

# 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

MCCLINTOCK 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** ▼

C C00446815

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

CA

04

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 06 / 05 / 2012 in the State of CA

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

- General (30G)  Runoff (30R)  Special (30S)

Election on 06 / 05 / 2012 in the State of CA

5. Covering Period

10 / 01 / 2011 through 12 / 31 / 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 David Bauer

[Electronically Filed]

Date

01 / 26 / 2012

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

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

Write or Type Committee Name  
**MCCLINTOCK FOR CONGRESS**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	125208.49	577002.24
(b) Total Contribution Refunds (from Line 20(d)) .....	100.00	500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	125108.49	576502.24
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) .....	95697.50	409305.57
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3609.70
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	95697.50	405695.87
8. Cash on Hand at Close of Reporting Period (from Line 27).....	402533.05	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	20523.14	

**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

**MCCLINTOCK 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).....	65206.44	279201.44
(ii) Unitemized.....	48502.05	255757.89
(iii) TOTAL of contributions from individuals ▶	113708.49	534959.33
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11500.00	42042.91
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	125208.49	577002.24
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	3609.70
<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>	125208.49	580611.94

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	95697.50	409305.57
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 .....	100.00	500.00
(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)).....	100.00	500.00
21. OTHER DISBURSEMENTS .....	32000.00	112000.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	127797.50	521805.57

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	405122.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	125208.49
25. SUBTOTAL (add Line 23 and Line 24).....	530330.55
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	127797.50
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	402533.05

**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 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN CHIHOREK**

Mailing Address **PO BOX 817**

City **APPLEGATE** State **CA** Zip Code **95703**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 01 / 2011**

**Transaction ID : INCA84880**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **13792 PACIFIC BREEZE DR**

City **SANTA ROSA VALLEY** State **CA** Zip Code **93012**

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

Name of Employer **SIERRA TOYOTA** Occupation **OWNER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 01 / 2011**

**Transaction ID : INCA84881**

Amount of Each Receipt this Period  
**2500.00**

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

Mailing Address **821 OWHANEE CT**

City **FREMONT** State **CA** Zip Code **94539**

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

Name of Employer **CORWIL TECH** Occupation **BUSINESS OWNER/MANAGER**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y  
**10 / 03 / 2011**

**Transaction ID : INCA84328**

Amount of Each Receipt this Period  
**500.00**

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

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

**3100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PATRICIA CRAWFORD**

Mailing Address 356 TOPAZ ST

City REDWOOD CITY State CA Zip Code 94062

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84339**

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. J. KERN HAMILTON**

Mailing Address 800 BLOSSOM HILL RD UNIT E324

City LOS GATOS State CA Zip Code 95032

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84325**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2231 N INDIAN HILL BLVD

City CLAREMONT State CA Zip Code 91711

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84330**

Amount of Each Receipt this Period  
40.00

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

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

540.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JEFFREY ROBERTS**

Mailing Address 201 GAMBIER ST

City State Zip Code  
SAN FRANCISCO CA 94134

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

Name of Employer Occupation  
JE-AL-RO INC. MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84323**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 619 47TH AVE

City State Zip Code  
SAN FRANCISCO CA 94121

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

Name of Employer Occupation  
MICHAEL H. SAMSON CONSULTANT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84327**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6340 BENNETT VALLEY RD

City State Zip Code  
SANTA ROSA CA 95404

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 03 / 2011

**Transaction ID : INCA84333**

Amount of Each Receipt this Period  
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PATRICIA BENNIE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2011	
Mailing Address 1817 FUERTE ST		<b>Transaction ID : INCA84661</b>	
City FALLBROOK	State CA	Zip Code 92028	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) <b>B. MRS. ESTHER GREENE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2011	
Mailing Address 4100 FOLSOM BLVD UNIT 7D		<b>Transaction ID : INCA84664</b>	
City SACRAMENTO	State CA	Zip Code 95819	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) <b>C. MR. PHILIP HUFTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 05 / 2011	
Mailing Address 109 VARGAS CT		<b>Transaction ID : INCA84673</b>	
City MILPITAS	State CA	Zip Code 95035	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer ALUM ROCK ELEMENTARY SCHOOL DISTRI	Occupation TEACHER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. DENISE SOLEM**

Mailing Address **PO BOX 214**

City **JANESVILLE** State **CA** Zip Code **96114**

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

Name of Employer **CALIFORNIA DEPARTMENT OF CORRECTION** Occupation **CASE RECORDS SUPERVISOR**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**235.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2011**

**Transaction ID : INCA84666**

Amount of Each Receipt this Period  
**35.00**

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

Mailing Address **PO BOX 751420**

City **PETALUMA** State **CA** Zip Code **94975**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 05 / 2011**

**Transaction ID : INCA84678**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **PO BOX 2002**

City **DIAMOND SPRINGS** State **CA** Zip Code **95619**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

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

**Transaction ID : INCA84793**

Amount of Each Receipt this Period  
**100.00**

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

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

**235.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS MADOR**

Mailing Address 804 N SIERRA BONITA AVE

City LOS ANGELES State CA Zip Code 90046

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

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

**Transaction ID : INCA84796**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 3240 SEMINOLE CIR

City FAIRFIELD State CA Zip Code 94534

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

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

**Transaction ID : INCA84762**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6343 MOUNT ACKERMAN DR

City SAN DIEGO State CA Zip Code 92111

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

Name of Employer UCSD Occupation MED SEC'Y

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

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

**Transaction ID : INCA84775**

Amount of Each Receipt this Period  
100.00

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 11 OF 142  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GLYWN CHASE JR.**

Mailing Address 1055 RANCHO DR

City Ojai State CA Zip Code 93023

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

Name of Employer HAILWOOD INC Occupation EXECUTIVE

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2011

**Transaction ID : INCA84821**

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 970 CORTE LA CIENEGA

City Ventura State CA Zip Code 93006

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

Name of Employer TAFT ELECTRIC CO Occupation CONTRACTOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2011

**Transaction ID : INCA84857**

Amount of Each Receipt this Period  
 500.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. HERMAN ROWLAND SR,**

Mailing Address 1 JELLY BELLY LN

City Fairfield State CA Zip Code 94533

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

Name of Employer JELLY BELLY CANDY CO. Occupation CHAIRMAN OF THE BOARD

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 07 / 2011

**Transaction ID : INCA84839**

Amount of Each Receipt this Period  
 1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SHUSHAN SIMON**

Mailing Address 3310 OAKMONT VIEW DR

City State Zip Code  
GLENDALE CA 91208

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NONE HOUSEWIFE/RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA84851**

Amount of Each Receipt this Period

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

Mailing Address 2197 SUTTER VIEW LN

City State Zip Code  
LINCOLN CA 95648

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA84853**

Amount of Each Receipt this Period

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

Mailing Address 151 ONEIL CIR

City State Zip Code  
HERCULES CA 94547

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
SELF REAL ESTATE BROKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA84871**

Amount of Each Receipt this Period

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

**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 13 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CAROL MANNING**

Mailing Address 24141 OLEANDER WAY

City State Zip Code  
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation  
TECHNICAL MAINTENANCE SUPPORT, INC. PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2011

**Transaction ID : INCA85080**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 24141 OLEANDER WAY

City State Zip Code  
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation  
TECHNICAL MAINTENANCE SUPPORT, INC. VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2011

**Transaction ID : INCA85081**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 8545 CARMEL VALLEY RD

City State Zip Code  
CARMEL CA 93923

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 13 / 2011

**Transaction ID : INCA84892**

Amount of Each Receipt this Period  
200.00

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ROBIN WILLIS**

Mailing Address 196 QUAILS TRL

City THOUSAND OAKS State CA Zip Code 91361

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 13 / 2011

**Transaction ID : INCA84888**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address PO BOX 641

City MEADOW VISTA State CA Zip Code 95722

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

**Transaction ID : INCA84930**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 3120 CAPISTRANO WAY

City ROCKLIN State CA Zip Code 95677

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

Name of Employer TRI CONTINENT SCI Occupation QUALITY MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

**Transaction ID : INCA84932**

Amount of Each Receipt this Period  
**100.00**

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DONN OLSON**

Mailing Address 2730 KALMAN ST

City ACTON State CA Zip Code 93510

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

Name of Employer ANTHONY INT. Occupation TOOL MAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200.44

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

**Transaction ID : INCA84923**

Amount of Each Receipt this Period  
40.00

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

Mailing Address 12861 CHATSWORTH LN

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

**Transaction ID : INCA84913**

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
**JOHN VAILLANCOURT M.D.**

Mailing Address 443 CRESTMONT DR

City SAN FRANCISCO State CA Zip Code 94131

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 19 / 2011

**Transaction ID : INCA84917**

Amount of Each Receipt this Period  
75.00

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

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

215.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. TROY THOMASON**

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 21 / 2011

**Transaction ID : INCA84952**

Amount of Each Receipt this Period  
30.00

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

Mailing Address 3906 PETALGLEN PL

City State Zip Code  
SANTA ROSA CA 95403

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

Name of Employer Occupation  
DEVINCENZI CONCRETE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : INCA84968**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4528 SCENIC DR

City State Zip Code  
ROCKLIN CA 95765

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : INCA84963**

Amount of Each Receipt this Period  
100.00

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

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

180.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MORTON RAPPAPORT**

Mailing Address 3068 DONA SUSANA DR

City State Zip Code  
STUDIO CITY CA 91604

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 24 / 2011

**Transaction ID : INCA84966**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 3011 ROYAL DR

City State Zip Code  
CAMERON PARK CA 95682

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 30 / 2011

**Transaction ID : INCA85000**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 2325 N OLIVE LN

City State Zip Code  
SANTA ANA CA 92706

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

Name of Employer Occupation  
SANTA FE REALTY CO OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 31 / 2011

**Transaction ID : INCA85002**

Amount of Each Receipt this Period  
20.00

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

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

70.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. KENNETH HUNTER</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2011	
Mailing Address 1621 N REFUGIO RD		<b>Transaction ID : INCA85098</b>	
City SANTA YNEZ	State CA	Zip Code 93460	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer VAQUERO ENERGY, INC.	Occupation EXECUTIVE		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>B. MR. CHARLES SOMERS</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 31 / 2011	
Mailing Address 5241 ARNOLD AVE		<b>Transaction ID : INCA85100</b>	
City MCCLELLAN	State CA	Zip Code 95652	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00	
Name of Employer SITE SERVICES LLC	Occupation CEO		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) <b>C. MRS. JOANN REBANE</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 01 / 2011	
Mailing Address 10832 CEMENT HILL RD		<b>Transaction ID : INCA85004</b>	
City NEVADA CITY	State CA	Zip Code 95959	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD BOUCHARD M.D.**

