

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 2150 RIVER PLAZA DR. #150
 Check if different than previously reported. (ACC)
SACRAMENTO CA 95833

2. **FEC IDENTIFICATION NUMBER** C00494468
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CA 36

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 05 17 2011 in the State of CA
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 04 01 2011 through 04 27 2011

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

Signature of Treasurer Electronically Filed by David Bauer Date 08 12 2011

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

A. Form/Schedule : **F3A**

Memo entry on candidate loans

Transaction ID :

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

FRIENDS OF CRAIG HUEY FOR CONGRESS

Report Covering the Period:

From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

To:

M	M
0	4

D	D
2	7

Y	Y	Y	Y
2	0	1	1

	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)).....	14772.55	16499.66
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	14772.55	16499.66
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	158887.84	314583.33
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	158887.84	314583.33
8. Cash on Hand at Close of Reporting Period (from Line 27).....	199416.33	
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).....	543018.58	

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 CRAIG HUEY FOR CONGRESS

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	4

D	D
2	7

Y	Y	Y	Y
2	0	1	1

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	4403.55	4653.55
(i) Itemized (use Schedule A).....	9369.00	10846.11
(ii) Unitemized.....	13772.55	15499.66
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	14772.55	16499.66
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....		
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	250000.00	500000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	250000.00	500000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....		
15. OTHER RECEIPTS (Dividends, Interest, etc.).....		
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	264772.55	516499.66

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 02/2003)

5 / 39

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	158887.84	314583.33
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.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	2500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	158887.84	317083.33

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	93531.62
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	264772.55
25. SUBTOTAL (add Line 23 and Line 24).....	358304.17
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	158887.84
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	199416.33

**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 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ISSAC HUANG		Date of Receipt
	Mailing Address 3640 LOMITA BLVD., STE. 208		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 1 / 2 0 1 1
	City	State	Zip Code
	Torrance	CA	90505
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA46
Name of Employer ISSAC HUANG, DDS INC.		Occupation DENTIST	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) WILLAIM HEDDERICH		Date of Receipt
	Mailing Address 237 31ST ST.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 9 / 2 0 1 1
	City	State	Zip Code
	Hermosa Beach	CA	90254
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA84
Name of Employer INTERSET POWER SYSTEMS		Occupation CONSULTANT	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) KENT KOMAE		Date of Receipt
	Mailing Address 16808 WILKIE AVE.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 1 1 / 2 0 1 1
	City	State	Zip Code
	Torrance	CA	90504
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA89
Name of Employer SELF-KENT KOMAE		Occupation WRITER	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) THOMAS GEHRING</p> <p>Mailing Address 1534 17TH ST, 203</p> <p>City State Zip Code Santa Monica CA 90404</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer THOMAS G. GEHRING APC Occupation LAWYER</p> <p>Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>	<p>Date of Receipt 04 / 13 / 2011</p> <p>Transaction ID: INCA119</p> <p>Amount of Each Receipt this Period 250.00</p>
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<p>B. Full Name (Last, First, Middle Initial) HELEN PRICE</p> <p>Mailing Address 150 SOUTH ROCKINGHAM AVE.</p> <p>City State Zip Code Los Angeles CA 90049</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer NOT EMPLOYED Occupation NOT EMPLOYED</p> <p>Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 350.00</p>	<p>Date of Receipt 04 / 16 / 2011</p> <p>Transaction ID: INCA128</p> <p>Amount of Each Receipt this Period 350.00</p>
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<p>C. Full Name (Last, First, Middle Initial) RICH GRAMM</p> <p>Mailing Address 3529 FIR RD.</p> <p>City State Zip Code Bremen IN 46506</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HEADSIGHT INC. Occupation INVENTOR</p> <p>Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 553.55</p>	<p>Date of Receipt 04 / 25 / 2011</p> <p>Transaction ID: INCA191</p> <p>Amount of Each Receipt this Period 553.55</p>
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SUBTOTAL of Receipts This Page (optional)	1153.55
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JOHN JOHNSON		Date of Receipt
	Mailing Address 22651 GAYCREST AVE.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 5 / 2 0 1 1
	City	State	Zip Code
	Torrance	CA	90505
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA288
Name of Employer HIS LIFE WOOD		Occupation CABINET MAKER	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

