

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

Friends of Farr

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

C C00290429

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

CA

20

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y
04 / 01 / 2011

through

M M / D D / Y Y Y Y
06 / 30 / 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sidney Slade

Signature of Treasurer Sidney Slade

[Electronically Filed]

Date

M M / D D / Y Y Y Y
10 / 22 / 2012

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Farr

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	74930.36	129715.20
(b) Total Contribution Refunds (from Line 20(d))	2400.00	3379.95
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	72530.36	126335.25
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	39061.01	123485.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	1000.00	1000.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38061.01	122485.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	88224.61	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Farr

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	29130.36	56705.36
(ii) Unitemized.....	8300.00	15026.00
(iii) TOTAL of contributions from individuals ▶	37430.36	71731.36
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	37500.00	57983.84
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	74930.36	129715.20
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	873.93
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	1000.00	1000.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	100.30	334.82
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	76030.66	131923.95

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	39061.01	123485.33
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	2400.00	3379.95
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	2400.00	3379.95
21. OTHER DISBURSEMENTS	8000.00	23650.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	49461.01	150515.28

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	61654.96
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	76030.66
25. SUBTOTAL (add Line 23 and Line 24).....	137685.62
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	49461.01
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	88224.61

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Update contributor information on line 11c

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Robert H. Alexander

Mailing Address 8080 Lake Place

City Carmel State CA Zip Code 93923

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

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

Transaction ID : INCA13902

Amount of Each Receipt this Period
250.00

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

Mailing Address P.O. Box 1398

City Pebble Beach State CA Zip Code 93953

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1065.18**

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

Transaction ID : NONA13959

Amount of Each Receipt this Period
1065.18

Food for Event

C. Full Name (Last, First, Middle Initial)
David G. Armanasco

Mailing Address P.O. Box 1398

City Pebble Beach State CA Zip Code 93953

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

Name of Employer Armanasco Public Relations Occupation Public Relations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1065.18**

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

Transaction ID : NONA13958

Amount of Each Receipt this Period
1065.18

Food for Event

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

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

2380.36

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : NONA13959

In-Kind Contribution

Form/Schedule: SA11AI

Transaction ID: NONA13958

In-Kind Contribution

**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 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Ted Balestreri

Mailing Address 555 Abrego Street

City Monterey State CA Zip Code 93940

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

Name of Employer Cannery Row Company Occupation Chief Executive Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13950

Amount of Each Receipt this Period
 500.00

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

Mailing Address 85 Paseo Hermoso

City Salinas State CA Zip Code 93908

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

Name of Employer Ocean Mist Farms Occupation Chief Executive Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13903

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 14255 Highway 88

City Hope Valley State CA Zip Code 96120

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

Name of Employer Sorensen's Resort Occupation Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13726

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Gregor M. Cailliet

Mailing Address 712 Grace Street

City Monterey State CA Zip Code 93940

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

Name of Employer Moss Landing Marine Labs Occupation Professor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : INCA13894

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Kenneth A. Carpi

Mailing Address 117 South Lee Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Carpi & Clay Occupation Government Relations

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011

Transaction ID : INCA13790

Amount of Each Receipt this Period
500.00

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

Mailing Address 3128 Stonehenge Drive

City Riva State MD Zip Code 21140

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

Name of Employer Chaney & Associates, Inc. Occupation Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

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

Transaction ID : INCA13925

Amount of Each Receipt this Period
500.00

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 10 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Dale C. Coke

Mailing Address P.O. Box 186

City Aromas State CA Zip Code 95004

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

Name of Employer Coke Farms Occupation Farmer

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
 05 / 25 / 2011

Transaction ID : INCA13839

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Robert N. Colombo

Mailing Address 4826 Chevy Chase Blvd.

City Chevy Chase State MD Zip Code 20815

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2011

Transaction ID : INCA13845

Amount of Each Receipt this Period
250.00

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

Mailing Address P.O. Box 2194

City Monterey State CA Zip Code 93942

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

Name of Employer Bert Cutino Enterprises Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
349.00

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

Transaction ID : INCA13946

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 11 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
William G. Doolittle

Mailing Address P.O. Box 400

City Carmel State CA Zip Code 93921

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

Name of Employer Doolittle and Ganos Investment Counsel Occupation Investment Advisor

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
05 / 30 / 2011

Transaction ID : INCA13862

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Double J Farms

Mailing Address P.O. Box 398

City Corcoran State CA Zip Code 93212

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

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

Transaction ID : INCA13888

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Jane Brown Dunaway

Mailing Address P.O. Box S, PMB 3563

City Carmel State CA Zip Code 93921

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

Name of Employer Self-Employed Occupation Investor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **1400.00**

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

Transaction ID : INCA13889

Amount of Each Receipt this Period
500.00

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

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

1050.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : INCA13888

Partnership - Each partner does not aggregate over \$200.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Katharine K. Farr

Mailing Address 5329 Potomac Avenue, NW

City Washington State DC Zip Code 20016

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2011

Transaction ID : INCA13809

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Mary Kay Filice

Mailing Address 11 Marks Drive

City Hollister State CA Zip Code 95023

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

Name of Employer Filice Farms Occupation Owner

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
 05 / 09 / 2011

Transaction ID : INCA13817

Amount of Each Receipt this Period
1000.00

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

Mailing Address 514 Seward Square, SE

City Washington State DC Zip Code 20003

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

Name of Employer Platinum Advisors LLC Occupation Advocate

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
 05 / 27 / 2011

Transaction ID : INCA13846

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

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

FOR LINE NUMBER: PAGE 14 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Susan M. Gill

