

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Friends of Dennis Cardoza

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | 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))..... | 93614.00 | 97514.00 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 250.00 | 4435.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 93364.00 | 93079.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 54789.80 | 107832.80 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 25.00 | 1765.57 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 54764.80 | 106067.23 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 245032.61 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name
Friends of Dennis Cardoza

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 1 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

I. RECEIPTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

26450.00

27950.00

(ii) Unitemized.....

2964.00

3364.00

(iii) TOTAL of contributions

29414.00

31314.00

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

64200.00

66200.00

(c) Other Political Committees (such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

93614.00

97514.00

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

25.00

1765.57

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

679.98

1129.37

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

94318.98

100408.94

DETAILED SUMMARY PAGE
of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|--|---------------------------------------|--|
| 17. OPERATING EXPENDITURES..... | 54789.80 | 107832.80 |
| 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..... | 250.00 | 4405.00 |
| (b) Political Party Committees..... | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 30.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))..... | 250.00 | 4435.00 |
| 21. OTHER DISBURSEMENTS..... | 1000.00 | 2013.83 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 56039.80 | 114281.63 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD..... | 206753.43 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3)..... | 94318.98 |
| 25. SUBTOTAL (add Line 23 and Line 24)..... | 301072.41 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)..... | 56039.80 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)..... | 245032.61 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 5 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| A. Full Name (Last, First, Middle Initial) Patty Amador Mailing Address 30685 Lee Ave City Escalon State CA Zip Code 95320-9638 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C5830 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 1 | | 0 | 2 | | 2 | 0 | 0 | 7 | 250.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 1 | | 0 | 2 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Ambeck Mortgage Associates Occupation Mortgage Banker Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ <table border="1"> <tr> <td>250.00</td> </tr> </table> | 250.00 | | | | | | | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |

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|--|---|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| B. Full Name (Last, First, Middle Initial) David E. Bassford Mailing Address 6720 Fort Dent Way Ste 230 City Seattle State WA Zip Code 98188-2589 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C1239819 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 6 | | 2 | 0 | 0 | 7 | 2000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 6 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Moneytree, Inc. Occupation Executive Vice President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ <table border="1"> <tr> <td>2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| C. Full Name (Last, First, Middle Initial) Dennis Bassford Mailing Address 6720 Fort Dent Way Ste 230 City Seattle State WA Zip Code 98188-2589 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C1239818 Amount of Each Receipt this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 6 | | 2 | 0 | 0 | 7 | 2000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 6 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Moneytree, Inc. Occupation President Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ <table border="1"> <tr> <td>2000.00</td> </tr> </table> | 2000.00 | | | | | | | | | | | | | | | | | | | | |
| 2000.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 4250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 6 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Shirley R. Butler

Mailing Address 2705 Portsmouth Ln

City Modesto State CA Zip Code 95355-3916

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

Name of Employer n/a Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2007

Transaction ID: C1238929

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Thomas Cortopassi

Mailing Address 4110 Saint Andrews Dr

City Stockton State CA Zip Code 95219-1842

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

Name of Employer Stanislaus Foods Occupation Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
02 / 21 / 2007

Transaction ID: C1238930

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Maria deSousa

Mailing Address 3030 S Central Ave

City Turlock State CA Zip Code 95380-9329

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

Name of Employer CA DHS Occupation State Employee

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 14 / 2007

Transaction ID: C1305524

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) A. Dennis Falaschi | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007 |
| Mailing Address 929 Monte Vista Ave | | Transaction ID: C1305518 |
| City State Zip Code Los Banos CA 93635-4826 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Panoche Water District Occupation Executive Director | Election Cycle-to-Date 1000.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. John Fiscalini | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007 |
| Mailing Address 7231 Covert Rd | | Transaction ID: C1305513 |
| City State Zip Code Modesto CA 95358-9741 | Amount of Each Receipt this Period 250.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Fiscalini Farms Occupation Farmer | Election Cycle-to-Date 1250.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. John Fiscalini | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007 |
| Mailing Address 7231 Covert Rd | | Transaction ID: C1305514 |
| City State Zip Code Modesto CA 95358-9741 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Fiscalini Farms Occupation Farmer | Election Cycle-to-Date 1250.00 | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 2250.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Eugene C. Gini

Mailing Address 6491 Saint Anderson Drive

City State Zip Code
Stockton CA 95219

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

Name of Employer Collins Electric Company Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 1 / 0 2 / 2 0 0 7

Transaction ID: C5831

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Gerard N. Giovaniello

Mailing Address 108 Gresham Pl

City State Zip Code
Falls Church VA 22046-3440

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

Name of Employer National Association of Realtors Occupation Senior Vice President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 7