B.	Full Name (Last, First, Middle Initial) NORMAN GOYETTE		Date of Receipt
	Mailing Address 319 EAST OAK AVE.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 6 / 2 0 1 1
	City	State	Zip Code
	El Segundo	CA	90245
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA290
Name of Employer AEROSPACE CORP.		Occupation ENGINEER	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00

C.	Full Name (Last, First, Middle Initial) GERRI NELSON		Date of Receipt
	Mailing Address 4025 VIA LARGAVISTA		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 6 / 2 0 1 1
	City	State	Zip Code
	PALOS VERDES ESTAT	CA	90274
	FEC ID number of contributing federal political committee. C		Transaction ID: INCA248
Name of Employer NONE		Occupation NOT EMPLOYED	Amount of Each Receipt this Period
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES LACY

Mailing Address 24921 SEAGATE DR.

City Dana Point State CA Zip Code 92629

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

Name of Employer SELF Occupation ATTORNEY

Receipt For: 2011
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 04 / 27 / 2011
Transaction ID: INCA224
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 6100 S. PACIFIC COAST HWY.

City REDONDO BEACH State CA Zip Code 90277

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

Name of Employer BP Occupation OPERATIONS MGR.

Receipt For: 2011
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 04 / 27 / 2011
Transaction ID: INCA251
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ► 4403.55

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 39
(check only one)

11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)
GOVERNMENT IS NOT GOD PAC

Mailing Address PO BOX 77237

City State Zip Code
Washington DC 20013

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2011
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Transaction ID: INCA142

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1000.00"/>

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

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

FOR LINE NUMBER: PAGE 11 / 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) CRAIG HUEY		Date of Receipt
	Mailing Address 27853 CONESTOGA DR.		<input type="text" value="04"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	Rolling Hills	CA	90274
	FEC ID number of contributing federal political committee.		Transaction ID: PAYA173
Name of Employer N/A		Amount of Each Receipt this Period	
Occupation THE CANDIDATE		<input type="text" value="250000.00"/>	
Receipt For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="500270.53"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="250000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="250000.00"/>

A. Form/Schedule : **SA13A**

PERSONAL FUNDS

Transaction ID : **PAYA173**

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Pyrix, Inc. Mailing Address 101 Waxhaw Professional Park, Ste. City Waxhaw State NC Zip Code 28173 Purpose of Disbursement MERCHANT FEE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB102 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 1 1 Amount of Each Disbursement this Period 51.53 Category/Type 001
B.	Full Name (Last, First, Middle Initial) GILLIARD BLANNING & ASSOC., INC. Mailing Address 5701 LONETREE BLVD. #301 City Rocklin State CA Zip Code 95765 Purpose of Disbursement MASS MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB50 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1 Amount of Each Disbursement this Period 2251.00 Category/Type 004
C.	Full Name (Last, First, Middle Initial) GILLIARD BLANNING & ASSOC., INC. Mailing Address 5701 LONETREE BLVD. #301 City Rocklin State CA Zip Code 95765 Purpose of Disbursement MASS MAIL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB52 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1 Amount of Each Disbursement this Period 20990.86 Category/Type 004