Mailing Address P.O. Box 605

City State Zip Code
King City CA 93930

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

Name of Employer Occupation
Rio Farms & Gills Onions Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : INCA13756

Amount of Each Receipt this Period
1000.00

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

Mailing Address 206 4th Avenue

City State Zip Code
Santa Cruz CA 95062

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

Name of Employer Occupation
San Juan Oaks Golf Club Owner

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
 05 / 27 / 2011

Transaction ID : NONA14000

Amount of Each Receipt this Period
500.00

Food for Event

C. Full Name (Last, First, Middle Initial)
Kenneth D. Gimelli

Mailing Address 206 4th Avenue

City State Zip Code
Santa Cruz CA 95062

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

Name of Employer Occupation
San Juan Oaks Golf Club 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
 05 / 27 / 2011

Transaction ID : NONA13999

Amount of Each Receipt this Period
500.00

Food for Event

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

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

2000.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : NONA14000

In-Kind Contribution

Form/Schedule: SA11AI

Transaction ID: NONA13999

In-Kind Contribution

**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 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Kenneth D. Gimelli

Mailing Address 206 4th Avenue

City Santa Cruz State CA Zip Code 95062

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

Name of Employer San Juan Oaks Golf Club Occupation 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
 05 / 30 / 2011

Transaction ID : INCA13864

Amount of Each Receipt this Period
2000.00

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

Mailing Address 5115 Doyle Lane

City Centreville State VA Zip Code 20120

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

Name of Employer Grisso Consulting Occupation Chief Executive Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : INCA13874

Amount of Each Receipt this Period
250.00

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

Mailing Address 6 Hacienda Carmel

City Carmel State CA Zip Code 93923

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

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

Transaction ID : INCA13936

Amount of Each Receipt this Period
250.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 17 OF 69
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Laurence P. Horan

Mailing Address 9568 Oak Court

City Carmel State CA Zip Code 93923

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

Name of Employer Horan Lloyd Law Firm Occupation 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
06 / 15 / 2011

Transaction ID : INCA13918

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Aubrey Carl King

Mailing Address 11914 Grason Lane

City Bowie State MD Zip Code 20715

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

Name of Employer Aubrey C. King & Associates Occupation Government Affairs Consultant

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : INCA13739

Amount of Each Receipt this Period
500.00

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

Mailing Address 5980 Skyfarm Drive

City Castro Valley State CA Zip Code 94552

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

Name of Employer Johan Klehs & Company Occupation Advocate

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
05 / 09 / 2011

Transaction ID : INCA13818

Amount of Each Receipt this Period
500.00

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

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

1200.00

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

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

FOR LINE NUMBER: PAGE 18 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
A. Angela Lancaster

Mailing Address 17 West Kirke Street

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
None Homemaker

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 06 / 2011

Transaction ID : INCA13812

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Judith K. Lemons

Mailing Address 1351 F Street, NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation
Self-Employed 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
 05 / 27 / 2011

Transaction ID : INCA13847

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
R.J. Lyerly

Mailing Address 4786 Old Dominion

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Carpi Clay & Smith Government Affairs Rep.

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
 05 / 27 / 2011

Transaction ID : INCA13878

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: PAGE 19 OF 69
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Morongo Band of Mission Indians Native American Rights Fund

Mailing Address 11581 Potrero Road

City Banning State CA Zip Code 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

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13730

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Thomas A. O'Brien

Mailing Address 1 Massachusetts Avenue, NW, #800

City Washington State DC Zip Code 20001

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

Name of Employer Occupation
 O'Brien DC Partner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 27 / 2011

Transaction ID : INCA13849

Amount of Each Receipt this Period
 600.00

C. Full Name (Last, First, Middle Initial)
Beverly Aimaro Pheto

Mailing Address 1444 Cola Drive

City McLean State VA Zip Code 22101

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

Name of Employer Occupation
 Polsinelli Shugart Senior Policy Advisor

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 03 / 2011

Transaction ID : INCA13785

Amount of Each Receipt this Period
 500.00

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

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

2100.00

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

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

FOR LINE NUMBER: PAGE 20 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
William E. Quinlan

Mailing Address 875 Foxhill Circle

City Hollister State CA Zip Code 95023

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

Name of Employer None Occupation Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2011

Transaction ID : INCA13868

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
J. Miles Reiter

Mailing Address 1767 San Juan Road

City Aromas State CA Zip Code 95004

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

Name of Employer Driscoll Strawberry 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
 06 / 13 / 2011

Transaction ID : INCA13919

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 517 C Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer Parry, Romani, DeConcini & Symms 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
 05 / 27 / 2011

Transaction ID : INCA13854

Amount of Each Receipt this Period
 250.00

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

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

2250.00

**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 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Dean C. Storkan

Mailing Address 1015 Elk Run Road

City State Zip Code
Pebble Beach CA 93953

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : INCA13822

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
Joanne M. Storkan

Mailing Address 1015 Elk Run Road

City State Zip Code
Pebble Beach CA 93953

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

Name of Employer Occupation
None Retired

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
05 / 09 / 2011

Transaction ID : INCA13821

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1027 Broad Branch Court

City State Zip Code
McLean VA 22101

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

Name of Employer Occupation
IGR Group Senior Vice 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 Y Y
05 / 27 / 2011