Mailing Address 140 DAWN RIVER WAY

City FOLSOM State CA Zip Code 95630

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 03 / 2011

**Transaction ID : INCA85005**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2197 SUTTER VIEW LN

City LINCOLN State CA Zip Code 95648

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 07 / 2011

**Transaction ID : INCA85062**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2197 SUTTER VIEW LN

City LINCOLN State CA Zip Code 95648

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 10 / 2011

**Transaction ID : INCA85101**

Amount of Each Receipt this Period  
**100.00**

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

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

**300.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MARY CONKEY**

Mailing Address 735 SUNRISE AVE STE 200

City ROSEVILLE State CA Zip Code 95661

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

Name of Employer N/A Occupation NOT EMPLOYED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2011

**Transaction ID : INCA85126**

Amount of Each Receipt this Period  
 1250.00

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

Mailing Address 1098 BEVINGER DR

City EL DORADO HILLS State CA Zip Code 95762

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

Name of Employer CALTRANS Occupation ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2011

**Transaction ID : INCA85124**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 16142 WOLF MTN RD

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2011

**Transaction ID : INCA85123**

Amount of Each Receipt this Period  
 500.00

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

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

2150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. WANDA GROVES**

Mailing Address 11402 CONESTOGA DR

City State Zip Code  
GRASS VALLEY CA 95949

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

Name of Employer Occupation  
PLACER COUNTY ADMINISTRATOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2011

**Transaction ID : INCA85122**

Amount of Each Receipt this Period  
600.00

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

Mailing Address 15615 HUMMER LN

City State Zip Code  
GRASS VALLEY CA 95949

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2011

**Transaction ID : INCA85120**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1916 REDWOOD AVE

City State Zip Code  
REDWOOD CITY CA 94061

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : INCA85085**

Amount of Each Receipt this Period  
100.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 22 OF 142	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH PAYNE**

Mailing Address **8854 TAPADERAS LOOP**

City **ROSEVILLE** State **CA** Zip Code **95747**

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

Name of Employer **STATE OF CALIFORNIA** Occupation **PROJECT MANAGER TOXICS**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2011**

**Transaction ID : INCA85092**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **PO BOX 3101**

City **SANTA ROSA** State **CA** Zip Code **95402**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 15 / 2011**

**Transaction ID : INCA85114**

Amount of Each Receipt this Period  
**300.00**

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

Mailing Address **1482 EAST VALLEY RD STE 601**

City **MONTECITO** State **CA** Zip Code **93108**

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

Name of Employer **ROBERT B. REINGOLD, INC** Occupation **BUSINESSMAN**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 18 / 2011**

**Transaction ID : INCA85135**

Amount of Each Receipt this Period  
**1000.00**

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

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

**1400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**ROBINSON FAMILY ENTERPRISES LP**

Mailing Address 293 LOWER GRASS VALLEY RD

City State Zip Code  
NEVADA CITY CA 95959

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA85136**

Amount of Each Receipt this Period

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA85139**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL BENVENUTI JR.**

Mailing Address 4378 AUBURN BLVD STE 300

City State Zip Code  
SACRAMENTO CA 95841

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
TOWER DEVELOPMENT COMPANY OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

**Transaction ID : INCA85163**

Amount of Each Receipt this Period

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

**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 24 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PHILIP HUFTON**

Mailing Address 109 VARGAS CT

City State Zip Code  
MILPITAS CA 95035

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

Name of Employer Occupation  
ALUM ROCK ELEMENTARY SCHOOL DISTRI TEACHER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2011

**Transaction ID : INCA85162**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1545 GRASS VALLEY HWY APT 49

City State Zip Code  
AUBURN CA 95603

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

Name of Employer Occupation  
DRIFTWOOD VILLAGE PROPERTY MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2011

**Transaction ID : INCA85168**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2325 N OLIVE LN

City State Zip Code  
SANTA ANA CA 92706

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

Name of Employer Occupation  
SANTA FE REALTY CO OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 30 / 2011

**Transaction ID : INCA85185**

Amount of Each Receipt this Period  
20.00

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

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

620.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MS SANDRA BIERER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 30 / 2011
Mailing Address 3011 ROYAL DR		<b>Transaction ID : INCA85187</b>
City CAMERON PARK	State CA	Zip Code 95682
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer NONE	Occupation HOMEMAKER	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>B. MR. EUGENE CRAMER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 2176 VIA TECA		<b>Transaction ID : INCA85214</b>
City SAN CLEMENTE	State CA	Zip Code 92673
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) <b>C. MR. WALTER KLEINER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 05 / 2011
Mailing Address 1725 89TH PL NE		<b>Transaction ID : INCA85203</b>
City CLYDE HILL	State WA	Zip Code 98004
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 563.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 938.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	613.00
<b>TOTAL</b> 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 26 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JEFFREY FROST M.D.**

Mailing Address 136 GLASSON WAY

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2011

**Transaction ID : INCA85240**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 880 CAMPUS COMMONS RD

City SACRAMENTO State CA Zip Code 95825

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2011

**Transaction ID : INCA85217**

Amount of Each Receipt this Period  
 100.00

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

Mailing Address PO BOX 157

City SHINGLE SPRINGS State CA Zip Code 95682

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

Name of Employer VERISIGN, INC. Occupation VP

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2011

**Transaction ID : INCA85232**

Amount of Each Receipt this Period  
 200.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. D. SEAVELLO**

Mailing Address 1495 ROCK SPRINGS RD

City ESCONDIDO State CA Zip Code 92026

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2011

**Transaction ID : INCA85221**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 2334 GREENFIELD AVE

City ARCADIA State CA Zip Code 91006

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85370**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address 401 WILSHIRE BLVD STE 700

City SANTA MONICA State CA Zip Code 90401

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

Name of Employer THE MACERICH CO. Occupation VICE CHAIRMAN OF THE BOARD

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85269**

Amount of Each Receipt this Period  
**100.00**

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

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

**275.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS BARBARA BECK**

Mailing Address 3103 ARIZONA AVE

City State Zip Code  
SANTA MONICA CA 90404

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**325.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85253**

Amount of Each Receipt this Period  
**150.00**

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

Mailing Address 5191 READ RD

City State Zip Code  
MOORPARK CA 93021

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

Name of Employer Occupation  
NONE RETIRED TEACHER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**275.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85430**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 445 OAK HILL TER

City State Zip Code  
LOMPOC CA 93436

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**700.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85263**

Amount of Each Receipt this Period  
**200.00**

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

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

**400.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARGARET CARLI**

Mailing Address 8299 PARUS WAY

City GRANITE BAY State CA Zip Code 95746

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85254**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address PO BOX 817

City APPLEGATE State CA Zip Code 95703

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85397**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1512 RIVER OAKS DR

City MODESTO State CA Zip Code 95356

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

Name of Employer MODERN STEEL STRUCTURES Occupation GENERAL CONTRACTOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85290**

Amount of Each Receipt this Period  
**300.00**

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

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

**500.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CLYDE COURTNEY**

Mailing Address 282 BERRY AVE

City HAYWARD State CA Zip Code 94544

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85420**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1822 BEVERLY GLEN DR

City SANTA ANA State CA Zip Code 92705

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

Name of Employer NONE Occupation RETIRED PHYSICIAN

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85439**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4528 SCENIC DR

City ROCKLIN State CA Zip Code 95765

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85337**

Amount of Each Receipt this Period  
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JAMES FISHER**

Mailing Address 3040 JAVA RD

City COSTA MESA State CA Zip Code 92626

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85305**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

**B.** Full Name (Last, First, Middle Initial)  
**L. ILEEN & JERRY FORD**

Mailing Address 980 TRAILS END DR

City PLACERVILLE State CA Zip Code 95667

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 213.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85252**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

Mailing Address 33 ROCKINGHAM DR

City NEWPORT BEACH State CA Zip Code 92660

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 375.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85266**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

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

\_\_\_\_\_ 300.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM GORMAN**

Mailing Address 2134 E LARKWOOD ST

City WEST COVINA State CA Zip Code 91791

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85348**

Amount of Each Receipt this Period  
50.00

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

Mailing Address PO BOX 641

City MEADOW VISTA State CA Zip Code 95722

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85310**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 6940 EASTSIDE CT

City ORANGEVALE State CA Zip Code 95662

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85317**

Amount of Each Receipt this Period  
1500.00

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

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

1600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MRS. HAZEL HART</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 842 MUIRLANDS VISTA WAY		<b>Transaction ID : INCA85350</b>	
City LA JOLLA	State CA	Zip Code 92037	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 200.00	
Name of Employer NONE		Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1100.00	

Full Name (Last, First, Middle Initial) <b>B. MRS. NANCY KAYS</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 2231 N INDIAN HILL BLVD		<b>Transaction ID : INCA85404</b>	
City CLAREMONT	State CA	Zip Code 91711	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 35.00	
Name of Employer NONE		Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 210.00	

Full Name (Last, First, Middle Initial) <b>C. MRS. FRANCES KEENEY</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 908 N SAN ANTONIO AVE		<b>Transaction ID : INCA85259</b>	
City ONTARIO	State CA	Zip Code 91762	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 100.00	
Name of Employer NONE		Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	335.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. VERNA MATTOX**

Mailing Address 1455 SUPERIOR AVE #303

City NEWPORT BEACH State CA Zip Code 92663

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85267**

Amount of Each Receipt this Period  
 150.00

Amount of Each Receipt this Period  
 450.00

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

Mailing Address 1058 N LA CADENA DR

City COLTON State CA Zip Code 92324

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85363**

Amount of Each Receipt this Period  
 125.00

Amount of Each Receipt this Period  
 425.00

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

Mailing Address 3 PURSUIT # 204

City ALISO VIEJO State CA Zip Code 92656

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85296**

Amount of Each Receipt this Period  
 100.00

Amount of Each Receipt this Period  
 300.00

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

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

375.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**R. DONALD NORENE**

Mailing Address 600 SWANSON RD

City RIO OSO State CA Zip Code 95674

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

Name of Employer NORENE RANCHES, INC. Occupation FARMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85424**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 132 CAPISTRANO AVE