SUBTOTAL of Disbursements This Page (optional) ▶	23293.39
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) Pyrix, Inc. <hr/> Mailing Address 101 Waxhaw Professional Park, Ste. <hr/> City Waxhaw State NC Zip Code 28173 <hr/> Purpose of Disbursement MERCHANT FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB101 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 22.84
B.	Full Name (Last, First, Middle Initial) RICK E. MARTIN PHOTOGRAPHY <hr/> Mailing Address 280 CHATHAM WAY <hr/> City Mountain View State CA Zip Code 94040 <hr/> Purpose of Disbursement PHOTOGRAPHY Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB48 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 1800.00
C.	Full Name (Last, First, Middle Initial) Pyrix, Inc. <hr/> Mailing Address 101 Waxhaw Professional Park, Ste. <hr/> City Waxhaw State NC Zip Code 28173 <hr/> Purpose of Disbursement MERCHANT FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXPB131 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 1 1 <hr/> Amount of Each Disbursement this Period 22.50

SUBTOTAL of Disbursements This Page (optional)	1845.34
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 15 / 39

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) GILLIARD BLANNING & ASSOC., INC.	Transaction ID: EXPB53 Date of Disbursement 04 / 07 / 2011	
	Mailing Address 5701 LONETREE BLVD. #301		
	City State Zip Code Rocklin CA 95765	Amount of Each Disbursement this Period	15408.00
	Purpose of Disbursement MASS MAIL	004	Category/Type
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		
B.	Full Name (Last, First, Middle Initial) Pyrix, Inc.	Transaction ID: EXPB132 Date of Disbursement 04 / 07 / 2011	
	Mailing Address 101 Waxhaw Professional Park, Ste.		
	City State Zip Code Waxhaw NC 28173	Amount of Each Disbursement this Period	2.26
	Purpose of Disbursement MERCHANT FEE	001	Category/Type
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		
C.	Full Name (Last, First, Middle Initial) INDEPENDENT VOTERS LEAGUE	Transaction ID: EXPB56 Date of Disbursement 04 / 08 / 2011	
	Mailing Address 3700 WILSHIRE BLVD. #1050B		
	City State Zip Code Los Angeles CA 90010	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement MASS MAIL	004	Category/Type
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional)	17410.26
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB133</p> <p>Date of Disbursement 04 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 2.26</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) U.S. POSTAL SVC.</p> <p>Mailing Address 4216 PACIFIC COAST HWY</p> <p>City Torrance State CA Zip Code 90505</p> <p>Purpose of Disbursement POSTAGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB57</p> <p>Date of Disbursement 04 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB134</p> <p>Date of Disbursement 04 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 4.50</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1006.76

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 17 / 39

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JAMES CAMP			Transaction ID: EXPB72	
	Mailing Address 1204 SEVIER RD.			Date of Disbursement 04 / 12 / 2011	
City Cool State CA Zip Code 95614			Amount of Each Disbursement this Period 200.00		
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: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:					

B.	Full Name (Last, First, Middle Initial) U.S. POSTAL SVC.			Transaction ID: PDTB3EXPB72	
	Mailing Address 4216 PACIFIC COAST HWY			Date of Disbursement 04 / 12 / 2011	
City Torrance State CA Zip Code 90505			Amount of Each Disbursement this Period 200.00		
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: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:					
[MEMO ITEM]					

C.	Full Name (Last, First, Middle Initial) JAMES CAMP			Transaction ID: EXPB78	
	Mailing Address 1204 SEVIER RD.			Date of Disbursement 04 / 12 / 2011	
City Cool State CA Zip Code 95614			Amount of Each Disbursement this Period 819.91		
Purpose of Disbursement SUPPLIES			001 Category/Type		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:					

SUBTOTAL of Disbursements This Page (optional)