Transaction ID: C1310683

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
James L. Gregory

Mailing Address 402 Fair Hill Court

City State Zip Code
Annapolis MD 21403-1508

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

Name of Employer National Association of Realtors Occupation Managing Director

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 3 0 / 2 0 0 7

Transaction ID: C1310686

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|---|--|---|--|
| A. Full Name (Last, First, Middle Initial) Richard V. Gunner | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007 | |
| Mailing Address 555 W Shaw Ave Ste B4 | | Transaction ID: C1310434 | |
| City State Zip Code Fresno CA 93704-2503 | | Amount of Each Receipt this Period 2300.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Gunner Ranch Farmer | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 2300.00 | |

| | | | |
|---|--|---|--|
| B. Full Name (Last, First, Middle Initial) Robert Thomas Haden | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007 | |
| Mailing Address 2241 N St | | Transaction ID: C1310437 | |
| City State Zip Code Merced CA 95340-3614 | | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Self-Employed Attorney | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 1000.00 | |

| | | | |
|---|--|---|--|
| C. Full Name (Last, First, Middle Initial) Audrae Erickson Hughes | | Date of Receipt M M / D D / Y Y Y Y Y 02 / 08 / 2007 | |
| Mailing Address 9708 Kensington Parkway | | Transaction ID: C1231463 | |
| City State Zip Code Kensington MD 20895 | | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Occupation Corn Refiners Association President | | | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Election Cycle-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3800.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 10 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Chase Hurley

Mailing Address 1927 Aspen Court

City State Zip Code
Los Banos CA 93635

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

Name of Employer San Luis Canal Co. Occupation Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 12 / 2007

Transaction ID: C1305519

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Tae Bin Bin Jung

Mailing Address 11578 State Highway 152

City State Zip Code
Dos Palos CA 93620-9742

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

Name of Employer Dash Dream, Inc. Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2007

Transaction ID: C1305526

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Stanton L. Lange

Mailing Address 20630 N. DeVries Road

City State Zip Code
Lodi CA 95242

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

Name of Employer Self-Employed Occupation Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
02 / 21 / 2007

Transaction ID: C1238923

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 11 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Joyce J. Logsdon

Mailing Address 1690 N Johnson Rd

City State Zip Code
Turlock CA 95382-2816

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

Name of Employer Occupation
Valley Wood Preserving Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2007

Transaction ID: C1305529

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mike Logsdon

Mailing Address 3202 A East Capri Street

City State Zip Code
Ontario CA 91761

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

Name of Employer Occupation
Valley Wood Preserving Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2007

Transaction ID: C1305530

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mitch Logsdon

Mailing Address 2381 Nordic Way

City State Zip Code
Turlock CA 95382-9186

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

Name of Employer Occupation
United Equipment Company President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 20 / 2007

Transaction ID: C1305531

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Loren Lopes

Mailing Address 619 S Vincent Rd

City State Zip Code
Turlock CA 95380-9122

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

Name of Employer Occupation
Lorinda Dairy Dairy Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2007

Transaction ID: C1305511

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1356 Kentfield Road

City State Zip Code
Chico CA 95926

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

Name of Employer Occupation
Lundberg Family Farms CEO

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2007

Transaction ID: C1231464

Amount of Each Receipt this Period
400.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Marvin Meyers

Mailing Address PO Box 457

City State Zip Code
Firebaugh CA 93622-0457

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 06 / 2007

Transaction ID: C1231477

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 13 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
James L. Nickel

Mailing Address PO Box 60679

City State Zip Code
Bakersfield CA 93386

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

Name of Employer Occupation
Nickel Family LLC President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 6 / 2 0 0 7

Transaction ID: C1231476

Amount of Each Receipt this Period
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Harry Nishihara

Mailing Address 11875 South Avenue

City State Zip Code
Ballico CA 95303

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

Name of Employer Occupation
Self-Employed Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 7

Transaction ID: C1305509

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
John D. Rafaelli

Mailing Address 1401 K Street, NW, #1000

City State Zip Code
Washington DC 20005-3422

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

Name of Employer Occupation
The Washington Group Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 7

Transaction ID: C1305505

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **3000.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 14 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Michael E. Rue

Mailing Address 2640 Hoffman Rd

City State Zip Code
Marysville CA 95901-9640

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 1 3 / 2 0 0 7

Transaction ID: C1239580

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2640 Hoffman Rd

City State Zip Code
Marysville CA 95901-9640

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

Name of Employer Self-Employed Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 7

Transaction ID: C1305512

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 7677 E Highway 4

City State Zip Code
Stockton CA 95215-9607

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

Name of Employer Sanguinetti Ranch Occupation
Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 3 / 1 2 / 2 0 0 7