City SHELL BEACH State CA Zip Code 93449

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
641.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85300**

Amount of Each Receipt this Period  
170.00

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

Mailing Address 14480 QUAKER HILL CROSS RD

City NEVADA CITY State CA Zip Code 95959

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85286**

Amount of Each Receipt this Period  
500.00

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

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

1170.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS FRANCES POHORSKY**

Mailing Address 12861 CHATSWORTH LN

City GRASS VALLEY State CA Zip Code 95945

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85256**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 8545 CARMEL VALLEY RD

City CARMEL State CA Zip Code 93923

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85393**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 20525 NORDHOFF ST

City CHATSWORTH State CA Zip Code 91311

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

Name of Employer LUMBER CITY CORP. Occupation PRESIDENT

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85456**

Amount of Each Receipt this Period  
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. KARL SCHEIDHAUER</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 1196 FOOTHILL ST		<b>Transaction ID : INCA85366</b>	
City REDWOOD CITY	State CA	Zip Code 94061	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer MOUNTAIN VIEW FORIEGN CAR	Occupation OFFICE WORKER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) <b>B. MRS. BETTY SHERRY</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 1724 W CATALPA AVE APT 320		<b>Transaction ID : INCA85262</b>	
City ANAHEIM	State CA	Zip Code 92801	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>C. MRS. EVADEAN SMITH</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 09 / 2011	
Mailing Address 1052 PAUMA VALLEY RD		<b>Transaction ID : INCA85445</b>	
City BANNING	State CA	Zip Code 92220	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	275.00
<b>TOTAL</b> This Period (last page this line number only).....	[Empty Box]

**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 38 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

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

Mailing Address 17635 CAMINO DE YATASTO

City State Zip Code  
PACIFIC PALISADES CA 90272

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

Name of Employer Occupation  
KEYVEST CO. INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : INCA85455**

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
**The Robert William Potter 1999 Living TruST**

Mailing Address 2900 PARK NEWPORT APT 415

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : INCA85314**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 10 RUE CANNES

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
NONE HOUSEWIFE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 09 / 2011

**Transaction ID : INCA85369**

Amount of Each Receipt this Period  
1000.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MARION WHITEHEAD**

Mailing Address 581 VISTA DE VENTURA

City State Zip Code  
VENTURA CA 93003

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 09 / 2011

**Transaction ID : INCA85242**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4113 PERLITA AVE UNIT B

City State Zip Code  
LOS ANGELES CA 90039

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

Name of Employer Occupation  
WALT DISNEY COMPANY ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2011

**Transaction ID : INCA85479**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 6915 GULL CT

City State Zip Code  
VENTURA CA 93003

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85491**

Amount of Each Receipt this Period  
300.00

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

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

425.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SHIRLEY BROOKS**

Mailing Address **683 ANDERSON AVE**

City **BRENTWOOD** State **CA** Zip Code **94513**

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

Name of Employer **NONE** Occupation **HOUSEWIFE**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 12 / 2011**

**Transaction ID : INCA85563**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address **2972 SAILOR AVE**

City **VENTURA** State **CA** Zip Code **93001**

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 12 / 2011**

**Transaction ID : INCA85619**

Amount of Each Receipt this Period  
**200.00**

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

Mailing Address **1150 FLYING FISH ST**

City **FOSTER CITY** State **CA** Zip Code **94404**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 12 / 2011**

**Transaction ID : INCA85575**

Amount of Each Receipt this Period  
**50.00**

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

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

**350.00**



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

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

FOR LINE NUMBER: PAGE 41 OF 142  
(check only one)  
 11a 12     11b 13a     11c 13b     11d 14     15

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT FAIRBANKS**

Mailing Address 3996 MCKINLEY BLVD

City State Zip Code  
SACRAMENTO CA 95819

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85565**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 3415 WARWOOD RD

City State Zip Code  
LAKEWOOD CA 90712

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85599**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 15615 HUMMER LN

City State Zip Code  
GRASS VALLEY CA 95949

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85483**

Amount of Each Receipt this Period  
35.00

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

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

385.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES F. WOOD TRUST A**

Mailing Address 212 VISTA DEL PARQUE

City REDONDO BEACH      State CA      Zip Code 90277

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

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

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_ **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85527**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

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

Mailing Address 25275 LA LOMA DR

City LOS ALTOS HILLS      State CA      Zip Code 94022

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

Name of Employer NONE      Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_ **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85564**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100.00**

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

Mailing Address 724 E GRINELL DR

City BURBANK      State CA      Zip Code 91501

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

Name of Employer CA STATE DEPT OF JUSTICE      Occupation LAWYER

Receipt For: 2012  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_ **225.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85642**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **50.00**

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

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

\_\_\_\_\_ **250.00**

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL MANGIONE**

Mailing Address 3130 CORTE PORTOFINO

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
MANGIONE INC. OWNER - MCDONALDS RESTAURANTS

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85496**

Amount of Each Receipt this Period  
750.00

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

Mailing Address 375 BULLARD AVE STE 1

City State Zip Code  
CLOVIS CA 93612

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

Name of Employer Occupation  
STATE FARM INSURANCE INSURANCE AGENT

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85516**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 1648 SAN ONOFRE DR

City State Zip Code  
PACIFIC PALISADES CA 90272

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

Name of Employer Occupation  
WEDBUSH MORGAN SECURITIES FINANCIAL ADVISOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1100.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85633**

Amount of Each Receipt this Period  
400.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**LINDA PEDDIE D. V.**

Mailing Address 4201 FARIA RD

City State Zip Code  
VENTURA CA 93001

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : INCA85589**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 9380 RIVER RD

City State Zip Code  
CHICO CA 95928

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : INCA85626**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 629 BARCELONA DR

City State Zip Code  
SONOMA CA 95476

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 12 / 2011

**Transaction ID : INCA85505**

Amount of Each Receipt this Period  
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN RODGERS**

Mailing Address 5440 WASHINGTON ST

City NAPA State CA Zip Code 94558

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

Name of Employer NONE Occupation RETIRED MARINE ENGINEER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85495**

Amount of Each Receipt this Period  
450.00

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

Mailing Address 3240 SEMINOLE CIR

City FAIRFIELD State CA Zip Code 94534

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85481**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 19 REATA PL

City OAKLAND State CA Zip Code 94618

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85535**

Amount of Each Receipt this Period  
50.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. W. LEONARD SEELEY**

Mailing Address 10351 KENWOOD DR

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **950.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85482**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 513 STARLIGHT LN

City ARROYO GRANDE State CA Zip Code 93420

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85498**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 3310 OAKMONT VIEW DR

City GLENDALE State CA Zip Code 91208

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

Name of Employer NONE Occupation HOUSEWIFE/RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85639**

Amount of Each Receipt this Period  
**100.00**

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

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

**650.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NORMAN SNEDDON**

Mailing Address 8889 HIGHWAY 49

City SONORA State CA Zip Code 95370

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85595**

Amount of Each Receipt this Period  
75.00

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

Mailing Address 10703 GRAND AVE

City TEMPLE CITY State CA Zip Code 91780

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85572**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 380 AILANTHUS LN

City PLACERVILLE State CA Zip Code 95667

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 12 / 2011

**Transaction ID : INCA85487**

Amount of Each Receipt this Period  
100.00

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

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

275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PETER BROWN**

Mailing Address 125 WINSTED CT

City State Zip Code  
SAN JOSE CA 95139

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

Name of Employer Occupation  
IBM CORP PROGRAMMER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85654**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 112 FAIRWAY DR

City State Zip Code  
SANTA ROSA CA 95409

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

Name of Employer Occupation  
JOHN FLITNER, ATTORNEY AT LAW ATTORNEY

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85705**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 26026 ADAMOR RD

City State Zip Code  
CALABASAS CA 91302

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
650.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85711**

Amount of Each Receipt this Period  
150.00

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

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

600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>MRS. WANDA GROVES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011
Mailing Address 11402 CONESTOGA DR		<b>Transaction ID : INCA86423</b>
City GRASS VALLEY	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer PLACER COUNTY	Occupation ADMINISTRATOR	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 850.00	

Full Name (Last, First, Middle Initial) <b>MRS. CONSTANCE HOH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011
Mailing Address 1580 EDMOND DR		<b>Transaction ID : INCA85688</b>
City SAN CARLOS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>MR. LYLE JONES</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 13 / 2011
Mailing Address 1310 E OCEAN BLVD UNIT 201		<b>Transaction ID : INCA85713</b>
City LONG BEACH	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> 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 50 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DOUGLAS MADOR**

Mailing Address 804 N SIERRA BONITA AVE

City LOS ANGELES      State CA      Zip Code 90046

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

Name of Employer NONE      Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85692**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 850.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. FREDERICK MIELKE JR.**

Mailing Address 23300 VIA ESPLENDOR UNIT 57

City CUPERTINO      State CA      Zip Code 95014

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

Name of Employer NONE      Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85684**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 400.00

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

Mailing Address 13600 MARINA POINTE DR UNIT 1605

City MARINA DEL REY      State CA      Zip Code 90292

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

Name of Employer NONE      Occupation LABORER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 \_\_\_\_\_ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85663**

Amount of Each Receipt this Period  
 \_\_\_\_\_ 100.00

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

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

\_\_\_\_\_ 1350.00

\_\_\_\_\_

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANTHONY RAUSIN**

Mailing Address 401 TERRIWOOD AVE

City BAKERSFIELD State CA Zip Code 93308

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

Name of Employer CIMARRON OIL COMPANY Occupation OIL PRODUCER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85681**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 4021 MORNING STAR DR

City HUNTINGTON BEACH State CA Zip Code 92649

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85668**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 1002 14TH ST APT 2

City SANTA MONICA State CA Zip Code 90403

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

Name of Employer HUNTLEY SANTA MONICA BEACH HOTEL Occupation DIR. GUEST SERVICES

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85675**

Amount of Each Receipt this Period  
**40.00**

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

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

**390.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. NEWTON YOUNG**

Mailing Address 22637 HICKORY AVE

City TORRANCE State CA Zip Code 90505

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85702**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 4545 TOMPKINS AVE

City OAKLAND State CA Zip Code 94619

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
305.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85920**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 1541 GLENCREST DR

City SAN JOSE State CA Zip Code 95118

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

Name of Employer LOCKHEED MARTIN Occupation ESTIMATOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
950.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85881**