1019.91

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: PDTB5EXPB78 Date of Disbursement 04 / 12 / 2011
	Mailing Address 22025 HAWTHORNE BLVD.	Amount of Each Disbursement this Period 819.91
	City Torrance State CA Zip Code 90503	
	Purpose of Disbursement SUPPLIES Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) JAMES CAMP	Transaction ID: EXPB76 Date of Disbursement 04 / 12 / 2011
	Mailing Address 1204 SEVIER RD.	Amount of Each Disbursement this Period 533.99
	City Cool State CA Zip Code 95614	
	Purpose of Disbursement SUPPLIES Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: PDTB4EXPB76 Date of Disbursement 04 / 12 / 2011
	Mailing Address 22025 HAWTHORNE BLVD.	Amount of Each Disbursement this Period 533.99
	City Torrance State CA Zip Code 90503	
	Purpose of Disbursement SUPPLIES Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	533.99
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) JAMES CAMP	Transaction ID: EXPB74
	Mailing Address 1204 SEVIER RD.	Date of Disbursement MM / DD / YYYY 04 / 12 / 2011
	City Cool State CA Zip Code 95614	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Category/Type: 001	
B.	Full Name (Last, First, Middle Initial) U.S. POSTAL SVC.	Transaction ID: PDTB2EXPB74
	Mailing Address 4216 PACIFIC COAST HWY	Date of Disbursement MM / DD / YYYY 04 / 12 / 2011
	City Torrance State CA Zip Code 90505	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement POSTAGE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Category/Type: 001	[MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) JAMES CAMP	Transaction ID: EXPB70
	Mailing Address 1204 SEVIER RD.	Date of Disbursement MM / DD / YYYY 04 / 12 / 2011
	City Cool State CA Zip Code 95614	Amount of Each Disbursement this Period 68.21
	Purpose of Disbursement SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Category/Type: 001	

SUBTOTAL of Disbursements This Page (optional)	368.21
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) STAPLES	Transaction ID: PDTB6EXPB70 Date of Disbursement 04 / 12 / 2011
	Mailing Address 22025 HAWTHORNE BLVD.	Amount of Each Disbursement this Period 68.21
	City Torrance State CA Zip Code 90503	
	Purpose of Disbursement SUPPLIES Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) DIRECT ADVERTISING RESPONSE, INC.	Transaction ID: EXPB62 Date of Disbursement 04 / 12 / 2011
	Mailing Address 901 E. CERRITOS AVE.	Amount of Each Disbursement this Period 2315.41
	City Anaheim State CA Zip Code 92805	
	Purpose of Disbursement MASS MAIL Candidate Name	003 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Pyrix, Inc.	Transaction ID: EXPB135 Date of Disbursement 04 / 12 / 2011
	Mailing Address 101 Waxhaw Professional Park, Ste.	Amount of Each Disbursement this Period 1.13
	City Waxhaw State NC Zip Code 28173	
	Purpose of Disbursement MERCHANT FEE Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2316.54

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) EVAN CHASE</p> <p>Mailing Address 16828 S. BUDLONG AVE.</p> <p>City Gardena State CA Zip Code 90247</p> <p>Purpose of Disbursement CAMPAIGN ADVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: EXPB95</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6585.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) GILLIARD BLANNING & ASSOC., INC.</p> <p>Mailing Address 5701 LONETREE BLVD. #301</p> <p>City Rocklin State CA Zip Code 95765</p> <p>Purpose of Disbursement MASS MAIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: EXPB93</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19359.00"/></p> <p>Category/Type: <input type="text" value="004"/></p>
<p>C. Full Name (Last, First, Middle Initial) ANAHITA NEMAT</p> <p>Mailing Address 4242 PARK VERDI</p> <p>City Calabasas State CA Zip Code 91302</p> <p>Purpose of Disbursement CAMPAIGN ADVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: EXPB92</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="4500.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) POLITICAL DATA INC.</p> <p>Mailing Address P. O. BOX 1706</p> <p>City Burbank State CA Zip Code 91507</p> <p>Purpose of Disbursement MAILING LISTS & SOFTWARE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB64</p> <p>Date of Disbursement MM / DD / YYYY 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 3463.13</p> <p>004 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB136</p> <p>Date of Disbursement MM / DD / YYYY 04 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 7.88</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB137</p> <p>Date of Disbursement MM / DD / YYYY 04 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 29.27</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.28

