td><input type="checkbox"/> President</td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Senate	<input type="checkbox"/> President						
<input type="checkbox"/> House	Disbursement For:											
<input type="checkbox"/> Senate												
<input type="checkbox"/> President												
State: District:		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	432.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aim Point Inc.</b>		Date of Disbursement										
Mailing Address 1020 12th St # 401		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		01		2012
M M	/	D D	/	Y Y Y Y								
11		01		2012								
City Sacramento	State CA	Zip Code 95814										
Purpose of Disbursement retainer for fundraising	<table border="1"> <tr> <td>003</td> </tr> </table> Category/ Type		003									
003												
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td>2000.00</td> </tr> </table> Transaction ID : 17-7850		2000.00									
2000.00												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial) <b>B. Vernon Altenburger</b>		Date of Disbursement										
Mailing Address 19992 Washington St.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>07</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		07		2012
M M	/	D D	/	Y Y Y Y								
11		07		2012								
City Corona	State CA	Zip Code 92881										
Purpose of Disbursement sign removal	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type		001									
001												
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td>308.50</td> </tr> </table> Transaction ID : 17-7905		308.50									
308.50												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

Full Name (Last, First, Middle Initial) <b>c. Vernon Altenburger</b>		Date of Disbursement										
Mailing Address 19992 Washington St.		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>26</td> <td></td> <td>2012</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		26		2012
M M	/	D D	/	Y Y Y Y								
11		26		2012								
City Corona	State CA	Zip Code 92881										
Purpose of Disbursement sign removal	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type		001									
001												
Candidate Name	Amount of Each Disbursement this Period											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<table border="1"> <tr> <td>75.00</td> </tr> </table> Transaction ID : 17-7912		75.00									
75.00												
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)												
State: District:												