Transaction ID : INCA13855

Amount of Each Receipt this Period
500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Kenneth K. Talmage

Mailing Address 999010 Ocean Avenue

City Carmel State CA Zip Code 93921

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

Name of Employer Monterey Water Company Occupation Chairman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

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

Transaction ID : INCA13906

Amount of Each Receipt this Period
100.00

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

Mailing Address 8 Paseo Hondo

City Carmel Valley State CA Zip Code 93924

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

Name of Employer Passionfish Occupation Owner

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

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

Transaction ID : INCA13700

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Mary J. Whitney

Mailing Address 195 San Remo Road

City Carmel State CA Zip Code 93923

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

Name of Employer Fluke Foundation Occupation Co-Founder

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

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

Transaction ID : INCA13907

Amount of Each Receipt this Period
200.00

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

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

400.00

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

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

FOR LINE NUMBER: PAGE 23 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Paul Witt

Mailing Address 11828 La Grange Avenue

City Los Angeles State CA Zip Code 90025

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

Name of Employer Self-Employed Occupation Producer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13729

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 5975 Rossi Lane

City Gilroy State CA Zip Code 95020

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

Name of Employer Overland Parts, Inc. Occupation Chief Executive Officer

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 30 / 2011

Transaction ID : INCA13873

Amount of Each Receipt this Period
 2500.00

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).....

3500.00

29130.36

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

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

FOR LINE NUMBER: PAGE 24 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Action Committee for Rural Electrification (ACRE)

Mailing Address 4301 Wilson Blvd.

City State Zip Code
Arlington VA 22203

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13720

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AFGE Political Action Committee (American Federation of Government Employees, AFL-CIO PAC)

Mailing Address 80 F Street, NW

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13929

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Aircraft Owners and Pilots Association PAC (AOPA PAC)

Mailing Address 421 Aviation Way

City State Zip Code
Frederick MD 21701

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

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
 05 / 26 / 2011

Transaction ID : INCA13833

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
American Association for Justice PAC (AAJ PAC)

Mailing Address **777 6th Street, NW, Suite 200**

City **Washington** State **DC** Zip Code **20001**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : INCA13731

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
American Crystal Sugar Company PAC

Mailing Address **101 North Third Street**

City **Moorhead** State **MN** Zip Code **56560**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13901

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
American Federation of State, County & Municipal Employees AFL-CIO PEOPLE

Mailing Address **1625 L Street, NW**

City **Washington** State **DC** Zip Code **20036**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13935

Amount of Each Receipt this Period
 1000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 26 OF 69
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
American Society of Travel Agents, Inc. PAC

Mailing Address 1101 King Street

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13735

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Boilermakers Blacksmiths Legislative Education Action Program (LEAP)

Mailing Address 753 State Avenue, Suite 565

City State Zip Code
Kansas City KS 66101

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13698

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Boilermakers Blacksmiths Legislative Education Action Program (LEAP)

Mailing Address 753 State Avenue, Suite 565

City State Zip Code
Kansas City KS 66101

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

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
 05 / 27 / 2011

Transaction ID : INCA13843

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 27 OF 69
	<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)
Friends of Farr

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

Mailing Address 4160 Dublin Blvd., Suite 100

City Dublin	State CA	Zip Code 94568
----------------	-------------	-------------------

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
 M M / D D / Y Y Y Y Y Y
 06 / 17 / 2011

Transaction ID : INCA13926

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Committee for Advancement of Cotton

Mailing Address P.O. Box 820292

City Memphis	State TN	Zip Code 38182
-----------------	-------------	-------------------

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011

Transaction ID : INCA13791

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Dairy Farmers of America, Inc. DEPAC

Mailing Address 10220 North Ambassador Drive

City Kansas City	State MO	Zip Code 65153
---------------------	-------------	-------------------

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

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

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011

Transaction ID : INCA13789

Amount of Each Receipt this Period
2000.00

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 28 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Hewlett Packard Company PAC

Mailing Address 3000 Hanover Street

City Palo Alto State CA Zip Code 94304

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

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

Transaction ID : INCA13875

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
Honeywell International PAC (HIPAC)

Mailing Address 101 Constitution Avenue, NW, #500

City Washington State DC Zip Code 20001

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

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
 05 / 02 / 2011

Transaction ID : INCA13787

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
International Academy of Compounding Pharmacists (IACP PAC)

Mailing Address 4638 Riverstone Blvd., Suite 100

City Missouri City State TX Zip Code 77459

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13743

Amount of Each Receipt this Period
 1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 69
	<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	

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)
Friends of Farr

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

Mailing Address One Johnson & Johnson Plaza

City State Zip Code
New Brunswick NJ 08933

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
 M M / D D / Y Y Y Y Y Y
 06 / 23 / 2011

Transaction ID : INCA13939

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
National Association of Realtors PAC (RPAC)

Mailing Address 430 North Michigan Avenue

City State Zip Code
Chicago IL 60611

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

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

Transaction ID : INCA13719

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
National Committee to Preserve Social Security & Medicare PAC

Mailing Address 10 G Street, NE, Suite 600

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13741

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
National Council of Farmer Cooperatives PAC

Mailing Address 50 F Street, NW, Suite 900

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13733

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Ocean Champions PAC - Federal

Mailing Address 202 San Jose Avenue

City Capitola State CA Zip Code 95010

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13738

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Ocean Champions PAC - Federal