Amount of Each Receipt this Period  
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. BRUCE CLEGG**

Mailing Address 4401 ORWOOD RD

City State Zip Code  
BRENTWOOD CA 94513

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**760.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85888**

Amount of Each Receipt this Period  
**228.00**

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

Mailing Address 2669 YORKTON DR

City State Zip Code  
MOUNTAIN VIEW CA 94040

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85915**

Amount of Each Receipt this Period  
**500.00**

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

Mailing Address 2669 YORKTON DR

City State Zip Code  
MOUNTAIN VIEW CA 94040

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85883**

Amount of Each Receipt this Period  
**500.00**

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

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

**1228.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. BARBARA DE SAUSSURE**

Mailing Address 3842 BROOKDALE BLVD

City State Zip Code  
CASTRO VALLEY CA 94546

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85833**

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
**MR. AL DE WINKLE**

Mailing Address 1246 HEKMAN CIR

City State Zip Code  
RIPON CA 95366

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85800**

Amount of Each Receipt this Period  
50.00

**C.** Full Name (Last, First, Middle Initial)  
**MR. NEWTON DRURY JR.**

Mailing Address 3 CORTE BOMBERO

City State Zip Code  
ORINDA CA 94563

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85798**

Amount of Each Receipt this Period  
100.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MRS. DENA FREEMAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2011	
Mailing Address PO BOX 2002		<b>Transaction ID : INCA85894</b>	
City DIAMOND SPRINGS	State CA	Zip Code 95619	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. MR. PHILIP HUFTON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2011	
Mailing Address 109 VARGAS CT		<b>Transaction ID : INCA85882</b>	
City MILPITAS	State CA	Zip Code 95035	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 75.00	
Name of Employer ALUM ROCK ELEMENTARY SCHOOL DISTRI	Occupation TEACHER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 350.00		

Full Name (Last, First, Middle Initial) <b>C. MRS. FLORENCE LA DIEU</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2011	
Mailing Address 7767 CHAPARRAL WAY		<b>Transaction ID : INCA85779</b>	
City FAIR OAKS	State CA	Zip Code 95628	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period _____ 100.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 275.00
<b>TOTAL</b> 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 56 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CARL LONG**

Mailing Address 237 TIN CUP RD

City State Zip Code  
DARBY MT 59829

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2011

**Transaction ID : INCA85927**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 15215 ANTELO PL

City State Zip Code  
LOS ANGELES CA 90077

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

Name of Employer Occupation  
UCLA SURGEON

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2011

**Transaction ID : INCA85902**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 2372 LYRIC AVE

City State Zip Code  
LOS ANGELES CA 90027

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 16 / 2011

**Transaction ID : INCA85848**

Amount of Each Receipt this Period  
100.00

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

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

400.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RALPH MOORE**

Mailing Address 570 CROCKER RD

City State Zip Code  
SACRAMENTO CA 95864

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85796**

Amount of Each Receipt this Period  
50.00

**B.** Full Name (Last, First, Middle Initial)  
**. MORONGO BAND OF MISSION INDIAN**

Mailing Address 11581 POTERO RD

City State Zip Code  
BANNING CA 92220

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

Name of Employer Occupation  
MORONGO BAND OF MISSION INDIANS INDIAN TRIBE

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA86429**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 6745 COLTON BLVD

City State Zip Code  
OAKLAND CA 94611

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85767**

Amount of Each Receipt this Period  
100.00

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**SIDNEY PETERSEN**

Mailing Address 1109 EMERALD BAY

City LAGUNA BEACH State CA Zip Code 92651

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85839**

Amount of Each Receipt this Period  
**250.00**

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

Mailing Address 526 SIERRA PL APT 16

City EL SEGUNDO State CA Zip Code 90245

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **238.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85899**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 1026 PARTRICK RD

City NAPA State CA Zip Code 94558

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85822**

Amount of Each Receipt this Period  
**50.00**

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

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

**350.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. PHILIP WAGNER**

Mailing Address 145 GLOBE AVE

City State Zip Code  
SACRAMENTO CA 95815

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85797**

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
**KENNETH WEITZMAN D.D.S.**

Mailing Address 298 UPLANDS WAY

City State Zip Code  
SOUTH LAKE TAHOE CA 96150

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

Name of Employer Occupation  
KENNETH WEITZMAN, D.D.S. DENTIST

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85858**

Amount of Each Receipt this Period  
80.00

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

Mailing Address 196 QUAILS TRL

City State Zip Code  
THOUSAND OAKS CA 91361

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85778**

Amount of Each Receipt this Period  
50.00

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

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

230.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. ARLYN WILSON**

Mailing Address 150 LONGMEADOW DR

City State Zip Code  
LOS GATOS CA 95032

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 16 / 2011

**Transaction ID : INCA85911**

Amount of Each Receipt this Period  
200.00

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

Mailing Address 1916 REDWOOD AVE

City State Zip Code  
REDWOOD CITY CA 94061

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85940**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 13640 PASEO DEL ROBLE CT

City State Zip Code  
LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85950**

Amount of Each Receipt this Period  
50.00

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

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

350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. PATRICIA CRAWFORD**

Mailing Address 356 TOPAZ ST

City REDWOOD CITY State CA Zip Code 94062

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85966**

Amount of Each Receipt this Period  
 400.00

Amount of Each Receipt this Period  
 1100.00

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

Mailing Address PO BOX 839

City SOMIS State CA Zip Code 93066

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85977**

Amount of Each Receipt this Period  
 225.00

Amount of Each Receipt this Period  
 375.00

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

Mailing Address 139 LANSBERRY CT

City LOS GATOS State CA Zip Code 95032

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

Name of Employer SELF, PATRICIA A. HERRON Occupation BOOKKEEPER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85990**

Amount of Each Receipt this Period  
 150.00

Amount of Each Receipt this Period  
 350.00

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

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

775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. MARY KAZANJIAN**

Mailing Address 831 3RD ST

City State Zip Code  
GILROY CA 95020

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA85939**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 3120 CAPISTRANO WAY

City State Zip Code  
ROCKLIN CA 95677

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

Name of Employer Occupation  
TRI CONTINENT SCI QUALITY MANAGER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
325.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA86015**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 12660 ZAPPETTINI CT

City State Zip Code  
LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation  
NVIDIA ENGINEER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
850.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA86003**

Amount of Each Receipt this Period  
250.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ARTHUR MUIR**

Mailing Address 116 N ROCHESTER ST

City State Zip Code  
SAN MATEO CA 94401

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

Name of Employer Occupation  
LUIDIA INC. PRODUCT MANAGER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA86330**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2730 KALMAN ST

City State Zip Code  
ACTON CA 93510

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

Name of Employer Occupation  
ANTHONY INT. TOOL MAKER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
200.44

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA86002**

Amount of Each Receipt this Period  
40.44

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

Mailing Address 20801 SEVILLA LN

City State Zip Code  
SARATOGA CA 95070

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

Name of Employer Occupation  
NONE RETIRED TEACHER

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 20 / 2011

**Transaction ID : INCA85955**

Amount of Each Receipt this Period  
200.00

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

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

340.44

**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 64 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL POLLARD**

Mailing Address 185 SENTAR RD

City State Zip Code  
CARPINTERIA CA 93013

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

Name of Employer Occupation  
SELF, MICHAEL POLLARD REAL ESTATE

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85957**

Amount of Each Receipt this Period  
150.00

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

Mailing Address 1753 STARVIEW DR

City State Zip Code  
SAN LEANDRO CA 94577

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA85982**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 52 HERNANDEZ AVE

City State Zip Code  
LOS GATOS CA 95030

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

Name of Employer Occupation  
QP SEMI PRESIDENT

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA86000**

Amount of Each Receipt this Period  
350.00

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

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

600.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

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

Mailing Address 443 CRESTMONT DR

City State Zip Code  
SAN FRANCISCO CA 94131

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**375.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 20 2011

**Transaction ID : INCA85946**

Amount of Each Receipt this Period  
**75.00**

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

Mailing Address PO BOX 751420

City State Zip Code  
PETALUMA CA 94975

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**450.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 20 2011

**Transaction ID : INCA86011**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 389 SAN BENITO WAY

City State Zip Code  
SAN FRANCISCO CA 94127

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**800.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 21 2011

**Transaction ID : INCA86035**

Amount of Each Receipt this Period  
**200.00**

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

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

**375.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. CARL HALE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2011	
Mailing Address 3625 QUINTARA ST		<b>Transaction ID : INCA86037</b>	
City SAN FRANCISCO	State CA	Zip Code 94116	Amount of Each Receipt this Period _____ 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 225.00		

Full Name (Last, First, Middle Initial) <b>B. KEN AND JANICE COULSON TRUST</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2011	
Mailing Address 1732 HAMER DR		<b>Transaction ID : INCA86036</b>	
City PLACENTIA	State CA	Zip Code 92870	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer		Occupation	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) <b>C. MRS. MIRIAM NESTLER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 21 / 2011	
Mailing Address 6701 SW SCATHELOCK RD		<b>Transaction ID : INCA86040</b>	
City TOPEKA	State KS	Zip Code 66614	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer PACIFIC JUSTICE INSTITUTE	Occupation PROMOTIONAL ASST		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 275.00
<b>TOTAL</b> 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 67 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HANS ROEBBELEN**

Mailing Address 2611 SEEBLICK CT

City State Zip Code  
EL DORADO HILLS CA 95762

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

**Transaction ID : INCA86048**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2666 DOVE ST

City State Zip Code  
SAN DIEGO CA 92103

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

**Transaction ID : INCA86026**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 1017 JEFFRIES AVE

City State Zip Code  
ARCADIA CA 91006

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

Name of Employer Occupation  
BOEING ENGINEER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
390.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 21 / 2011

**Transaction ID : INCA86049**

Amount of Each Receipt this Period  
30.00

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

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

430.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MR. HENRY CATE</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011	
Mailing Address 6708 LANDERWOOD LN		<b>Transaction ID : INCA86069</b>	
City SAN JOSE	State CA	Zip Code 95120	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation RETIRED / CHESS TEACHER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MR. KENDALL MILLER</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011	
Mailing Address 7350 WAKEFIELD AVE		<b>Transaction ID : INCA86058</b>	
City REEDLEY	State CA	Zip Code 93654	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KENCAROL, INC.	Occupation FARM MANAGER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1250.00	