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"> <tr> <td>2383.50</td> </tr> </table>	2383.50
2383.50		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**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 40 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 18 / 2012</b>
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period <b>112.50</b> <b>Transaction ID : 17-7725</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>003</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 19 / 2012</b>
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period <b>26.25</b> <b>Transaction ID : 17-7728</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>003</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 21 / 2012</b>
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period <b>1.88</b> <b>Transaction ID : 17-7740</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/Type <b>003</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>140.63</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 18.75 <b>Transaction ID : 17-7748</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement fees & charges		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 300.00 <b>Transaction ID : 17-7755</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement fees & charges		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 31.88 <b>Transaction ID : 17-7768</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement fees & charges		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	350.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 7.50	
City Washington	State DC	Zip Code 20003	Transaction ID : 17-7777	
Purpose of Disbursement fees & charges		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 189.38	
City Washington	State DC	Zip Code 20003	Transaction ID : 17-7795	
Purpose of Disbursement fees & charges		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Aristotle Interntional Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 205 Pennsylvania Ave. SE			Amount of Each Disbursement this Period 48.75	
City Washington	State DC	Zip Code 20003	Transaction ID : 17-7824	
Purpose of Disbursement fees & charges		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	245.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 120.00 <b>Transaction ID : 17-7836</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 37.50 <b>Transaction ID : 17-7851</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 22.50 <b>Transaction ID : 17-7895</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	180.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Aristotle Interntional Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 205 Pennsylvania Ave. SE		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : 17-7903</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement fees & charges Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Big Canyon Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012
Mailing Address One Big Canyon Dr		Amount of Each Disbursement this Period 6730.22 <b>Transaction ID : 17-7774</b>
City Newport Beach State CA Zip Code 92660-5299	Purpose of Disbursement 10/26 luncheon event Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CITY OF RIVERSIDE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 3900 MAIN ST.		Amount of Each Disbursement this Period 156.62 <b>Transaction ID : 17-7735</b>
City Riverside State CA Zip Code 92522	Purpose of Disbursement campaign headquarters - utilities Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7261.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Riverside County Young Republicans</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2012</b>
Mailing Address 1436 Evergreen Ln			Amount of Each Disbursement this Period <b>250.00</b>
City Corona	State CA	Zip Code 92879	<b>Transaction ID : 17-7793-S</b>
Purpose of Disbursement sponsorship donation		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> SUBVENDOR to Cameron & Co.
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address P OBox 1450			Amount of Each Disbursement this Period <b>177.05</b>
City Redlands	State CA	Zip Code 92373	<b>Transaction ID : 17-7782</b>
Purpose of Disbursement mileage		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address P OBox 1450			Amount of Each Disbursement this Period <b>81.81</b>
City Redlands	State CA	Zip Code 92373	<b>Transaction ID : 17-7783</b>
Purpose of Disbursement reimburse-food for volunteers		Category/ Type <b>001</b>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>258.86</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 208.25	
City Redlands	State CA	Zip Code 92373	Transaction ID : 17-7784	
Purpose of Disbursement reimburse-Von's-gift cards for volunteers		001	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 52.41	
City Redlands	State CA	Zip Code 92373	Transaction ID : 17-7785	
Purpose of Disbursement reimburse-HomeDepot-hardware for signs		001	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 178.95	
City Redlands	State CA	Zip Code 92373	Transaction ID : 17-7787	
Purpose of Disbursement reimburse-web ads & social marketing		001	Category/ Type	
Candidate Name				
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	439.61
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 2000.00 <b>Transaction ID : 17-7788</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement political consulting firm	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 65.00 <b>Transaction ID : 17-7789</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-web ads	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 151.12 <b>Transaction ID : 17-7790</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-food for volunteers	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2216.12
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 21.53
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-hardware for signs	<b>Transaction ID : 17-7791</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 250.00
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-donation to RiversideCountyYoungRepublicans	<b>Transaction ID : 17-7792</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STAPLES (Riverside)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 6296 Magnolia Ave.		Amount of Each Disbursement this Period 312.74
City RIVERSIDE	State CA	
Zip Code 92506	Purpose of Disbursement printer & toner	<b>Transaction ID : 17-7885-S</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	271.53
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Von's (Riverside)</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012				
Mailing Address 3520 Riverside Plaza			Amount of Each Disbursement this Period 208.25				
City Riverside	State CA	Zip Code 92506	Transaction ID : 17-7786-S				
Purpose of Disbursement gift cards for volunteers		001 Category/ Type					
Candidate Name		[MEMO ITEM] SUBVENDOR to Cameron & Co.					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President					Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:						

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012				
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 312.74				
City Redlands	State CA	Zip Code 92373	Transaction ID : 17-7874				
Purpose of Disbursement reimburse-printer & toner		001 Category/ Type					
Candidate Name		[MEMO ITEM] SUBVENDOR to Cameron & Co.					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President					Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:						

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012				
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 8.46				
City Redlands	State CA	Zip Code 92373	Transaction ID : 17-7875				
Purpose of Disbursement reimburse-sign hardward		006 Category/ Type					
Candidate Name		[MEMO ITEM] SUBVENDOR to Cameron & Co.					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President					Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:						

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	321.20
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 370.00 <b>Transaction ID : 17-7876</b>
City Redlands	State CA	Zip Code 92373	
Purpose of Disbursement canvassing & precinct walking program		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 155.00 <b>Transaction ID : 17-7877</b>
City Redlands	State CA	Zip Code 92373	
Purpose of Disbursement reimburse-social media ads		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450			Amount of Each Disbursement this Period 193.72 <b>Transaction ID : 17-7878</b>
City Redlands	State CA	Zip Code 92373	
Purpose of Disbursement reimburse-supplies & food for volunteers		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	718.72
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 4550.00
City Redlands	State CA	Zip Code 92373
Purpose of Disbursement canvassing & precinct walking program	Category/ Type 001	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Transaction ID : 17-7889

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 87.22
City Redlands	State CA	Zip Code 92373
Purpose of Disbursement reimburse-Staples-office supplies	Category/ Type 001	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Transaction ID : 17-7890

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 38.11
City Redlands	State CA	Zip Code 92373
Purpose of Disbursement reimburse-hardware for signs	Category/ Type 006	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Transaction ID : 17-7891