Mailing Address 202 San Jose Avenue

City Capitola State CA Zip Code 95010

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

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
 05 / 27 / 2011

Transaction ID : INCA13850

Amount of Each Receipt this Period
 500.00

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

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

2000.00

**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 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Olsson, Frank And Weeda Fund for American Values PAC

Mailing Address 1400 16th Street, NW, #400

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13737

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
Pacific Gas & Electric Corporation Employees Energy PAC

Mailing Address 77 Beale Street

City San Francisco State CA Zip Code 94177

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011

Transaction ID : INCA13792

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Pacific Gas & Electric Corporation Employees Energy PAC

Mailing Address 77 Beale Street

City San Francisco State CA Zip Code 94177

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

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
 05 / 30 / 2011

Transaction ID : INCA13867

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 69
	<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)
Friends of Farr

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

Mailing Address 8510 Balboa Blvd.

City Northridge State CA Zip Code 91325

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

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
 05 / 31 / 2011

Transaction ID : INCA13838

Amount of Each Receipt this Period
 1000.00

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

Mailing Address 512 C Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011

Transaction ID : INCA13793

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Sandler, Travis & Rosenberg PAC

Mailing Address 5200 Blue Lagoon Drive, Suite 600

City Miami State FL Zip Code 33126

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13732

Amount of Each Receipt this Period
 500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Society of American Florists Political Action Committee

Mailing Address 1601 Duke Street

City State Zip Code
Alexandria VA 22314

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

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 Y Y
04 / 29 / 2011

Transaction ID : INCA13794

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Society of American Florists Political Action Committee

Mailing Address 1601 Duke Street

City State Zip Code
Alexandria VA 22314

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

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 Y Y
05 / 13 / 2011

Transaction ID : INCA13810

Amount of Each Receipt this Period
500.00

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

Mailing Address 2 Righter Parkway

City State Zip Code
Wilmington DE 19850

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
04 / 11 / 2011

Transaction ID : INCA13742

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
United Airlines, Inc. Political Action Committee

Mailing Address P.O. Box 66423

City Chicago State IL Zip Code 60666

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

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
 05 / 06 / 2011

Transaction ID : INCA13813

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
United Egg Association (Egg PAC)

Mailing Address 1720 Windward Concourse, #230

City Alpharetta State GA Zip Code 30005

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011

Transaction ID : INCA13736

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
United Parcel Service Inc. PAC

Mailing Address 55 Glenlake Parkway, NE

City Atlanta State GA Zip Code 30328

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

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
 05 / 13 / 2011

Transaction ID : INCA13811

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 69
	<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)
Friends of Farr

A. United States Beet Sugar Association PAC
 Full Name (Last, First, Middle Initial)
 Mailing Address 1156 15th Street, NW, Suite 1019
 City Washington State DC Zip Code 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011
Transaction ID : INCA13728
 Amount of Each Receipt this Period
 1000.00

B. WATERPAC - National Rural Water Association
 Full Name (Last, First, Middle Initial)
 Mailing Address 2915 South 13th Street
 City Duncan State OK Zip Code 73533
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 11 / 2011
Transaction ID : INCA13734
 Amount of Each Receipt this Period
 1000.00

C. Weston Political Action Committee
 Full Name (Last, First, Middle Initial)
 Mailing Address 1001 Connecticut Avenue, NW, #1200
 City Washington State DC Zip Code 20036
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 29 / 2011
Transaction ID : INCA13795
 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 36 OF 69
	<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)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Weston Political Action Committee

Mailing Address 1001 Connecticut Avenue, NW, #1200

City Washington State DC Zip Code 20036

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

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
 06 / 13 / 2011

Transaction ID : INCA13921

Amount of Each Receipt this Period
1000.00

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).....

1000.00

37500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 69
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial)
Democratic Party of Santa Cruz County

Mailing Address 740 Front Street, Suite 165

City Santa Cruz State CA Zip Code 95060

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 15 / 2011

Transaction ID : INCA13710

Amount of Each Receipt this Period
1000.00

Void Check

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).....

1000.00

1000.00

**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 38 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Christine Armanasco		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2011
Mailing Address P.O. Box 1398		Amount of Each Disbursement this Period 1065.18
City Pebble Beach	State CA	
Zip Code 93953	Purpose of Disbursement Food for Event	Transaction ID : NONB13959
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. David G. Armanasco		Date of Disbursement M M / D D / Y Y Y Y 06 / 29 / 2011
Mailing Address P.O. Box 1398		Amount of Each Disbursement this Period 1065.18
City Pebble Beach	State CA	
Zip Code 93953	Purpose of Disbursement Food for Event	Transaction ID : NONB13958
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. AT&T		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2011
Mailing Address Payment Center		Amount of Each Disbursement this Period 157.84
City Sacramento	State CA	
Zip Code 95887	Purpose of Disbursement Phones	Transaction ID : EXPB13703
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:		

SUBTOTAL of Disbursements This Page (optional).....	2288.20
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : NONB13959

In-Kind Contribution

Form/Schedule: SB17

Transaction ID: NONB13958

In-Kind Contribution

**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 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. AT&T			Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2011		
Mailing Address Payment Center			Amount of Each Disbursement this Period 185.35		
City Sacramento	State CA	Zip Code 95887	Transaction ID : EXPB13774		
Purpose of Disbursement Phones		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. AT&T			Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011		
Mailing Address Payment Center			Amount of Each Disbursement this Period 185.41		
City Sacramento	State CA	Zip Code 95887	Transaction ID : EXPB13829		
Purpose of Disbursement Phones		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) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 06 / 27 / 2011		
Mailing Address Payment Center			Amount of Each Disbursement this Period 212.18		
City Sacramento	State CA	Zip Code 95887	Transaction ID : EXPB13940		
Purpose of Disbursement Phones		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:					