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)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) GARY AVEN</p> <p>Mailing Address 1704 B MARSHALLFIELD LN.</p> <p>City Redondo Beach State CA Zip Code 90278</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB103</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 1033.84</p> <p>002 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) SHERATON PHOENIX DOWNTOWN</p> <p>Mailing Address 340 N. 3RD ST.</p> <p>City Phoenix State AZ Zip Code 85004</p> <p>Purpose of Disbursement LODGING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EDTB2EXPB103</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 368.64</p> <p>002 Category/Type</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) CHOPS STEAKHOUSE</p> <p>Mailing Address 1011 L ST.</p> <p>City SACRAMENTO State CA Zip Code 95814</p> <p>Purpose of Disbursement MEALS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EDTB3EXPB103</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 79.41</p> <p>002 Category/Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1033.84

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) HYATT REGENCY	Transaction ID: EDTB1EXPB103
	Mailing Address 1209 L ST.	Date of Disbursement 04 / 15 / 2011
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 495.79
	Purpose of Disbursement LODGING Candidate Name	002 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Pyrix, Inc.	Transaction ID: EXPB138
	Mailing Address 101 Waxhaw Professional Park, Ste.	Date of Disbursement 04 / 15 / 2011
	City Waxhaw State NC Zip Code 28173	Amount of Each Disbursement this Period 27.03
	Purpose of Disbursement MERCHANT FEE Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CAMPAIGNLA	Transaction ID: EXPB130
	Mailing Address 17211 S. BROADWAY ST.	Date of Disbursement 04 / 18 / 2011
	City Gardena State CA Zip Code 90248	Amount of Each Disbursement this Period 660.00
	Purpose of Disbursement SIGNS Candidate Name	004 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

687.03

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB140</p> <p>Date of Disbursement 04 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 11.26</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) DAVID BAUER</p> <p>Mailing Address 2150 RIVER PLAZA DR. #150</p> <p>City SACRAMENTO State CA Zip Code 95833</p> <p>Purpose of Disbursement ACCOUNTING SVC.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB180</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 565.80</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) COPY BANK</p> <p>Mailing Address 23215 HAWTHORNE BLVD. #B</p> <p>City TORRANCE State CA Zip Code 90505</p> <p>Purpose of Disbursement PRINTING</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB179</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 579.96</p> <p>004 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ►

1157.02

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) CREATIVE DIRECT MARKETING GROUP, INC.</p> <p>Mailing Address 21171 S. WESTERN AVE. #260</p> <p>City Torrance State CA Zip Code 90501</p> <p>Purpose of Disbursement MASS MAIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB178</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 30684.74</p> <p>004 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) DAVIS GROUP</p> <p>Mailing Address 6621 E. PACIFIC COAST HWY 140</p> <p>City LONG BEACH State CA Zip Code 90803</p> <p>Purpose of Disbursement FUNDRAISING ADVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB177</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 7500.00</p> <p>003 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) GILLIARD BLANNING & ASSOC., INC.</p> <p>Mailing Address 5701 LONETREE BLVD. #301</p> <p>City Rocklin State CA Zip Code 95765</p> <p>Purpose of Disbursement MASS MAIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB176</p> <p>Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 29577.00</p> <p>004 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

67761.74

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A. Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB220 Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 9.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) JENNIFER RODRIGUEZ</p> <p>Mailing Address 148 14TH ST. #A</p> <p>City SEAL BEACH State CA Zip Code 90740</p> <p>Purpose of Disbursement CAMPAIGN ADVICE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB174 Date of Disbursement 04 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 6000.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB221 Date of Disbursement 04 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 2.48</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6011.48