Full Name (Last, First, Middle Initial) <b>C. MR. JOHN REED</b>		Date of Receipt M M / D D / Y Y Y Y Y 12 / 22 / 2011	
Mailing Address 808 WEST ST		<b>Transaction ID : INCA86060</b>	
City HOLLISTER	State CA	Zip Code 95023	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMERICAN CASTING COMPANY	Occupation ENGINEER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 450.00
<b>TOTAL</b> 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 69 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARY WOODLEY**

Mailing Address 2999 E OCEAN BLVD UNIT 1810

City State Zip Code  
LONG BEACH CA 90803

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

Name of Employer Occupation  
JACOBS ENGINEERING PROJECT MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 22 / 2011

**Transaction ID : INCA86056**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 753 HILLCREST ST

City State Zip Code  
EL SEGUNDO CA 90245

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

Name of Employer Occupation  
LOS ANGELES TRADE TECH. COLLEGE TEACHER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : INCA86078**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 10944 LOCH LOMOND DR

City State Zip Code  
WHITTIER CA 90606

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 23 / 2011

**Transaction ID : INCA86079**

Amount of Each Receipt this Period  
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MRS. JEAN WARD</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 26 / 2011	
Mailing Address PO BOX 251		<b>Transaction ID : INCA86333</b>	
City PALM DESERT	State CA	Zip Code 92261	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) <b>B. MRS. MARY BUERGER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011	
Mailing Address 115 STONY RIDGE CT		<b>Transaction ID : INCA86103</b>	
City HILLSDALE	State MI	Zip Code 49242	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 450.00		

Full Name (Last, First, Middle Initial) <b>C. MRS. MARY COLE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011	
Mailing Address 13640 PASEO DEL ROBLE CT		<b>Transaction ID : INCA86105</b>	
City LOS ALTOS HILLS	State CA	Zip Code 94022	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 650.00
<b>TOTAL</b> 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 71 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. HAROLD GILBREATH**

Mailing Address 7630 EL ESCORIAL WAY

City State Zip Code  
BUENA PARK CA 90620

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

Name of Employer Occupation  
PERFORMANCE FORGED PRODUCTS MACHINE MECHANIC

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
205.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86098**

Amount of Each Receipt this Period  
50.00

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

Mailing Address 24141 OLEANDER WAY

City State Zip Code  
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation  
TECHNICAL MAINTENANCE SUPPORT, INC. PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86142**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 24141 OLEANDER WAY

City State Zip Code  
LAGUNA NIGUEL CA 92677

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

Name of Employer Occupation  
TECHNICAL MAINTENANCE SUPPORT, INC. VICE PRESIDENT

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86143**

Amount of Each Receipt this Period  
2500.00

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

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

5050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. MORTON RAPPAPORT**

Mailing Address 3068 DONA SUSANA DR

City State Zip Code  
STUDIO CITY CA 91604

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
275.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86126**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 6521 CORDOBA #2

City State Zip Code  
GOLETA CA 93117

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

Name of Employer Occupation  
SELF - KAMAP PROPERTY MGMT PROPERTY MANAGEMENT

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86139**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 444 PATTEN ST

City State Zip Code  
SONOMA CA 95476

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
12 / 27 / 2011

**Transaction ID : INCA86152**

Amount of Each Receipt this Period  
250.00

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

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

450.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MRS. CAROL WILSON</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 27 / 2011	
Mailing Address 2197 SUTTER VIEW LN		<b>Transaction ID : INCA86144</b>	
City LINCORN State CA Zip Code 95648	Amount of Each Receipt this Period _____ 150.00		
FEC ID number of contributing federal political committee. C	Name of Employer NONE Occupation RETIRED		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1950.00		

Full Name (Last, First, Middle Initial) <b>B. MRS. LINNEA BRECUNIER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2011	
Mailing Address 5191 READ RD		<b>Transaction ID : INCA86165</b>	
City MOORPARK State CA Zip Code 93021	Amount of Each Receipt this Period _____ 25.00		
FEC ID number of contributing federal political committee. C	Name of Employer NONE Occupation RETIRED TEACHER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 275.00		

Full Name (Last, First, Middle Initial) <b>C. MR. JAMES COLVIN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 28 / 2011	
Mailing Address 36217 WORTHING DR		<b>Transaction ID : INCA86168</b>	
City NEWARK State CA Zip Code 94560	Amount of Each Receipt this Period _____ 250.00		
FEC ID number of contributing federal political committee. C	Name of Employer FA INSTRUMENTS, INC. Occupation OWNER		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ 425.00
<b>TOTAL</b> 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 74 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MORONGO BAND OF MISSION INDIAN**

Mailing Address 11581 POTERO RD

City <b>BANNING</b>	State <b>CA</b>	Zip Code <b>92220</b>
------------------------	--------------------	--------------------------

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

Name of Employer <b>MORONGO BAND OF MISSION INDIANS</b>	Occupation <b>INDIAN TRIBE</b>
--	-----------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		28		2011

**Transaction ID : INCA86428**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 6343 MOUNT ACKERMAN DR

City <b>SAN DIEGO</b>	State <b>CA</b>	Zip Code <b>92111</b>
--------------------------	--------------------	--------------------------

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

Name of Employer <b>UCSD</b>	Occupation <b>MED SEC'Y</b>
---------------------------------	--------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		28		2011

**Transaction ID : INCA86160**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address PO BOX 7007

City <b>NORTHRIDGE</b>	State <b>CA</b>	Zip Code <b>91327</b>
---------------------------	--------------------	--------------------------

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

Name of Employer <b>PRISM MGMT</b>	Occupation <b>CONSULTANT</b>
---------------------------------------	---------------------------------

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1500.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
12		28		2011

**Transaction ID : INCA86166**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WALTER KLEINER**

Mailing Address 1725 89TH PL NE

City State Zip Code  
CLYDE HILL WA 98004

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
938.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2011

**Transaction ID : INCA86187**

Amount of Each Receipt this Period  
375.00

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

Mailing Address 3011 ROYAL DR

City State Zip Code  
CAMERON PARK CA 95682

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : INCA86247**

Amount of Each Receipt this Period  
25.00

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

Mailing Address 126 TIGER TAIL

City State Zip Code  
OLYMPIC VALLEY CA 95146

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

Name of Employer Occupation  
ERNEST BROWN & COMPANY CONSTRUCTION LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : INCA86256**

Amount of Each Receipt this Period  
250.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JESSE FOSTER JR.**

Mailing Address 305 KAREN WAY

City TIBURON State CA Zip Code 94920

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

Name of Employer COUNTY OF SONOMA Occupation CIVIL ENGINEER TECH

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : INCA86224**

Amount of Each Receipt this Period  
**50.00**

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

Mailing Address 880 CAMPUS COMMONS RD

City SACRAMENTO State CA Zip Code 95825

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : INCA86248**

Amount of Each Receipt this Period  
**100.00**

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

Mailing Address 764 SUTRO AVE

City NOVATO State CA Zip Code 94947

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

Name of Employer SELF EMPLOYED Occupation INVESTOR

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 30 / 2011

**Transaction ID : INCA86236**

Amount of Each Receipt this Period  
**100.00**

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

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

**250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM TANNER**

Mailing Address 25518 SKYE SPRINGS LN

City State Zip Code  
KATY TX 77494

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

Name of Employer Occupation  
CONOCOPHILLIPS MANAGER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 30 / 2011

**Transaction ID : INCA86234**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 20320 SW BIRCH STREET STE 110

City State Zip Code  
NEWPORT BEACH CA 92660

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

Name of Employer Occupation  
ARMOUR BUILDING CO. REAL ESTATE INVESTOR

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : INCA86329**

Amount of Each Receipt this Period  
2500.00

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

Mailing Address 2325 N OLIVE LN

City State Zip Code  
SANTA ANA CA 92706

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

Name of Employer Occupation  
SANTA FE REALTY CO OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 31 / 2011

**Transaction ID : INCA86260**

Amount of Each Receipt this Period  
20.00

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

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

2770.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 142
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KENNETH O'BRIEN**

Mailing Address 4372 RHONE CT

City LOOMIS State CA Zip Code 95650

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

Name of Employer LITTLER MENDELSON Occupation LAWYER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : INCA86265**

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2500 SPRINGS RD SPC 116

City VALLEJO State CA Zip Code 94591

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2011

**Transaction ID : INCA86276**

Amount of Each Receipt this Period  
400.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

500.00

65206.44

**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 79 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**UNION PACIFIC CORP. FUND**

Mailing Address 600 THIRTEENETH STREET, NW, STE 34

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 10 / 31 / 2011

**Transaction ID : INCA85099**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**AT&T INC. FEDERAL PAC**

Mailing Address 208 S AKARD ST STE 3521

City DALLAS State TX Zip Code 75202

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 14 / 2011

**Transaction ID : INCA85129**

Amount of Each Receipt this Period  
 1500.00

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

Mailing Address 601 PENNSYLVANIA AVENUE, NW, S. BL

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 21 / 2011

**Transaction ID : INCA85150**

Amount of Each Receipt this Period  
 2000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

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

Mailing Address 77 BEALE ST

City State Zip Code  
SAN FRANCISCO CA 94177

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2011

**Transaction ID : INCA85436**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 55 GLENLAKE PKWY NE

City State Zip Code  
ATLANTA GA 30328

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 01 / 2011

**Transaction ID : INCA85435**

Amount of Each Receipt this Period  
500.00

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

Mailing Address 101 CONSTITUTION AVE STE 500 EAST

City State Zip Code  
WASHINGTON DC 20001

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

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 13 / 2011

**Transaction ID : INCA85766**

Amount of Each Receipt this Period  
1000.00

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

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

2500.00



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 142
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**NRA POLITICAL VICTORY FUND**

Mailing Address 11250 WAPLES MILL RD

City State Zip Code  
FAIRFAX VA 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 20 / 2011

**Transaction ID : INCA86072**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 77 BEALE ST

City State Zip Code  
SAN FRANCISCO CA 94177

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

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2011

**Transaction ID : INCA86426**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**VALERO POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 696000