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4675.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 346.54 <b>Transaction ID : 17-7897</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-toner cartridges	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 27.64 <b>Transaction ID : 17-7898</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-sign hardware	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 3000.00 <b>Transaction ID : 17-7899</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement cavassing & precinct walking program	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3374.18
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 360.00 <b>Transaction ID : 17-7900</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-social media ads	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Cameron &amp; Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address P OBox 1450		Amount of Each Disbursement this Period 62.76 <b>Transaction ID : 17-7901</b>
City Redlands	State CA	
Zip Code 92373	Purpose of Disbursement reimburse-food & supplies for volunteers	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Exxon Mobile (Riverside)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 1147 University Ave.		Amount of Each Disbursement this Period 88.00 <b>Transaction ID : 17-7858</b>
City Riverside	State CA	
Zip Code 92507	Purpose of Disbursement fuel for vehicle	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	510.76
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 3269.89
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement mailer & mailing services	
Candidate Name	Category/Type 006	Transaction ID : 17-7726
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 14623.71
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	
Candidate Name	Category/Type 001	Transaction ID : 17-7727
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 9832.38
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	
Candidate Name	Category/Type 001	Transaction ID : 17-7743
Office Sought: House Senate President State: District:	Disbursement For: Primary General Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	27725.98
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>10311.06</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b>	
Candidate Name		<b>Transaction ID : 17-7744</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>9052.20</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b>	
Candidate Name		<b>Transaction ID : 17-7746</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>6768.74</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b>	
Candidate Name		<b>Transaction ID : 17-7747</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>26132.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>19330.13</b> <b>Transaction ID : 17-7767</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>10697.61</b> <b>Transaction ID : 17-7796</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>16100.01</b> <b>Transaction ID : 17-7797</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage <b>001</b> Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>46127.75</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>24886.25</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	<b>Transaction ID : 17-7807</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 30 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>11592.53</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	<b>Transaction ID : 17-7808</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>8002.16</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	<b>Transaction ID : 17-7823</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>44480.94</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>14536.95</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement postage	
Candidate Name	<b>001</b> Category/Type	<b>Transaction ID : 17-7835</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Hall Market Media Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 23 / 2012</b>
Mailing Address 4361 Winding Woods Way		Amount of Each Disbursement this Period <b>32500.00</b>
City State Zip Code Fair Oaks CA 95628	Purpose of Disbursement Cable campaign	
Candidate Name	<b>001</b> Category/Type	<b>Transaction ID : 17-7745</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. INLAND PRINTWORKS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 20 / 2012</b>
Mailing Address 9671 MAGNOLIA AVE		Amount of Each Disbursement this Period <b>589.45</b>
City State Zip Code RIVERSIDE CA 92503	Purpose of Disbursement invitations, envelopes & response cards 10/26 event	
Candidate Name	<b>003</b> Category/Type	<b>Transaction ID : 17-7734</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>47626.40</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. INLAND PRINTWORKS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 9671 MAGNOLIA AVE			Amount of Each Disbursement this Period 230.58 <b>Transaction ID : 17-7888</b>
City RIVERSIDE	State CA	Zip Code 92503	
Purpose of Disbursement letterhead & envelopes		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. LA BODEGA, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2012
Mailing Address 3512 Central Ave.			Amount of Each Disbursement this Period 1226.44 <b>Transaction ID : 17-7756</b>
City RIVERSIDE	State CA	Zip Code 92506	
Purpose of Disbursement 10/17/12 event		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Jonathan M Lamb</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 2220 Cathedral Ave NW			Amount of Each Disbursement this Period 490.62 <b>Transaction ID : 17-7892</b>
City Washington	State DC	Zip Code 20008	
Purpose of Disbursement mileage reimbursement		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1947.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial)  
**A. Leonic Communications - Elliot Hulse**

Mailing Address 1142 Bramford Ct

City Diamond Bar State CA Zip Code 91765

Purpose of Disbursement political consulting firm

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 875.00

Transaction ID : 17-7872

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Leonic Communications - Elliot Hulse**