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 28 / 39

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB139</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 48.39</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB222</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 11.26</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Pyrix, Inc.</p> <p>Mailing Address 101 Waxhaw Professional Park, Ste.</p> <p>City Waxhaw State NC Zip Code 28173</p> <p>Purpose of Disbursement MERCHANT FEE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXPB223</p> <p>Date of Disbursement 04 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 3.38</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

63.03

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 29 / 39

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

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NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Pyrix, Inc. <hr/> Mailing Address 101 Waxhaw Professional Park, Ste. <hr/> City Waxhaw State NC Zip Code 28173 <hr/> Purpose of Disbursement MERCHANT FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB141 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 29.25 <hr/> Category/ Type 001
B. Full Name (Last, First, Middle Initial) Pyrix, Inc. <hr/> Mailing Address 101 Waxhaw Professional Park, Ste. <hr/> City Waxhaw State NC Zip Code 28173 <hr/> Purpose of Disbursement MERCHANT FEE Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: EXPB256 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 1 1
	Amount of Each Disbursement this Period 18.47 <hr/> Category/ Type 001

SUBTOTAL of Disbursements This Page (optional) ►

47.72

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

158500.54

SCHEDULE C (FEC Form 3)

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

PAGE 30 / 39

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
 FRIENDS OF CRAIG HUEY FOR CONGRESS

Transaction ID: PAYC2

LOAN SOURCE Full Name (Last, First, Middle Initial) CRAIG HUEY	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 27853 CONESTOGA DR.	
City Rolling Hills State CA ZIP Code 90274	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
250000.00	0.00	250000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 03 D D 24 Y Y Y Y 2011	08/07/2011	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="250000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text"/>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

A. Form/Schedule : **SC/10**

PERSONAL FUNDS

Transaction ID : **PAYC2**

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

Transaction ID: PAYC173

LOAN SOURCE Full Name (Last, First, Middle Initial) CRAIG HUEY	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
Mailing Address 27853 CONESTOGA DR.	
City Rolling Hills State CA ZIP Code 90274	

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
--------------------------------------	------------------------------------	----------------------------------------------------------

TERMS

Date Incurred MM DD YY 04 21 2011	Date Due 06/30/2011	Interest Rate 0.00 % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
-----------------------------------------	------------------------	-------------------------------	---------------------------------------------------------------------------------

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	250000.00
TOTALS This Period (last page in this line only)	▶	500000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

A. Form/Schedule : **SC/10**

PERSONAL FUNDS

Transaction ID : **PAYC173**

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor GARY AVEN	Nature of Debt (Purpose): AIRFARE
Mailing Address 1704 B MARSHALLFIELD LN.	
City State ZIP Code Redondo Beach CA 90278	

Outstanding Balance Beginning This Period 352.40	Transaction ID: PAYD495	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 352.40

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GARY AVEN	Nature of Debt (Purpose): AUTO RENTAL
Mailing Address 1704 B MARSHALLFIELD LN.	
City State ZIP Code Redondo Beach CA 90278	

Outstanding Balance Beginning This Period 52.15	Transaction ID: PAYD496	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 52.15

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GARY AVEN	Nature of Debt (Purpose): BOOTH RENTAL
Mailing Address 1704 B MARSHALLFIELD LN.	
City State ZIP Code Redondo Beach CA 90278	

Outstanding Balance Beginning This Period 1200.00	Transaction ID: PAYD497	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1200.00

1) SUBTOTALS This Period This Page (optional).....	▶	1604.55
2) TOTALS This Period (last page this line number only).....	▶	
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)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CALL PLAN			Nature of Debt (Purpose): PHONEBANKS
Mailing Address 1146 E. ROUTE 66			
City GLENDDORA	State CA	ZIP Code 91740	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAYD226	
Amount Incurred This Period <input type="text" value="7500.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7500.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CREATIVE DIRECT MARKETING GROUP, INC.			Nature of Debt (Purpose): VIDEO PRODUCTION
Mailing Address 21171 S. WESTERN AVE. #260			
City Torrance	State CA	ZIP Code 90501	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: PAYD262	
Amount Incurred This Period <input type="text" value="2130.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2130.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT ADVERTISING RESPONSE, INC.			Nature of Debt (Purpose): MASS MAIL
Mailing Address 901 E. CERRITOS AVE.			
City Anaheim	State CA	ZIP Code 92805	