SUBTOTAL of Disbursements This Page (optional).....	582.94
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 41 OF 69			
	<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)
Friends of Farr

A. Automated Mailing Services

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 1906

City Monterey State CA Zip Code 93940

Purpose of Disbursement Fundraising Mail Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 01 / 2011

Amount of Each Disbursement this Period: 926.61

Transaction ID : EXPB13856

Category/Type: 003

B. Boots Road Group, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 211 W. Franklin Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement Website Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 05 / 2011

Amount of Each Disbursement this Period: 1063.40

Transaction ID : EXPB13696

Category/Type: 001

C. Federal Express Corp.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 7221

City Pasadena State CA Zip Code 91109

Purpose of Disbursement Shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 18 / 2011

Amount of Each Disbursement this Period: 87.18

Transaction ID : EXPB13718

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 2077.19

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 42 OF 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Federal Express Corp.		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address P.O. Box 7221		Amount of Each Disbursement this Period 63.06 Transaction ID : EXPB13830
City Pasadena	State CA	
Zip Code 91109	Purpose of Disbursement Shipping	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. Federal Express Corp.		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2011
Mailing Address P.O. Box 7221		Amount of Each Disbursement this Period 63.06 Transaction ID : EXPB13927
City Pasadena	State CA	
Zip Code 91109	Purpose of Disbursement Shipping	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) C. Jill Gimelli		Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011
Mailing Address 206 4th Avenue		Amount of Each Disbursement this Period 500.00 Transaction ID : NONB14000
City Santa Cruz	State CA	
Zip Code 95062	Purpose of Disbursement Food for Event	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	626.12
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : NONB14000

In-Kind Contribution

Form/Schedule:

Transaction ID:

**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 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Kenneth D. Gimelli			Date of Disbursement M M / D D / Y Y Y Y 05 / 27 / 2011	
Mailing Address 206 4th Avenue			Amount of Each Disbursement this Period 500.00	
City Santa Cruz	State CA	Zip Code 95062	Transaction ID : NONB13999	
Purpose of Disbursement Food for Event		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Good Times, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2011	
Mailing Address 1205 Pacific Avenue, Suite 301			Amount of Each Disbursement this Period 1085.00	
City Santa Cruz	State CA	Zip Code 95060	Transaction ID : EXPB13773	
Purpose of Disbursement Print Advertisement		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:				

Full Name (Last, First, Middle Initial) c. National Council of Farmer Cooperatives			Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2011	
Mailing Address 50 F Street, NW, Suite 900			Amount of Each Disbursement this Period 233.99	
City Washington	State DC	Zip Code 20001	Transaction ID : EXPB13690	
Purpose of Disbursement Fundraising Catering		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:				

SUBTOTAL of Disbursements This Page (optional).....	1818.99
TOTAL This Period (last page this line number only).....	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB17

Transaction ID : NONB13999

In-Kind Contribution

Form/Schedule:

Transaction ID:

**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 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 40.00 Transaction ID : EXPB13712
City Washington State DC Zip Code 20003	Purpose of Disbursement Membership Dues 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:	

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 558.76 Transaction ID : EXPB13713
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Catering 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) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 778.80 Transaction ID : EXPB13782
City Washington State DC Zip Code 20003	Purpose of Disbursement Fundraising Catering 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:	

SUBTOTAL of Disbursements This Page (optional).....	1377.56
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 47 OF 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 98.88 Transaction ID : EXPB13886
City Washington State DC Zip Code 20003	Purpose of Disbursement Assessment Fee 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:	

Full Name (Last, First, Middle Initial) B. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 48.38 Transaction ID : EXPB13885
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals with Constituents 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:	

Full Name (Last, First, Middle Initial) c. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 40.00 Transaction ID : EXPB13884
City Washington State DC Zip Code 20003	Purpose of Disbursement Membership Dues 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:	

SUBTOTAL of Disbursements This Page (optional).....	98.38
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 48 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 150.00 Transaction ID : EXPB13909
City Washington State DC Zip Code 20003	Purpose of Disbursement Cancellation Fee Candidate Name Category/Type 001	
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. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 40.00 Transaction ID : EXPB13922
City Washington State DC Zip Code 20003	Purpose of Disbursement Membership Dues Candidate Name Category/Type 001	
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) C. National Democratic Club		Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 10.00 Transaction ID : EXPB13923
City Washington State DC Zip Code 20003	Purpose of Disbursement Capitol Assessment Fee Candidate Name Category/Type 001	
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)	

SUBTOTAL of Disbursements This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. NGP VAN, Inc.			Date of Disbursement M M / D D / Y Y Y Y 05 / 26 / 2011	
Mailing Address 1101 15th Street, NW, Suite 500			Amount of Each Disbursement this Period 1500.00	
City Washington	State DC	Zip Code 20005	Transaction ID : EXPB13832	
Purpose of Disbursement Campaign Software		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. Olson, Hagel & Fishburn, LLP			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2011	
Mailing Address 555 Capitol Mall, Suite 1425			Amount of Each Disbursement this Period 2718.75	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13709	
Purpose of Disbursement Legal & Reporting Services		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) c. Olson, Hagel & Fishburn, LLP			Date of Disbursement M M / D D / Y Y Y Y 05 / 13 / 2011	
Mailing Address 555 Capitol Mall, Suite 1425			Amount of Each Disbursement this Period 2474.53	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13803	
Purpose of Disbursement Legal & Reporting Services		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: _____			