Mailing Address 1142 Bramford Ct

City Diamond Bar State CA Zip Code 91765

Purpose of Disbursement expense reimbursement-office supplies & food for volunteers

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 02 / 2012

Amount of Each Disbursement this Period: 56.52

Transaction ID : 17-7873

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**c. Lounge Thirty Three**

Mailing Address 3639 Riverside Plaza

City Riverside State CA Zip Code 92506

Purpose of Disbursement election night party

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 15 / 2012

Amount of Each Disbursement this Period: 1740.00

Transaction ID : 17-7910

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 2671.52

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL J. ELDERMAN PHOTOGRAPHY</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>	
Mailing Address <b>3850 LEMON ST</b>			Amount of Each Disbursement this Period <b>971.58</b>	
City <b>RIVERSIDE</b>	State <b>CA</b>	Zip Code <b>92501</b>	Transaction ID : <b>17-7827</b>	
Purpose of Disbursement event photography		Category/ Type <b>003</b>		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. Michael Williams Company</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 02 / 2012</b>	
Mailing Address <b>3711 A Arlington Ave.</b>			Amount of Each Disbursement this Period <b>11758.70</b>	
City <b>RIVERSIDE</b>	State <b>CA</b>	Zip Code <b>92506</b>	Transaction ID : <b>17-7886</b>	
Purpose of Disbursement commission for fundraising		Category/ Type <b>003</b>		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>c. Michael Williams Company</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 02 / 2012</b>	
Mailing Address <b>3711 A Arlington Ave.</b>			Amount of Each Disbursement this Period <b>48.29</b>	
City <b>RIVERSIDE</b>	State <b>CA</b>	Zip Code <b>92506</b>	Transaction ID : <b>17-7887</b>	
Purpose of Disbursement reimburse-Vertical Response-e-mail blast		Category/ Type <b>003</b>		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
Disbursement For:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>12778.57</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Michael Williams Company</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2012
Mailing Address 3711 A Arlington Ave.		Amount of Each Disbursement this Period 2660.00
City RIVERSIDE	State CA	Zip Code 92506
Purpose of Disbursement commission for fundraising	Category/ Type 003	
Candidate Name	Transaction ID : 17-7907	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period 5825.00
City Baldwin Park	State CA	Zip Code 91706
Purpose of Disbursement printing	Category/ Type 006	
Candidate Name	Transaction ID : 17-7894-S	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.	

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 3269.89
City City Of Industry	State CA	Zip Code 91748-2318
Purpose of Disbursement printing & mail service	Category/ Type 006	
Candidate Name	Transaction ID : 17-7737-S	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2660.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 4051.80
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7736
Purpose of Disbursement Fix mailing		006 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Montage Press</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 12758 Schabarum Ave			Amount of Each Disbursement this Period 3270.00
City Baldwin Park	State CA	Zip Code 91706	Transaction ID : 17-7754-S
Purpose of Disbursement printing		006 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 125 N Vineland Ave			Amount of Each Disbursement this Period 2069.67
City City Of Industry	State CA	Zip Code 91748-2318	Transaction ID : 17-7753-S
Purpose of Disbursement printing & mail service		006 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4051.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>1982.55</b>
City State Zip Code City Of Industry CA 91748-2318	Purpose of Disbursement printing & mail service	<b>Transaction ID : 17-7752-S</b>
Candidate Name	Category/Type <b>006</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period <b>996.69</b>
City State Zip Code El Dorado Hills CA 95762-7318	Purpose of Disbursement design & production	<b>Transaction ID : 17-7741</b>
Candidate Name	Category/Type <b>006</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 22 / 2012</b>
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period <b>996.69</b>
City State Zip Code El Dorado Hills CA 95762-7318	Purpose of Disbursement design & production	<b>Transaction ID : 17-7742</b>
Candidate Name	Category/Type <b>006</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1993.38</b>
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period 2820.00
City Baldwin Park	State CA	
Zip Code 91706	Purpose of Disbursement printing	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period 2950.00
City Baldwin Park	State CA	
Zip Code 91706	Purpose of Disbursement printing	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 1288.97
City City Of Industry	State CA	
Zip Code 91748-2318	Purpose of Disbursement printing & mail service	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 2456.62 <b>Transaction ID : 17-7749</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Discriminate #3 mailing		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 2564.58 <b>Transaction ID : 17-7750</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Medicare Mini mailing		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 4051.94 <b>Transaction ID : 17-7751</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Problems/Solutions mailing reprint		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9073.14
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>12758 Schabarum Ave</b>		Amount of Each Disbursement this Period <b>2655.00</b>
City <b>Baldwin Park</b> State <b>CA</b> Zip Code <b>91706</b>	Purpose of Disbursement <b>printing</b> Category/Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7766-S</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.	

