

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

John Tavaglione for Congress

ADDRESS (number and street)

4201 Brockton Ave Ste 100

Check if different than previously reported. (ACC)

Riverside

CA

92501

2. FEC IDENTIFICATION NUMBER ▼

C C00498188

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CA

41

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

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



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

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

through

M M /

D D /

Y Y Y Y

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

Type or Print Name of Treasurer Richard Teaman

Signature of Treasurer Richard Teaman

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

**John Tavaglione for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 01 / 01 / 2013 To: M M / D D / Y Y Y Y 03 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	1354174.12
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	550.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	0.00	1353624.12
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	2949.20	1356211.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	145.90	461.52
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	2803.30	1355749.69
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	8164.43	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**John Tavaglione for Congress**

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

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	0.00	0.00
(iii) TOTAL of contributions from individuals ▶	0.00	97524.12
(b) Political Party Committees.....	0.00	10000.00
(c) Other Political Committees (such as PACs).....	0.00	368050.00
(d) The Candidate.....	0.00	600.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	1354174.12
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	11525.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	30000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	30000.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	145.90	461.52
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	145.90	1396160.64

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	2949.20	1356211.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	30000.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	30000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	550.00
(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	550.00
21. OTHER DISBURSEMENTS .....	1000.00	2135.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	3949.20	1388896.21

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	11967.73
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	145.90
25. SUBTOTAL (add Line 23 and Line 24).....	12113.63
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	3949.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	8164.43

**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 5 OF 12
	<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)  
**John Tavaglione for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Moreno Valley Black Chamber of Commerce**

Mailing Address PO Box 632

City: Moreno Valley    State: CA    Zip Code: 92556

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 0.00

Date of Receipt: **01 / 07 / 2013**

**Transaction ID : 14-4229-o**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00  
 lost in mail

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

Mailing Address 2724 GATEWAY DRIVE

City: RIVERSIDE    State: CA    Zip Code: 92507

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

Name of Employer: \_\_\_\_\_ Occupation: \_\_\_\_\_

Receipt For:  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: \_\_\_\_\_ 0.00

Date of Receipt: **02 / 12 / 2013**

**Transaction ID : 14-4270**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 45.90  
 partial refund of filing fees

**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: \_\_\_\_\_

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

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

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

\_\_\_\_\_ 145.90

\_\_\_\_\_ 145.90

**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 6 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2013
Mailing Address PAYMENT CENTER		Amount of Each Disbursement this Period 257.40 <b>Transaction ID : 17-7991</b>
City Sacramento	State CA	
Zip Code 95887-0001	Purpose of Disbursement telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address PAYMENT CENTER		Amount of Each Disbursement this Period 259.54 <b>Transaction ID : 17-8035</b>
City Sacramento	State CA	
Zip Code 95887-0001	Purpose of Disbursement telephone	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CITY OF RIVERSIDE</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 12 / 2013
Mailing Address 3900 MAIN ST.		Amount of Each Disbursement this Period 132.46 <b>Transaction ID : 17-7994</b>
City Riverside	State CA	
Zip Code 92522	Purpose of Disbursement campaign headquarters - utilities	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	649.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. DSL Extreme</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 21540 Plummer St. Ste. A		Amount of Each Disbursement this Period 37.83
City Chatsworth State CA Zip Code 91322	Purpose of Disbursement internet service 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)	<b>Transaction ID : 17-7988</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DSL Extreme</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2013
Mailing Address 21540 Plummer St. Ste. A		Amount of Each Disbursement this Period 37.83
City Chatsworth State CA Zip Code 91322	Purpose of Disbursement internet service 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)	<b>Transaction ID : 17-8032</b>
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jonathan M Lamb</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2013
Mailing Address 2220 Cathedral Ave NW		Amount of Each Disbursement this Period 618.00
City Washington State DC Zip Code 20008	Purpose of Disbursement per diem meals 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)	<b>Transaction ID : 17-7982</b>
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	693.66
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2013
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 345.95 <b>Transaction ID : 17-7956</b>
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement December campaign 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>B. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2013
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 96.00 <b>Transaction ID : 17-7987</b>
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement 1099 preparation	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 318.05 <b>Transaction ID : 17-7993</b>
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement Jan. campaign 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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	760.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 12			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) <b>A. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 222.80
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement February campaign reporting services	<b>Transaction ID : 17-8030</b>
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>B. Teaman, Ramirez &amp; Smith Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address 4201 Brockton Ave. Ste. 100		Amount of Each Disbursement this Period 125.00
City Riverside	State CA	
Zip Code 92501	Purpose of Disbursement 1120POL income tax preparation	<b>Transaction ID : 17-8031</b>
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>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 20.00
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement iPad monthly usage	<b>Transaction ID : 17-7989</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	367.80
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 10 OF 12	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 242.77
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement telephone	<b>Transaction ID : 17-7990</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 20.00
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement iPad monthly usage	<b>Transaction ID : 17-8033</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 08 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 68.38
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement telephone	<b>Transaction ID : 17-8034</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	331.15
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 12	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 20.00
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement iPad monthly usage	<b>Transaction ID : 17-8054</b>
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>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2013
Mailing Address P. O. Box 660108		Amount of Each Disbursement this Period 127.19
City Dallas	State TX	
Zip Code 75266-0108	Purpose of Disbursement telephone	<b>Transaction ID : 17-8055</b>
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>C.</b>		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	147.19
<b>TOTAL</b> This Period (last page this line number only).....	2949.20

**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 12 OF 12	
	<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)  
**John Tavaglione for Congress**

Full Name (Last, First, Middle Initial) <b>A. Ken Calvert for Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2013
Mailing Address PO Box 20123		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : 21-7997</b>
City Riverside	State CA	
Zip Code 92516	Purpose of Disbursement Political Contribution	Category/ Type 011
Candidate Name <b>Ken Calvert</b>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District: 44	

Full Name (Last, First, Middle Initial) <b>B.</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) <b>C.</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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00