SUBTOTAL of Disbursements This Page (optional).....	6693.28
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 50 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Olson, Hagel & Fishburn, LLP			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2011	
Mailing Address 555 Capitol Mall, Suite 1425			Amount of Each Disbursement this Period 2459.18	
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13912	
Purpose of Disbursement Legal & Reporting Services		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. South County Newspapers			Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2011	
Mailing Address 522 Broadway Street			Amount of Each Disbursement this Period 481.00	
City King City	State CA	Zip Code 93930	Transaction ID : EXPB13892	
Purpose of Disbursement Print Advertisement		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: _____				

Full Name (Last, First, Middle Initial) c. The Diversity Center			Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011	
Mailing Address P.O. Box 8280			Amount of Each Disbursement this Period 375.00	
City Santa Cruz	State CA	Zip Code 95061	Transaction ID : EXPB13804	
Purpose of Disbursement Print Advertisement		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: _____				

SUBTOTAL of Disbursements This Page (optional).....	3315.18
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 51 OF 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. The Frost Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2011
Mailing Address 3701 Porter Street NW		Amount of Each Disbursement this Period 3500.00 Transaction ID : EXPB13784
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Fundraising Consulting	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. The Frost Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address 3701 Porter Street NW		Amount of Each Disbursement this Period 3500.00 Transaction ID : EXPB13835
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Fundraising Consulting	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) c. The Frost Group, LLC		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2011
Mailing Address 3701 Porter Street NW		Amount of Each Disbursement this Period 1138.72 Transaction ID : EXPB13910
City Washington	State DC	
Zip Code 20016	Purpose of Disbursement Fundraising Catering	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:	

SUBTOTAL of Disbursements This Page (optional).....	8138.72
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 52 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. The Frost Group, LLC			Date of Disbursement MM / DD / YYYY 06 / 14 / 2011		
Mailing Address 3701 Porter Street NW			Amount of Each Disbursement this Period 380.85		
City Washington	State DC	Zip Code 20016	Transaction ID : EXPB13911		
Purpose of Disbursement Shipping		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. The KRKC Stations, Inc.			Date of Disbursement MM / DD / YYYY 05 / 11 / 2011		
Mailing Address 1134 San Antonio Drive, Box 628			Amount of Each Disbursement this Period 150.00		
City King City	State CA	Zip Code 93930	Transaction ID : EXPB13800		
Purpose of Disbursement Radio Ad		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:					

Full Name (Last, First, Middle Initial) c. The KRKC Stations, Inc.			Date of Disbursement MM / DD / YYYY 06 / 08 / 2011		
Mailing Address 1134 San Antonio Drive, Box 628			Amount of Each Disbursement this Period 200.00		
City King City	State CA	Zip Code 93930	Transaction ID : EXPB13893		
Purpose of Disbursement Radio Ad		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:					

SUBTOTAL of Disbursements This Page (optional).....	380.85
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 53 OF 69	
	<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)
Friends of Farr

A. Transfirst LLC

Full Name (Last, First, Middle Initial)

Mailing Address 371 Centennial Parkway

City Louisville State CO Zip Code 80027

Purpose of Disbursement Transaction Fee Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 04 / 11 / 2011

Amount of Each Disbursement this Period: 256.86

Transaction ID : EXPB13797

B. Transfirst LLC

Full Name (Last, First, Middle Initial)

Mailing Address 371 Centennial Parkway

City Louisville State CO Zip Code 80027

Purpose of Disbursement Transaction Fee Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 05 / 10 / 2011

Amount of Each Disbursement this Period: 26.68

Transaction ID : EXPB13897

C. Transfirst LLC

Full Name (Last, First, Middle Initial)

Mailing Address 371 Centennial Parkway

City Louisville State CO Zip Code 80027

Purpose of Disbursement Transaction Fee Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 06 / 10 / 2011

Amount of Each Disbursement this Period: 48.67

Transaction ID : EXPB13955

SUBTOTAL of Disbursements This Page (optional)