Full Name (Last, First, Middle Initial) <b>B. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>12758 Schabarum Ave</b>		Amount of Each Disbursement this Period <b>3450.00</b>
City <b>Baldwin Park</b> State <b>CA</b> Zip Code <b>91706</b>	Purpose of Disbursement <b>printing</b> Category/Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7765-S</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.	

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>3470 Park Dr</b>		Amount of Each Disbursement this Period <b>1597.20</b>
City <b>El Dorado Hills</b> State <b>CA</b> Zip Code <b>95762-7318</b>	Purpose of Disbursement <b>Dreams mailing</b> Category/Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7757</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1597.20</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>3470 Park Dr</b>			Amount of Each Disbursement this Period <b>3494.33</b> <b>Transaction ID : 17-7758</b>
City <b>El Dorado Hills</b>	State <b>CA</b>	Zip Code <b>95762-7318</b>	
Purpose of Disbursement <b>Discrimination Mini Card mailing</b>		Category/ Type <b>006</b>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>3470 Park Dr</b>			Amount of Each Disbursement this Period <b>3655.42</b> <b>Transaction ID : 17-7759</b>
City <b>El Dorado Hills</b>	State <b>CA</b>	Zip Code <b>95762-7318</b>	
Purpose of Disbursement <b>Medicare Mini Card mailing</b>		Category/ Type <b>006</b>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>3470 Park Dr</b>			Amount of Each Disbursement this Period <b>4274.98</b> <b>Transaction ID : 17-7760</b>
City <b>El Dorado Hills</b>	State <b>CA</b>	Zip Code <b>95762-7318</b>	
Purpose of Disbursement <b>Veteran Cards mailing</b>		Category/ Type <b>006</b>	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>11424.73</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 24 / 2012</b>
Mailing Address <b>3470 Park Dr</b>		Amount of Each Disbursement this Period <b>3289.88</b>
City <b>El Dorado Hills</b>	State <b>CA</b>	Transaction ID : <b>17-7761</b>
Zip Code <b>95762-7318</b>	Category/Type <b>006</b>	
Purpose of Disbursement <b>Dream Cards mailing</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 25 / 2012</b>
Mailing Address <b>125 N Vineland Ave</b>		Amount of Each Disbursement this Period <b>3144.45</b>
City <b>City Of Industry</b>	State <b>CA</b>	Transaction ID : <b>17-7770-S</b>
Zip Code <b>91748-2318</b>	Category/Type <b>006</b>	
Purpose of Disbursement <b>printing &amp; mail service</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.

Full Name (Last, First, Middle Initial) <b>c. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 26 / 2012</b>
Mailing Address <b>12758 Schabarum Ave</b>		Amount of Each Disbursement this Period <b>4613.00</b>
City <b>Baldwin Park</b>	State <b>CA</b>	Transaction ID : <b>17-7776-S</b>
Zip Code <b>91706</b>	Category/Type <b>006</b>	
Purpose of Disbursement <b>printing</b>		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		
		<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3289.88</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 3896.37	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7769	
Purpose of Disbursement Sleaze mailing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1023.63	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7771	
Purpose of Disbursement design & production		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____ District: _____				