Outstanding Balance Beginning This Period <input type="text" value="2315.41"/>		Transaction ID: PAYD58	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2315.41"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="9630.00"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor DIRECT ADVERTISING RESPONSE, INC.			Nature of Debt (Purpose): MASS MAIL
Mailing Address 901 E. CERRITOS AVE.			
City Anaheim	State CA	ZIP Code 92805	

Outstanding Balance Beginning This Period 0.00		Transaction ID: PAYD231	
Amount Incurred This Period 3209.91	Payment This Period 0.00	Outstanding Balance at Close of This Period 3209.91	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor GILLIARD BLANNING & ASSOC., INC.			Nature of Debt (Purpose): MASS MAIL
Mailing Address 5701 LONETREE BLVD. #301			
City Rocklin	State CA	ZIP Code 95765	

Outstanding Balance Beginning This Period 2251.00		Transaction ID: PAYD49	
Amount Incurred This Period 0.00	Payment This Period 2251.00	Outstanding Balance at Close of This Period 0.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor GILLIARD BLANNING & ASSOC., INC.			Nature of Debt (Purpose): MASS MAIL
Mailing Address 5701 LONETREE BLVD. #301			
City Rocklin	State CA	ZIP Code 95765	

Outstanding Balance Beginning This Period 0.00		Transaction ID: PAYD225	
Amount Incurred This Period 28213.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 28213.00	

1) SUBTOTALS This Period This Page (optional).....	31422.91
2) TOTALS This Period (last page this line number only).....	
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)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): MEETING
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period		Transaction ID: PAYD314	
19.65			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	19.65	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): SUPPLIES
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period		Transaction ID: PAYD315	
4.88			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4.88	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): PARKING
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period		Transaction ID: PAYD316	
25.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	25.00	

1) SUBTOTALS This Period This Page (optional).....	▶	49.53
2) TOTALS This Period (last page this line number only).....	▶	
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)	▶	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): MEETING
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period 40.00		Transaction ID: PAYD317	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): PARKING
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period 6.00		Transaction ID: PAYD318	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 6.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRAIG HUEY			Nature of Debt (Purpose): STOCK PHOTOGRAPHY
Mailing Address 27853 CONESTOGA DR.			
City Rolling Hills	State CA	ZIP Code 90274	

Outstanding Balance Beginning This Period 0.00		Transaction ID: PAYD259	
Amount Incurred This Period 175.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 175.00	

1) SUBTOTALS This Period This Page (optional).....	221.00
2) TOTALS This Period (last page this line number only).....	
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)	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 39 / 39
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 FRIENDS OF CRAIG HUEY FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor JENNIFER RODRIGUEZ	Nature of Debt (Purpose): FOOD FOR VOLUNTEERS
Mailing Address 148 14TH ST. #A	
City SEAL BEACH State CA ZIP Code 90740	

Outstanding Balance Beginning This Period 0.00	Transaction ID: PAYD2097	
Amount Incurred This Period 40.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor JENNIFER RODRIGUEZ	Nature of Debt (Purpose): SHIPPING & SUPPLIES
Mailing Address 148 14TH ST. #A	
City SEAL BEACH State CA ZIP Code 90740	

Outstanding Balance Beginning This Period 0.00	Transaction ID: PAYD2098	
Amount Incurred This Period 50.59	Payment This Period 0.00	Outstanding Balance at Close of This Period 50.59

1) SUBTOTALS This Period This Page (optional).....	90.59
2) TOTALS This Period (last page this line number only).....	43018.58
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	50000.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	543018.58