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 54 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2011		
Mailing Address 621 Capitol Mall, Suite 800			Amount of Each Disbursement this Period 187.39		
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13705		
Purpose of Disbursement Bank Fee		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. U.S. Bank			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011		
Mailing Address 621 Capitol Mall, Suite 800			Amount of Each Disbursement this Period 75.00		
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13714		
Purpose of Disbursement Internet Services		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Constant Contact, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011		
Mailing Address 1601 Trapelo Road, Suite 246			Amount of Each Disbursement this Period 75.00		
City Waltham	State MA	Zip Code 02451	Transaction ID : EDTB152EXPB13714		
Purpose of Disbursement Internet Services		001 Category/ Type			
Candidate Name			[MEMO ITEM]		
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	262.39
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 55 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 14.15 Transaction ID : EXPB13716
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Postage 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. U.S. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011
Mailing Address 565 Hartnell Street		Amount of Each Disbursement this Period 14.15 Transaction ID : EDTB153EXPB13716 [MEMO ITEM]
City Monterey State CA Zip Code 93940	Purpose of Disbursement Postage 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) c. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 704.65 Transaction ID : EXPB13717
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Travel Expenses 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	718.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Portola Hotel & Spa			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011		
Mailing Address 2 Portola Plaza			Amount of Each Disbursement this Period 92.00		
City Monterey	State CA	Zip Code 93940	Transaction ID : EDTB155EXPB13717		
Purpose of Disbursement Travel Expenses		Category/ Type 002	[MEMO ITEM]		
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. U.S. Bank			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011		
Mailing Address 621 Capitol Mall, Suite 800			Amount of Each Disbursement this Period 92.00		
City Sacramento	State CA	Zip Code 95814	Transaction ID : EXPB13715		
Purpose of Disbursement Storage Rental		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) c. Airport Road Self-Storage, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2011		
Mailing Address 847 Airport Road			Amount of Each Disbursement this Period 92.00		
City Monterey	State CA	Zip Code 95814	Transaction ID : EDTB154EXPB13715		
Purpose of Disbursement Storage Rental		Category/ Type 001	[MEMO ITEM]		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional).....	92.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank		Date of Disbursement MM / DD / YYYY 05 / 01 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period \$ 30.00 Transaction ID : EXPB13828
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Bank Fee Candidate Name Category/Type 001	
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. U.S. Bank		Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period \$ 75.00 Transaction ID : EXPB13805
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Internet Services Candidate Name Category/Type 001	
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) c. Constant Contact, Inc.		Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
Mailing Address 1601 Trapelo Road, Suite 246		Amount of Each Disbursement this Period \$ 75.00 Transaction ID : EDTB158EXPB13805 [MEMO ITEM]
City Waltham State MA Zip Code 02451	Purpose of Disbursement Internet Services Candidate Name Category/Type 001	
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)	

SUBTOTAL of Disbursements This Page (optional).....	\$ 105.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank		Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 228.25 Transaction ID : EXPB13808
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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. Staples		Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
Mailing Address 1550 Canyon Del Rey Blvd.		Amount of Each Disbursement this Period 228.25 Transaction ID : EDTB157EXPB13808 [MEMO ITEM]
City Seaside State CA Zip Code 93955	Purpose of Disbursement Office Supplies Candidate Name Category/Type 001	
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) c. U.S. Bank		Date of Disbursement MM / DD / YYYY 05 / 17 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 92.00 Transaction ID : EXPB13806
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Storage Rental Candidate Name Category/Type 001	
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)	

SUBTOTAL of Disbursements This Page (optional).....	320.25
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Airport Road Self-Storage, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011
Mailing Address 847 Airport Road		Amount of Each Disbursement this Period 92.00
City Monterey	State CA Zip Code 95814	
Purpose of Disbursement Storage Rental	Category/Type 001	Transaction ID : EDTB159EXPB13806 [MEMO ITEM]
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. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 265.00
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement General Postage	Category/Type 001	Transaction ID : EXPB13807
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. U.S. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2011
Mailing Address 565 Hartnell Street		Amount of Each Disbursement this Period 265.00
City Monterey	State CA Zip Code 93940	
Purpose of Disbursement General Postage	Category/Type 001	Transaction ID : EDTB156EXPB13807 [MEMO ITEM]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	265.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 45.30
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Bank Fee	
Candidate Name	001 Category/Type	Transaction ID : EXPB13899
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. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 01 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 35.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Bank Fee	
Candidate Name	001 Category/Type	Transaction ID : EXPB13953
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. U.S. Bank		Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 177.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Fundraising Postage	
Candidate Name	003 Category/Type	Transaction ID : EXPB13916
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	257.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 69			
	<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)
Friends of Farr

A. U.S. Postmaster

Full Name (Last, First, Middle Initial)
Mailing Address 565 Hartnell Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement Fundraising Postage
Candidate Name

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

State: District:

Date of Disbursement: 06 / 15 / 2011

Amount of Each Disbursement this Period: 177.00

Transaction ID : EDTB162EXPB13916

[MEMO ITEM]

B. U.S. Bank

Full Name (Last, First, Middle Initial)
Mailing Address 621 Capitol Mall, Suite 800

City Sacramento State CA Zip Code 95814

Purpose of Disbursement Office Supplies
Candidate Name

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

State: District:

Date of Disbursement: 06 / 15 / 2011

Amount of Each Disbursement this Period: 262.25

Transaction ID : EXPB13917

c. Staples

Full Name (Last, First, Middle Initial)
Mailing Address 1550 Canyon Del Rey Blvd.

City Seaside State CA Zip Code 93955

Purpose of Disbursement Office Supplies
Candidate Name

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

State: District:

Date of Disbursement: 06 / 15 / 2011

Amount of Each Disbursement this Period: 262.25

Transaction ID : EDTB163EXPB13917

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 262.25

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 69	
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. U.S. Bank		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 92.00
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Storage Rental	Category/Type 001	Transaction ID : EXPB13915
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. Airport Road Self-Storage, Inc.		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 847 Airport Road		Amount of Each Disbursement this Period 92.00
City Monterey	State CA Zip Code 95814	
Purpose of Disbursement Storage Rental	Category/Type 001	Transaction ID : EDTB161EXPB13915
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:		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) c. U.S. Bank		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 621 Capitol Mall, Suite 800		Amount of Each Disbursement this Period 75.00
City Sacramento	State CA Zip Code 95814	
Purpose of Disbursement Internet Services	Category/Type 001	Transaction ID : EXPB13914
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	167.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Constant Contact, Inc.		Date of Disbursement MM / DD / YYYY 06 / 15 / 2011
Mailing Address 1601 Trapelo Road, Suite 246		Amount of Each Disbursement this Period 75.00
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Internet Services	Transaction ID : EDTB160EXPB13914
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. U.S. Postmaster		Date of Disbursement MM / DD / YYYY 05 / 18 / 2011
Mailing Address 565 Hartnell Street		Amount of Each Disbursement this Period 46.00
City Monterey	State CA	
Zip Code 93940	Purpose of Disbursement Post Office Box Rental	Transaction ID : EXPB13827
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Plasha Will		Date of Disbursement MM / DD / YYYY 04 / 05 / 2011
Mailing Address 60 East Carmel Valley Road		Amount of Each Disbursement this Period 1531.80
City Carmel Valley	State CA	
Zip Code 93924	Purpose of Disbursement Fundraising Consulting	Transaction ID : EXPB13694
Candidate Name	003 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:		

SUBTOTAL of Disbursements This Page (optional).....	1577.80
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 69			
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Plasha Will		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2011
Mailing Address 60 East Carmel Valley Road		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB13783
City Carmel Valley State CA Zip Code 93924	Purpose of Disbursement Fundraising Consulting 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. Plasha Will		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2011
Mailing Address 60 East Carmel Valley Road		Amount of Each Disbursement this Period 308.50 Transaction ID : EXPB13801
City Carmel Valley State CA Zip Code 93924	Purpose of Disbursement Fundraising Consulting 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) C. Plasha Will		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2011
Mailing Address 60 East Carmel Valley Road		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB13834
City Carmel Valley State CA Zip Code 93924	Purpose of Disbursement Fundraising Consulting 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:	

SUBTOTAL of Disbursements This Page (optional).....	6308.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 69		
	<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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Plasha Will		Date of Disbursement MM / DD / YYYY 06 / 08 / 2011
Mailing Address 60 East Carmel Valley Road		Amount of Each Disbursement this Period 771.25
City Carmel Valley	State CA Zip Code 93924	
Purpose of Disbursement Fundraising Consulting	Category/Type 003	Transaction ID : EXPB13891
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.		Date of Disbursement MM / DD / YYYY
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) C.		Date of Disbursement MM / DD / YYYY
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:		

SUBTOTAL of Disbursements This Page (optional).....	771.25
TOTAL This Period (last page this line number only).....	39037.16

**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 69			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Friends of Farr

Full Name (Last, First, Middle Initial) A. RINC Diversified-AP			Date of Disbursement M M / D D / Y Y Y Y 05 / 25 / 2011	
Mailing Address 5100 Coe Avenue			Amount of Each Disbursement this Period 2400.00	
City Seaside	State CA	Zip Code 93955	Transaction ID : EXPB13831	
Purpose of Disbursement Refund of Contribution		Category/ Type 010		
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

SUBTOTAL of Disbursements This Page (optional).....	2400.00
TOTAL This Period (last page this line number only).....	2400.00

**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 67 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Farr

Full Name (Last, First, Middle Initial) A. Democratic Congressional Campaign Committee		Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2011
Mailing Address 430 S. Capitol Street, SE, 2nd Fl.		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Excess Campaign Funds to National Party	Transaction ID : EXPB13928
Candidate Name Democratic Congressional Campaign Committee	Category/Type 011	
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. Democratic Party of Santa Cruz County		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2011
Mailing Address 740 Front Street, Suite 165		Amount of Each Disbursement this Period 1000.00
City Santa Cruz State CA Zip Code 95060	Purpose of Disbursement Contribution to Local Party Committee	Transaction ID : EXPB13711
Candidate Name Democratic Party of Santa Cruz County	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Planned Parenthood Advocates Mar Monte Candidate PAC		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2011
Mailing Address 316 N. Main Street, Suite 100		Amount of Each Disbursement this Period 1000.00
City Salinas State CA Zip Code 93901	Purpose of Disbursement Contribution to Non-Federal Committee	Transaction ID : EXPB13771
Candidate Name Planned Parenthood Advocates Mar Monte Candidate PAC	Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional).....	7000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 68 OF 69	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" 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)
Friends of Farr

Full Name (Last, First, Middle Initial) A. San Benito County Democratic Central Committee			Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2011
Mailing Address 506 Line Street			Amount of Each Disbursement this Period 1000.00 Transaction ID : EXPB13693
City Hollister	State CA	Zip Code 95023	
Purpose of Disbursement Contribution to Local Party Committee		Category/ Type 011	
Candidate Name San Benito County Democratic Central Committee			
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.			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) C.			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: _____		

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	8000.00

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

NAME OF COMMITTEE (In Full)
Friends of Farr

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Boots Road Group, LLC	Nature of Debt (Purpose): Website Services
Mailing Address 211 W. Franklin Street	
City State Zip Code Monterey CA 93940	

Outstanding Balance Beginning This Period 1063.40	Transaction ID : PAYD13692	
Amount Incurred This Period 0.00	Payment This Period 1063.40	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Plasha Will	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 60 East Carmel Valley Road	
City State Zip Code Carmel Valley CA 93924	

Outstanding Balance Beginning This Period 1531.80	Transaction ID : PAYD13691	
Amount Incurred This Period 0.00	Payment This Period 1531.80	Outstanding Balance at Close of This Period 0.00

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

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	0.00
2) TOTALS This Period (last page this line number only)	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	