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 457.94	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7772	
Purpose of Disbursement design & production		007 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____ District: _____				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5377.94
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1589.31	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7773	
Purpose of Disbursement design & production		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 5716.08	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7775	
Purpose of Disbursement Sleaze card mailing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Montage Press</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 12758 Schabarum Ave			Amount of Each Disbursement this Period 3820.00	
City Baldwin Park	State CA	Zip Code 91706	Transaction ID : 17-7805-S	
Purpose of Disbursement printing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7305.39
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period <b>3385.00</b>
City Baldwin Park	State CA	Zip Code 91706
Purpose of Disbursement printing	Category/ Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7804-S</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.	

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>2649.58</b>
City City Of Industry	State CA	Zip Code 91748-2318
Purpose of Disbursement printing & mail service	Category/ Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7803-S</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.	

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>1853.01</b>
City City Of Industry	State CA	Zip Code 91748-2318
Purpose of Disbursement printing & mail service	Category/ Type <b>006</b>	
Candidate Name		<b>Transaction ID : 17-7802-S</b>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.	

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 2296.11	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7798	
Purpose of Disbursement Discriminate #4 mailing		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 3283.16	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7799	
Purpose of Disbursement Vets/PE mailing		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 4194.44	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7800	
Purpose of Disbursement Press Enterpise/Vets mailing		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9773.71
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 4733.46
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Discriminate mailing		Category/ Type 006	<b>Transaction ID : 17-7801</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Montage Press</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 12758 Schabarum Ave			Amount of Each Disbursement this Period 2935.00
City Baldwin Park	State CA	Zip Code 91706	
Purpose of Disbursement printing		Category/ Type 006	<b>Transaction ID : 17-7846-S</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.