City State Zip Code  
SAN ANTONIO TX 78269

FEC ID number of contributing federal political committee. **C** C00109546

Name of Employer Occupation

Receipt For: 2012  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2011

**Transaction ID : INCA86424**

Amount of Each Receipt this Period  
 2500.00

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

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

4500.00

11500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 82 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.11
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	Category/Type 001	Transaction ID : EXPB85024
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 224.12
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC.	
Candidate Name	Category/Type 001	Transaction ID : EXPB84303
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CAMPAIGNER BY PROTUS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 685 CATHCARD ST. #300		Amount of Each Disbursement this Period 1175.00
City Montreal State QC Zip Code 317	Purpose of Disbursement BROADCAST E-MAIL	
Candidate Name	Category/Type 004	Transaction ID : EXPB85042
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1406.23
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 83 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50 <b>Transaction ID : EXPB85025</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : EXPB85055</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. POLITICAL DYNAMICS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 1029 K ST. #44		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB84301</b>
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement CAMPAIGN ADVICE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5062.50
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 84 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. STATE COMPENSATION INSURANCE FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address P. O. BOX 9102		Amount of Each Disbursement this Period 417.00 <b>Transaction ID : EXPB84290</b>
City Pleasanton	State CA	
Zip Code 94566	Purpose of Disbursement INSURANCE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. STOR N LOK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : EXPB85043</b>
City SACRAMENTO	State CA	
Zip Code 95828	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. TERRA ECLIPSE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB84299</b>
City Aptos	State CA	
Zip Code 95003	Purpose of Disbursement INTERNET ADVERTISING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5557.00
<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 85 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTAL SERVICE</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011	
Mailing Address 5515 PACIFIC ST			Amount of Each Disbursement this Period 2.08	
City Rocklin	State CA	Zip Code 95677	Transaction ID : EXPB85040	
Purpose of Disbursement POSTAGE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. UPS</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011	
Mailing Address P. O. BOX 894820			Amount of Each Disbursement this Period 37.32	
City LOS ANGELES	State CA	Zip Code 90189	Transaction ID : EXPB84297	
Purpose of Disbursement SHIPPING		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. VERIZON</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 03 / 2011	
Mailing Address P. O. BOX 660720			Amount of Each Disbursement this Period 17.55	
City DALLAS	State TX	Zip Code 74266	Transaction ID : EXPB84295	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	56.95
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIA CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 656.77
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Transaction ID : EXPB84347
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SOUTHWEST AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 399.40
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Transaction ID : EDTB240EXPB84347
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VERIZON WIRELESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 60.07
City DALLAS	State TX	
Zip Code 74266	Purpose of Disbursement PHONE SVC.	Transaction ID : EDTB241EXPB84347
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	656.77
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 98.00
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING	Transaction ID : EDTB242EXPB84347 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EARTHLINK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address WWW.EARTHLINK.NET		Amount of Each Disbursement this Period 21.95
City CYBERSPACE	State CA	
Zip Code 90000	Purpose of Disbursement INTERNET SVC.	Transaction ID : EDTB243EXPB84347 <b>[MEMO ITEM]</b>
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 04 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.74
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB85026
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.74
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 88 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 1083.33 <b>Transaction ID : EXPB85056</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 46.50 <b>Transaction ID : EXPB85057</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.85 <b>Transaction ID : EXPB85027</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1130.68
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 89 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
**A. AT&T MOBILITY**

Mailing Address P. O. BOX 60017

City LOS ANGELES State CA Zip Code 90060

Purpose of Disbursement PHONE SVC. Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 10 / 07 / 2011

Amount of Each Disbursement this Period 97.61

Transaction ID : EXPB84813

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

Mailing Address P.O. BOX 670

City Roseville State CA Zip Code 95678

Purpose of Disbursement RENT Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 10 / 07 / 2011

Amount of Each Disbursement this Period 1293.00

Transaction ID : EXPB84811

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

Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement MERCHANT FEE Category/Type 001

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2012  Primary  General  Other (specify)

State: District:

Date of Disbursement 10 / 07 / 2011

Amount of Each Disbursement this Period 26.85

Transaction ID : EXPB85028

**SUBTOTAL** of Disbursements This Page (optional)..... 1417.46

**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 90 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SUREWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 237.28 <b>Transaction ID : EXPB84810</b>
City LOS ANGELES	State CA	
Zip Code 90030	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VOTE RITE SYSTEMS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 1418.80 <b>Transaction ID : EXPB84809</b>
City SACRAMENTO	State CA	
Zip Code 95827	Purpose of Disbursement MAIL PROCESSING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. OFFICE MAX</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 312 N. SUNRISE BLVD.		Amount of Each Disbursement this Period 32.16 <b>Transaction ID : EXPB85046</b>
City Roseville	State CA	
Zip Code 95661	Purpose of Disbursement SUPPLIES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1688.24
<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 91 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 11 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.50 <b>Transaction ID : EXPB85029</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 12 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.52 <b>Transaction ID : EXPB85030</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB84816</b>
City WOODLAND State CA Zip Code 95776	Purpose of Disbursement PAYROLL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1784.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 92 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 595.29 <b>Transaction ID : EXPB85049</b>
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement FUNDRAISING EVENT	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2011
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 61.00 <b>Transaction ID : EXPB85048</b>
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.63 <b>Transaction ID : EXPB85031</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	656.92
<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 93 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.70 <b>Transaction ID : EXPB85032</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" 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 10 / 21 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 208.81 <b>Transaction ID : EXPB84939</b>
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 38.80 <b>Transaction ID : EXPB84940</b>
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	249.31
<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 94 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.96 <b>Transaction ID : EXPB85033</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SUSIE'S COUNTRY OAKS RESTAURANT</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 8595 AUBURN FOLSOM RD.		Amount of Each Disbursement this Period 98.45 <b>Transaction ID : EXPB85053</b>
City Granite Bay State CA Zip Code 95746	Purpose of Disbursement MEETING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CATALYST GROUP RW, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011
Mailing Address 600 PENNSYLVANIA AVE. #330		Amount of Each Disbursement this Period 376.87 <b>Transaction ID : EXPB86299</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement MEETING EXPENSES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	476.28
<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 95 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2011		
Mailing Address 600 PENNSYLVANIA AVE. #330			Amount of Each Disbursement this Period 1000.00		
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB84938		
Purpose of Disbursement FUNDRAISING ADVICE		003 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2011		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.88		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB85034		
Purpose of Disbursement MERCHANT FEE		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2011		
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.52		
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB85035		
Purpose of Disbursement MERCHANT FEE		001 Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1001.40
<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 96 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITAL MAILING SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 1421 SHORE ST.		Amount of Each Disbursement this Period 505.99 <b>Transaction ID : EXPB84949</b>
City WEST SACRAMENTO	State CA Zip Code 95691	
Purpose of Disbursement POSTAGE	Category/Type 003	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1215.45 <b>Transaction ID : EXPB84948</b>
City WOODLAND	State CA Zip Code 95776	
Purpose of Disbursement MILEAGE	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.78 <b>Transaction ID : EXPB85036</b>
City San Jose	State CA Zip Code 95125	
Purpose of Disbursement MERCHANT FEE	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1729.22
<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 97 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. MAILCHIMP.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2011
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : EXPB85054</b>
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. EMPLOYMENT DEVELOPMENT DEPT.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 270.28 <b>Transaction ID : EXPB84982</b>
City SACRAMENTO State CA Zip Code 94230	Purpose of Disbursement TAXES 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB84981</b>
City WOODLAND State CA Zip Code 95776	Purpose of Disbursement PAYROLL 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2291.89
<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 98 OF 142		
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. INTERNAL REVENUE SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2011
Mailing Address		Amount of Each Disbursement this Period 1549.00 <b>Transaction ID : EXPB84983</b>
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.89 <b>Transaction ID : EXPB85037</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.48 <b>Transaction ID : EXPB85038</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1552.37
<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 99 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.51 <b>Transaction ID : EXPB85039</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CAMPAIGNER BY PROTUS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 685 CATHCARD ST. #300		Amount of Each Disbursement this Period 1175.00 <b>Transaction ID : EXPB85461</b>
City Montreal State QC Zip Code 317	Purpose of Disbursement BROADCAST E-MAIL 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. STOR N LOK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2011
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00 <b>Transaction ID : EXPB85462</b>
City SACRAMENTO State CA Zip Code 95828	Purpose of Disbursement STORAGE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1317.51
<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 100 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 39.67
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Transaction ID : EXPB85476
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CONTINENTAL AIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 301.40
City SACRAMENTO	State CA	
Zip Code 95838	Purpose of Disbursement AIRFARE	Transaction ID : EXPB85463
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB85475
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	401.07
<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 101 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 60017		Amount of Each Disbursement this Period 97.77
City LOS ANGELES	State CA	
Zip Code 90060	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB85014
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 114.13
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB85023
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 630.20
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	Transaction ID : EXPB85022
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	842.10
<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 102 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. FIA CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 362.10 <b>Transaction ID : EXPB85020</b>
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 280.08 <b>Transaction ID : EDTB245EXPB85020</b> <b>[MEMO ITEM]</b>
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETINGS	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. EARTHLINK</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address WWW.EARTHLINK.NET		Amount of Each Disbursement this Period 21.95 <b>Transaction ID : EDTB246EXPB85020</b> <b>[MEMO ITEM]</b>
City CYBERSPACE	State CA	
Zip Code 90000	Purpose of Disbursement INTERNET SERVICE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	362.10
<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 103 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 60.07
City DALLAS	State TX	
Zip Code 74266	Purpose of Disbursement PHONE SVC.	Transaction ID : EDTB244EXPB85020
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. POLITICAL DYNAMICS, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 1029 K ST. #44		Amount of Each Disbursement this Period 5000.00
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement CAMPAIGN ADVICE	Transaction ID : EXPB85019
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SUREWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 235.99
City LOS ANGELES	State CA	
Zip Code 90030	Purpose of Disbursement PHONE SVC.	Transaction ID : EXPB85013
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5235.99
<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 104 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TC PRINTING</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 1215 G ST.		Amount of Each Disbursement this Period 1575.96 <b>Transaction ID : EXPB85018</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement PRINTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. TERRA ECLIPSE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : EXPB85017</b>
City Aptos	State CA	
Zip Code 95003	Purpose of Disbursement INTERNET ADVERTISING	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. THE CONGRESSIONAL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 2001 NEW HAMPSHIRE AVE. NW		Amount of Each Disbursement this Period 150.00 <b>Transaction ID : EXPB85021</b>
City Wasington	State DC	
Zip Code 20009	Purpose of Disbursement DUES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4225.96
<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 105 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. USAIRWAYS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address SACRAMENTO INT'L AIRPORT		Amount of Each Disbursement this Period 220.40
City Sacramento	State CA Zip Code 95838	
Purpose of Disbursement AIRFARE	Category/Type 002	<b>Transaction ID : EXPB85464</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. VERIZON</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 47.05
City DALLAS	State TX Zip Code 74266	
Purpose of Disbursement PHONE SVC.	Category/Type 001	<b>Transaction ID : EXPB85016</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VOTE RITE SYSTEMS, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2011
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 710.60
City SACRAMENTO	State CA Zip Code 95827	
Purpose of Disbursement DATA PROCESSING	Category/Type 001	<b>Transaction ID : EXPB85015</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	978.05
<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 106 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.55 <b>Transaction ID : EXPB85171</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 9.76 <b>Transaction ID : EXPB85172</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOUSE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 14.00 <b>Transaction ID : EXPB85466</b>
City Washington State DC Zip Code 20515	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	25.31
<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 107 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.53 <b>Transaction ID : EXPB85173</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PARKWAY PLAZA INVESTORS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00 <b>Transaction ID : EXPB85066</b>
City Roseville State CA Zip Code 95678	Purpose of Disbursement RENT 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 09 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.80 <b>Transaction ID : EXPB85174</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1296.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 108 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SUSIE'S COUNTRY OAKS RESTAURANT</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011	
Mailing Address 8595 AUBURN FOLSOM RD.			Amount of Each Disbursement this Period 96.71	
City Granite Bay	State CA	Zip Code 95746	Transaction ID : EXPB85467	
Purpose of Disbursement MEETING		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. WEST COAST EVENTS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011	
Mailing Address P. O. BOX 91			Amount of Each Disbursement this Period 750.00	
City RANCHO CORDOVA	State CA	Zip Code 95741	Transaction ID : EXPB85118	
Purpose of Disbursement CATERING FOR FUNDRAISER		003 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 12 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.55	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB85175	
Purpose of Disbursement MERCHANT FEE		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	847.26
<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 109 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PUBLIC STORAGE</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2011	
Mailing Address 715 CIRBY WAY			Amount of Each Disbursement this Period 61.00	
City Roseville	State CA	Zip Code 95678	Transaction ID : EXPB85470	
Purpose of Disbursement STORAGE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. JON HUEY</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2011	
Mailing Address 2124 STEWART CIR.			Amount of Each Disbursement this Period 1781.61	
City WOODLAND	State CA	Zip Code 95776	Transaction ID : EXPB85083	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. CAPITOL HILL CLUB</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011	
Mailing Address 300 FIRST ST. SE			Amount of Each Disbursement this Period 150.36	
City WASHINGTON	State DC	Zip Code 20006	Transaction ID : EXPB85472	
Purpose of Disbursement MEETING		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1992.97
<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 110 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2011
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 15.10 <b>Transaction ID : EXPB85471</b>
City Washington State DC Zip Code 20006	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WEST COAST EVENTS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 16 / 2011
Mailing Address P. O. BOX 91		Amount of Each Disbursement this Period 135.00 <b>Transaction ID : EXPB85119</b>
City RANCHO CORDOVA State CA Zip Code 95741	Purpose of Disbursement CATERING FOR FUNDRAISER 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. TERRA ECLIPSE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 2500.00 <b>Transaction ID : EXPB85131</b>
City Aptos State CA Zip Code 95003	Purpose of Disbursement INTERNET ADVERTISING 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2650.10
<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 111 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011	
Mailing Address 600 PENNSYLVANIA AVE. #330			Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB85133	
Purpose of Disbursement FUNDRAISING ADVICE		Category/ Type 003		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. UPS</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2011	
Mailing Address P. O. BOX 894820			Amount of Each Disbursement this Period 33.85	
City LOS ANGELES	State CA	Zip Code 90189	Transaction ID : EXPB85130	
Purpose of Disbursement SHIPPING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 20 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.93	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB85176	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1034.78
<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 112 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.05 <b>Transaction ID : EXPB85177</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.88 <b>Transaction ID : EXPB85178</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. SALESFORCE.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 22 / 2011
Mailing Address 1 MARKET ST. #300		Amount of Each Disbursement this Period 375.00 <b>Transaction ID : EXPB85473</b>
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement SOFTWARE RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	376.93
<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 113 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 23 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.55 <b>Transaction ID : EXPB85179</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MAILCHIMP.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2011
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 240.00 <b>Transaction ID : EXPB85474</b>
City ATLANTA State GA Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 222.78 <b>Transaction ID : EXPB85148</b>
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	463.33
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 142			
	<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)  
**MCCLINTOCK 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 11 / 28 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 34.35 <b>Transaction ID : EXPB85149</b>
City CAROL STREAM	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 114.23 <b>Transaction ID : EXPB85147</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 1320.22 <b>Transaction ID : EXPB85146</b>
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1468.80
<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 115 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. TERRA ECLIPSE</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 9043 SOQUEL DR.		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB85141</b>
City Aptos State CA Zip Code 95003	Purpose of Disbursement INTERNET ADVERTISING 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. THE BOVEE CO.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 1127 11TH ST. #310		Amount of Each Disbursement this Period 1189.40 <b>Transaction ID : EXPB85145</b>
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement FUNDRAISING COMMISSION 003 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. THE CONGRESSIONAL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011
Mailing Address 2001 NEW HAMPSHIRE AVE. NW		Amount of Each Disbursement this Period 35.00 <b>Transaction ID : EXPB85144</b>
City Wasington State DC Zip Code 20009	Purpose of Disbursement MEETING 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6224.40
<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 116 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE MONACO GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011	
Mailing Address 14352 FRANKLIN AVE. #B			Amount of Each Disbursement this Period 6500.00	
City TUSTIN	State CA	Zip Code 92780	Transaction ID : EXPB85142	
Purpose of Disbursement POSTAGE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. TIM MACY &amp; ASSOC.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 28 / 2011	
Mailing Address 7996 CALIFORNIA AVE. #F			Amount of Each Disbursement this Period 997.92	
City FAIR OAKS	State CA	Zip Code 95628	Transaction ID : EXPB85143	
Purpose of Disbursement MASS MAIL		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EMPLOYMENT DEVELOPMENT DEPT.</b>			Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011	
Mailing Address P. O. BOX 826276			Amount of Each Disbursement this Period 270.28	
City SACRAMENTO	State CA	Zip Code 94230	Transaction ID : EXPB85152	
Purpose of Disbursement TAXES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7768.28
<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 117 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB85151</b>
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. INTERNAL REVENUE SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address		Amount of Each Disbursement this Period 1549.00 <b>Transaction ID : EXPB85153</b>
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.03 <b>Transaction ID : EXPB85180</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3332.64
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 30 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.24 <b>Transaction ID : EXPB85181</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. HOUSE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2011
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 1540.00 <b>Transaction ID : EXPB86372</b>
City Washington State DC Zip Code 20515	Purpose of Disbursement GIFTS FOR SUPPORTERS 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.03 <b>Transaction ID : EXPB86305</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1544.27
<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 119 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. POLITICAL DYNAMICS, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 1029 K ST. #44			Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : EXPB85190</b>
City SACRAMENTO	State CA	Zip Code 95814	
Purpose of Disbursement CAMPAIGN ADVICE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>B. STOR N LOK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 21 MASSIE CT.			Amount of Each Disbursement this Period 140.00 <b>Transaction ID : EXPB86373</b>
City SACRAMENTO	State CA	Zip Code 95828	
Purpose of Disbursement STORAGE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) <b>C. THE MONACO GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011
Mailing Address 14352 FRANKLIN AVE. #B			Amount of Each Disbursement this Period 6724.09 <b>Transaction ID : EXPB85191</b>
City TUSTIN	State CA	Zip Code 92780	
Purpose of Disbursement MASS MAIL		Category/ Type 003	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11864.09
<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 120 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. VOTE RITE SYSTEMS, INC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2011	
Mailing Address 3440 VIKING DR. #105			Amount of Each Disbursement this Period 649.69	
City SACRAMENTO	State CA	Zip Code 95827	Transaction ID : EXPB85189	
Purpose of Disbursement DATA PROCESSING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 3.20	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86306	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 0.88	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86307	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	653.77
<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 121 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address P. O. BOX 60017		Amount of Each Disbursement this Period 97.82 <b>Transaction ID : EXPB85196</b>
City LOS ANGELES	State CA	
Zip Code 90060	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CHASE BANK</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 33.10 <b>Transaction ID : EXPB86371</b>
City SACRAMENTO	State CA	
Zip Code 95814	Purpose of Disbursement BANK FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. FIA CARD SERVICES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address P. O. BOX 15716		Amount of Each Disbursement this Period 203.59 <b>Transaction ID : EXPB85195</b>
City WILMINGTON	State DE	
Zip Code 19886	Purpose of Disbursement CREDIT CARD PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	334.51
<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 122 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. HOUSE GIFT SHOP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011	
Mailing Address HOUSE OF REPRESENTATIVES			Amount of Each Disbursement this Period 84.00	
City Washington	State DC	Zip Code 20515	Transaction ID : EDTB248EXPB85195	
Purpose of Disbursement GIFTS FOR VISITORS		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. VERIZON WIRELESS</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011	
Mailing Address P. O. BOX 660720			Amount of Each Disbursement this Period 60.07	
City DALLAS	State TX	Zip Code 74266	Transaction ID : EDTB247EXPB85195	
Purpose of Disbursement PHONE SVC.		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EARTHLINK</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011	
Mailing Address WWW.EARTHLINK.NET			Amount of Each Disbursement this Period 21.95	
City CYBERSPACE	State CA	Zip Code 90000	Transaction ID : EDTB249EXPB85195	
Purpose of Disbursement INTERNET SVC.		Category/ Type 001	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PARKWAY PLAZA INVESTORS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address P.O. BOX 670		Amount of Each Disbursement this Period 1293.00 <b>Transaction ID : EXPB85194</b>
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement RENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 12.35 <b>Transaction ID : EXPB86308</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00 <b>Transaction ID : EXPB86370</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1365.35
<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 124 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. SUREWEST</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address P. O. BOX 30697		Amount of Each Disbursement this Period 236.56 <b>Transaction ID : EXPB85193</b>
City LOS ANGELES	State CA	
Zip Code 90030	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2011
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 74.20 <b>Transaction ID : EXPB86375</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" 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 12 / 05 / 2011
Mailing Address P. O. BOX 660720		Amount of Each Disbursement this Period 47.05 <b>Transaction ID : EXPB85192</b>
City DALLAS	State TX	
Zip Code 74266	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	357.81
<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 125 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 4.23
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name		Transaction ID : EXPB86309
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. HOUSE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 20.10
City Washington State DC Zip Code 20515	Purpose of Disbursement SUPPLIES	
Candidate Name		Transaction ID : EXPB86376
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 330 VERNON ST.		Amount of Each Disbursement this Period 184.50
City ROSEVILLE State CA Zip Code 95678	Purpose of Disbursement POSTAGE	
Candidate Name		Transaction ID : EXPB86380
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	208.83
<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 126 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTAL SERVICE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 176.00 <b>Transaction ID : EXPB86378</b>
City Rocklin	State CA	
Zip Code 95677	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 46.60 <b>Transaction ID : EXPB86377</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2011
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 22.03 <b>Transaction ID : EXPB86379</b>
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	244.63
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 74.86
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB86310</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.06
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB86311</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 40.93
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB86312</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	117.85
<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 128 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. U.S. POSTAL SVC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2011
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 750.00 <b>Transaction ID : EXPB85460</b>
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement POSTAGE	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PUBLIC STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2011
Mailing Address 715 CIRBY WAY		Amount of Each Disbursement this Period 61.00 <b>Transaction ID : EXPB86382</b>
City Roseville	State CA	
Zip Code 95678	Purpose of Disbursement STORAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. JON HUEY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 2124 STEWART CIR.		Amount of Each Disbursement this Period 1781.61 <b>Transaction ID : EXPB85743</b>
City WOODLAND	State CA	
Zip Code 95776	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2592.61
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 129 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. ITALIAN BENEFIT SOCIETY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address P. O. BOX 675		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : EXPB85744</b>
City PIONEER	State CA	
Zip Code 95666	Purpose of Disbursement HALL RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 14 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 21.82 <b>Transaction ID : EXPB86313</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.00 <b>Transaction ID : EXPB86314</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	278.82
<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 130 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 300 FIRST ST. SE		Amount of Each Disbursement this Period 106.82 <b>Transaction ID : EXPB86383</b>
City WASHINGTON	State DC	
Zip Code 20006	Purpose of Disbursement MEETING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30.86 <b>Transaction ID : EXPB86315</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.46 <b>Transaction ID : EXPB86316</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	139.14
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 18 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 1.91 <b>Transaction ID : EXPB86317</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 3.20 <b>Transaction ID : EXPB86318</b>
City San Jose State CA Zip Code 95125	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HOUSE GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 40.37 <b>Transaction ID : EXPB86386</b>
City Washington State DC Zip Code 20515	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	45.48
<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 132 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 4.23 <b>Transaction ID : EXPB86319</b>
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. U.S. POSTAL SVC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2011
Mailing Address 1750 Pennsylvania Ave. NW			Amount of Each Disbursement this Period 11.65 <b>Transaction ID : EXPB86388</b>
City Washington	State DC	Zip Code 20006	
Purpose of Disbursement POSTAGE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2011
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 19.85 <b>Transaction ID : EXPB86320</b>
City San Jose	State CA	Zip Code 95125	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35.73
<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 133 OF 142			
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 4.67
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB86321</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.59
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	<b>Transaction ID : EXPB86322</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MAILCHIMP.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2011
Mailing Address 512 MEANS ST. #404		Amount of Each Disbursement this Period 240.00
City ATLANTA	State GA	
Zip Code 30318	Purpose of Disbursement BROADCAST E-MAIL	<b>Transaction ID : EXPB86389</b>
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	245.26
<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 134 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 14.80
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB86323
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 241.70
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC.	
Candidate Name	001 Category/Type	Transaction ID : EXPB86092
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address P. O. BOX 5025		Amount of Each Disbursement this Period 42.34
City CAROL STREAM State IL Zip Code 60197	Purpose of Disbursement PHONE SVC.	
Candidate Name	001 Category/Type	Transaction ID : EXPB86093
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	298.84
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 135 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T MOBILITY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 114.23 <b>Transaction ID : EXPB86091</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement PHONE SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DAVID BAUER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 471.50 <b>Transaction ID : EXPB86090</b>
City SACRAMENTO	State CA	
Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC.	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 205.94 <b>Transaction ID : EXPB86324</b>
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	791.67
<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 136 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE CATALYST GROUP RW, LLC</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011	
Mailing Address 600 PENNSYLVANIA AVE. #330			Amount of Each Disbursement this Period 1000.00	
City Washington	State DC	Zip Code 20003	Transaction ID : EXPB86089	
Purpose of Disbursement FUNDRAISING ADVICE		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 28 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 62.71	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86325	
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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. EMPLOYMENT DEVELOPMENT DEPT.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011	
Mailing Address P. O. BOX 826276			Amount of Each Disbursement this Period 270.28	
City SACRAMENTO	State CA	Zip Code 94230	Transaction ID : EXPB86154	
Purpose of Disbursement TAXES		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1332.99
<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 137 OF 142	
	<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)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. JON HUEY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011	
Mailing Address 2124 STEWART CIR.			Amount of Each Disbursement this Period 1781.61	
City WOODLAND	State CA	Zip Code 95776	Transaction ID : EXPB86155	
Purpose of Disbursement PAYROLL		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>B. INTERNAL REVENUE SVC.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011	
Mailing Address			Amount of Each Disbursement this Period 1540.00	
City OGDEN	State UT	Zip Code 84201	Transaction ID : EXPB86153	
Purpose of Disbursement TAXES		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 12.58	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86326	
Purpose of Disbursement MERCHANT FEE		001 Category/ Type		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3334.19
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 138 OF 142	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. THE BOVEE CO.</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2011	
Mailing Address 1127 11TH ST. #310			Amount of Each Disbursement this Period 1359.32	
City SACRAMENTO	State CA	Zip Code 95814	Transaction ID : EXPB86156	
Purpose of Disbursement FUNDRAISING COMMISSION		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 30 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 74.56	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86327	
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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. PAYPAL</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2011	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 17.93	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB86328	
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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1451.81
<b>TOTAL</b> This Period (last page this line number only).....	94800.07