Full Name (Last, First, Middle Initial) <b>c. Montage Press</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 12758 Schabarum Ave			Amount of Each Disbursement this Period 3525.00
City Baldwin Park	State CA	Zip Code 91706	
Purpose of Disbursement printing		Category/ Type 006	<b>Transaction ID : 17-7845-S</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4733.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period 5455.00
City Baldwin Park	State CA	
Zip Code 91706	Purpose of Disbursement printing	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 1999.80
City City Of Industry	State CA	
Zip Code 91748-2318	Purpose of Disbursement printing & mail service	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period 3947.40
City City Of Industry	State CA	
Zip Code 91748-2318	Purpose of Disbursement printing & mail service	[MEMO ITEM] SUBVENDOR to Nygren & Company Inc.
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Montage Press</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 12758 Schabarum Ave		Amount of Each Disbursement this Period <b>4185.00</b>
City Baldwin Park	State CA	
Zip Code 91706	Purpose of Disbursement printing	<b>Transaction ID : 17-7848-S</b>
Candidate Name	<b>006</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>2453.76</b>
City City Of Industry	State CA	
Zip Code 91748-2318	Purpose of Disbursement printing & mail service	<b>Transaction ID : 17-7849-S</b>
Candidate Name	<b>006</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Ford Printing &amp; Mailing</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 125 N Vineland Ave		Amount of Each Disbursement this Period <b>1450.36</b>
City City Of Industry	State CA	
Zip Code 91748-2318	Purpose of Disbursement printing & mail service	<b>Transaction ID : 17-7847-S</b>
Candidate Name	<b>006</b> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> SUBVENDOR to Nygren & Company Inc.
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 4891.32	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7817	
Purpose of Disbursement Police/Legal Def mailing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 2478.00	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7818	
Purpose of Disbursement Signature mailing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 6759.43	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7819	
Purpose of Disbursement Police Cards mailing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14128.75
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period -3269.89 <b>Transaction ID : 17-7837</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement credit memo - duplicate payment	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 4367.92 <b>Transaction ID : 17-7838</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement Signature/Democrat mailing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 3636.83 <b>Transaction ID : 17-7839</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement People of Color/Heads mailing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4734.86
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 79 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 646.50 <b>Transaction ID : 17-7840</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement design & production	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 1508.50 <b>Transaction ID : 17-7841</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement design & production	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 1797.17 <b>Transaction ID : 17-7842</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement Heads Color postcard mailing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3952.17
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 5185.74 <b>Transaction ID : 17-7843</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Finale Pay to Play mailing		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 3040.51 <b>Transaction ID : 17-7844</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement Finale mailing		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1104.44 <b>Transaction ID : 17-7880</b>
City El Dorado Hills	State CA	Zip Code 95762-7318	
Purpose of Disbursement design & production		Category/ Type 006	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9330.69
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 81 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1185.25	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7881	
Purpose of Disbursement design & production		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1185.25	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7882	
Purpose of Disbursement design & production		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012	
Mailing Address 3470 Park Dr			Amount of Each Disbursement this Period 1427.69	
City El Dorado Hills	State CA	Zip Code 95762-7318	Transaction ID : 17-7883	
Purpose of Disbursement design & production		Category/ Type 006		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3798.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 862.00 <b>Transaction ID : 17-7884</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement design & production	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 7217.90 <b>Transaction ID : 17-7893</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement Compare mailing	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Nygren &amp; Company Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2012
Mailing Address 3470 Park Dr		Amount of Each Disbursement this Period 141.70 <b>Transaction ID : 17-7902</b>
City El Dorado Hills	State CA	
Zip Code 95762-7318	Purpose of Disbursement federal express delivery	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8221.60
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 91			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Postmaster</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2012
Mailing Address 3681 Sunnyside Dr.		Amount of Each Disbursement this Period 450.00 <b>Transaction ID : 17-7806</b>
City Riverside	State CA	
Zip Code 92506	Purpose of Disbursement postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. STAPLES (Riverside)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 6296 Magnolia Ave.		Amount of Each Disbursement this Period 208.32 <b>Transaction ID : 17-7853</b>
City RIVERSIDE	State CA	
Zip Code 92506	Purpose of Disbursement office supplies-paper, printer ink, etc	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. STAPLES (Riverside)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 6296 Magnolia Ave.		Amount of Each Disbursement this Period 175.56 <b>Transaction ID : 17-7857</b>
City RIVERSIDE	State CA	
Zip Code 92506	Purpose of Disbursement office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	833.88
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 91		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Safeguard Business Systems</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 3600 Lime St Ste 615		Amount of Each Disbursement this Period 86.29
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement check order	<b>Transaction ID : 17-7860</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Tony Siciliani</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2012
Mailing Address 3003 O St		Amount of Each Disbursement this Period 3772.00
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement doorhangers	<b>Transaction ID : 17-7879</b>
Candidate Name	006 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 5783.17
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement October campaign reporting services	<b>Transaction ID : 17-7906</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9641.46
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 85 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>PO Box 320412</b>		Amount of Each Disbursement this Period <b>2000.00</b> <b>Transaction ID : 17-7778</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22320</b>	Purpose of Disbursement <b>fundraising services retainer - Nov.</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>PO Box 320412</b>		Amount of Each Disbursement this Period <b>3605.00</b> <b>Transaction ID : 17-7779</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22320</b>	Purpose of Disbursement <b>commission for fundraising</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. The Theodore Company LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 29 / 2012</b>
Mailing Address <b>PO Box 320412</b>		Amount of Each Disbursement this Period <b>52.77</b> <b>Transaction ID : 17-7780</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22320</b>	Purpose of Disbursement <b>reimburse - fed ex charges</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>5657.77</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 86 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 30.00 <b>Transaction ID : 17-7859</b>
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement iPad monthly usage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 239.59 <b>Transaction ID : 17-7862</b>
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Mike Williams</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 6 Riptide Ct.		Amount of Each Disbursement this Period 5686.93 <b>Transaction ID : 17-7732</b>
City Newport Beach	State CA	
Zip Code 92667	Purpose of Disbursement reimbursement-Classic Party Rentals-10/17 event	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5956.52
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 87 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mike Williams</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2012
Mailing Address 6 Riptide Ct.		Amount of Each Disbursement this Period 300.00 <b>Transaction ID : 17-7738</b>
City Newport Beach	State CA	
Zip Code 92667	Purpose of Disbursement reimbursement-Robert Scarano-entertainment 10/17 event	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Mike Williams</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 6 Riptide Ct.		Amount of Each Disbursement this Period 75.43 <b>Transaction ID : 17-7828</b>
City Newport Beach	State CA	
Zip Code 92667	Purpose of Disbursement reimburse-Clone Copy-copy fundraising event letter	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Hyatt Regency Century Plaza (LA)</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 2025 Avenue of the Stars		Amount of Each Disbursement this Period 295.03 <b>Transaction ID : 17-7833-S</b>
City Los Angeles	State CA	
Zip Code 90067	Purpose of Disbursement accomodation fundraising event	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	375.43
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 91			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ritz Camera &amp; Image</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 9590 Magnolia Ave			Amount of Each Disbursement this Period 674.37		
City Riverside	State CA	Zip Code 92503	Transaction ID : 17-7834-S		
Purpose of Disbursement event photos		003 Category/ Type			
Candidate Name		[MEMO ITEM] SUBVENDOR to Mike Williams			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. Mike Williams</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 6 Riptide Ct.			Amount of Each Disbursement this Period 295.03		
City Newport Beach	State CA	Zip Code 92667	Transaction ID : 17-7829		
Purpose of Disbursement reimburse-Hyatt-accomodations night of fundraising event		003 Category/ Type			
Candidate Name		[MEMO ITEM] SUBVENDOR to Mike Williams			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. Mike Williams</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012		
Mailing Address 6 Riptide Ct.			Amount of Each Disbursement this Period 49.01		
City Newport Beach	State CA	Zip Code 92667	Transaction ID : 17-7830		
Purpose of Disbursement reimburse-Vertical Response-e-mail blast		003 Category/ Type			
Candidate Name		[MEMO ITEM] SUBVENDOR to Mike Williams			
Office Sought:	Disbursement For:				
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	344.04
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 91	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Mike Williams</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 6 Riptide Ct.		Amount of Each Disbursement this Period <b>107.05</b>
City Newport Beach	State CA	
Purpose of Disbursement reimburse-Huntington Hotel-accomodations night before fundraising event	Zip Code 92667	<b>Transaction ID : 17-7831</b>
Candidate Name	Category/ Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mike Williams</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address 6 Riptide Ct.		Amount of Each Disbursement this Period <b>674.37</b>
City Newport Beach	State CA	
Purpose of Disbursement reimburse-Ritz Camera-event photos	Zip Code 92667	<b>Transaction ID : 17-7832</b>
Candidate Name	Category/ Type <b>003</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>781.42</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>365641.34</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 90 OF 91	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. John Tavaglione</b>		Date of Disbursement M M / D D / Y Y Y Y <b>10 / 31 / 2012</b>
Mailing Address <b>3825 Westwood Dr</b>		Amount of Each Disbursement this Period <b>20000.00</b>
City <b>Riverside</b> State <b>CA</b> Zip Code <b>92504</b>	Purpose of Disbursement <b>Loan Payment (Principal)</b>	
Candidate Name <b>John Tavaglione</b>		<b>Transaction ID : 19a-7825</b>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: <b>CA</b> District: <b>41</b>	Category/Type	

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>20000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>20000.00</b>

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **John Tavaglione for Congress** Transaction ID : **C10-19-LR**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <b>John Tavaglione</b>	<b>[PERSONAL FUNDS]</b>	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3825 Westwood Dr		

City	State	ZIP Code
Riverside	CA	92504

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	30000.00	0.00

**TERMS**

Date Incurred	Date Due	Interest Rate	Secured:
M 12 / D 30 / Y 2011	M 12 / D 30 / Y 2012	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

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

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

<b>SUBTOTALS</b> This Period This Page (optional).....	<input type="text"/> 0.00
<b>TOTALS</b> This Period (last page in this line only).....	<input type="text"/> 0.00
<b>Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.</b>	