**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 139 OF 142	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**MCCLINTOCK FOR CONGRESS**

Full Name (Last, First, Middle Initial) <b>A. National Republican Congressional Committee</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2011
Mailing Address 320 First Street, S.E.		Amount of Each Disbursement this Period 30000.00 <b>Transaction ID : EXPB84812</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement TRANSFER OF UNNEEDED FUNDS 008 Category/Type	
Candidate Name <b>National Republican Congressional Committee</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GENERATION JOSHUA FUND</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2011
Mailing Address 1 PATRICK HENRY CIR.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB84972</b>
City PURCELLVILLE State VA Zip Code 20132	Purpose of Disbursement CHARITABLE DONATION 012 Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MIKE PENCE FOR INDIANA</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2011
Mailing Address 1435 CHASE CT.		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : EXPB86088</b>
City CARMEL State IN Zip Code 46032	Purpose of Disbursement 011 Category/Type	
Candidate Name <b>MIKE PENCE</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IN District: 06		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	32000.00
<b>TOTAL</b> This Period (last page this line number only).....	32000.00

**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)

**MCCLINTOCK FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**VIRGINIA MANNER**

Mailing Address 1050 PINE GROVE VOLCANO RD.

City State Zip Code  
 PINE GROVE CA 95665

Nature of Debt (Purpose):  
 NEWSPAPER AD

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD84181</b>	
<input type="text" value="66.66"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="66.66"/>	<input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**VIRGINIA MANNER**

Mailing Address 1050 PINE GROVE VOLCANO RD.

City State Zip Code  
 PINE GROVE CA 95665

Nature of Debt (Purpose):  
 NEWSPAPER AD

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD84182</b>	
<input type="text" value="66.66"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="66.66"/>	<input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**POLITICAL DYNAMICS, LLC**

Mailing Address 1029 K ST. #44

City State Zip Code  
 SACRAMENTO CA 95814

Nature of Debt (Purpose):  
 CAMPAIGN ADVICE

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD84300</b>	
<input type="text" value="5000.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="5000.00"/>	<input type="text" value="0.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="0.00"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**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)

**MCCLINTOCK FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**POLITICAL DYNAMICS, LLC**

Mailing Address 1029 K ST. #44

City State Zip Code  
SACRAMENTO CA 95814

Nature of Debt (Purpose):  
CAMPAIGN ADVICE

Outstanding Balance Beginning This Period  **Transaction ID : PAYD86393**

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**TERRA ECLIPSE**

Mailing Address 9043 SOQUEL DR.

City State Zip Code  
Aptos CA 95003

Nature of Debt (Purpose):  
FUNDRAISING COMMISSION

Outstanding Balance Beginning This Period  **Transaction ID : PAYD86304**

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**TERRA ECLIPSE**

Mailing Address 9043 SOQUEL DR.

City State Zip Code  
Aptos CA 95003

Nature of Debt (Purpose):  
FUNDRAISING COMMISSION

Outstanding Balance Beginning This Period  **Transaction ID : PAYD86446**

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

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="20241.13"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="0.00"/>

**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)

**MCCLINTOCK FOR CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**THE CATALYST GROUP RW, LLC**

Mailing Address 600 PENNSYLVANIA AVE. #330

City State Zip Code  
Washington DC 20003

Nature of Debt (Purpose):  
MEETING EXPENSES

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD84815</b>	
<input type="text" value="376.87"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="376.87"/>	<input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**THE CATALYST GROUP RW, LLC**

Mailing Address 600 PENNSYLVANIA AVE. #330

City State Zip Code  
Washington DC 20003

Nature of Debt (Purpose):  
FUNDRAISING EVENT EXPENSES

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD86302</b>	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="282.01"/>	<input type="text" value="0.00"/>	<input type="text" value="282.01"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**UPS**

Mailing Address P. O. BOX 894820

City State Zip Code  
LOS ANGELES CA 90189

Nature of Debt (Purpose):  
SHIPPING

Outstanding Balance Beginning This Period		<b>Transaction ID : PAYD84296</b>	
<input type="text" value="37.32"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="37.32"/>	<input type="text" value="0.00"/>	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="282.01"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="20523.14"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="20523.14"/>