Transaction ID: C1305508

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1750.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 15 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|--|---|
| A. Full Name (Last, First, Middle Initial) Robert A. Schmidt | | Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007 |
| Mailing Address PO Box 1607 | | Transaction ID: C1305532 |
| City State Zip Code Turlock CA 95381-1607 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Valley Wood Preserving | Occupation President | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) Raul R. Tapia | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007 |
| Mailing Address 101 Constitution Avenue, NW, #900W | | Transaction ID: C1310680 |
| City State Zip Code Washington DC 20001 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer C2 Group, LLC | Occupation Consultant | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 500.00 | |

| | | |
|---|---|---|
| C. Full Name (Last, First, Middle Initial) Manuel Ed Vieira | | Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2007 |
| Mailing Address PO Box 286 | | Transaction ID: C1231478 |
| City State Zip Code Livingston CA 95334-0286 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer Self-Employed | Occupation Rancher | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 16 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Manuel Ed Vieira

Mailing Address PO Box 286

City State Zip Code
Livingston CA 95334-0286

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

Name of Employer Self-Employed Occupation
Rancher

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
MM / DD / YYYY
03 / 30 / 2007

Transaction ID: C1310431

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Lucy M. Walsh

Mailing Address 13600 Columbet Ave

City State Zip Code
San Martin CA 95046-9782

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

Name of Employer Self-Employed Occupation
Organic Farmer

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 12 / 2007

Transaction ID: C1305522

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Robert Weimer

Mailing Address 7016 Atwater Jordan Road

City State Zip Code
Atwater CA 95301

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

Name of Employer Occupation
Weimer Farms Owner

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 20 / 2007

Transaction ID: C1305528

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 17 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| A. Full Name (Last, First, Middle Initial) Paul J. Wenger Mailing Address 4267 Beckwith Rd City Modesto State CA Zip Code 95358-8909 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C1305510 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 1 | 2 | | 2 | 0 | 0 | 7 | 250.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 3 | | 1 | 2 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Self-Employed Occupation Farmer Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <table border="1"> <tr> <td>250.00</td> </tr> </table> | 250.00 | | | | | | | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|--------|
| B. Full Name (Last, First, Middle Initial) Kerry Whitson Mailing Address 18425 Avenue 264 City Exeter State CA Zip Code 93221 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C1238931 Amount of Each Receipt this Period <table border="1"> <tr> <td>250.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | | 2 | 1 | | 2 | 0 | 0 | 7 | 250.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 2 | | 2 | 1 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Golden Maid Packers Occupation Farmer Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <table border="1"> <tr> <td>250.00</td> </tr> </table> | 250.00 | | | | | | | | | | | | | | | | | | | | |
| 250.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| C. Full Name (Last, First, Middle Initial) Nancy E. Williams Mailing Address 117 6th St NE City Washington State DC Zip Code 20002-6019 FEC ID number of contributing federal political committee. C | | Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: C1231465 Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table> <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 | | 0 | 8 | | 2 | 0 | 0 | 7 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | | |
| 0 | 2 | | 0 | 8 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | | |
| Name of Employer Shramn, Williams & Associates, Inc Occupation Consultant Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | <table border="1"> <tr> <td>1000.00</td> </tr> </table> | 1000.00 | | | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|----------------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 18 / 70 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Perez Bros.

Mailing Address PO Box 97

City State Zip Code
Crows Landing CA 95313-0097

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2007

Transaction ID: C1305709

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

PARTNERSHIP--partners below if itemized

B. Full Name (Last, First, Middle Initial)
Earl Perez

Mailing Address PO Box 97

City State Zip Code
Crows Landing CA 95313-0097

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

Name of Employer Occupation
Perez Bros. Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2007

Transaction ID: C1305712

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Thomas Perez

Mailing Address PO Box 97

City State Zip Code
Crows Landing CA 95313-0097

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

Name of Employer Occupation
Perez Bros. Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2007

Transaction ID: C1305710

Amount of Each Receipt this Period
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 500.00 |
| TOTAL This Period (last page this line number only) | 26450.00 |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 19 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
ACFAC ACA INTERNATIONAL POLITICAL ACTION COMMITTEE

Mailing Address 4040 W. 70th St

City State Zip Code
Minneapolis MN 55435

FEC ID number of contributing federal political committee. **C** C00034785

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2007

Transaction ID: C1310676

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
AKERMAN SENTERFITT & EIDSON PA - PAC

Mailing Address 255 S. Orange Ave.

City State Zip Code
Orlando FL 32802

FEC ID number of contributing federal political committee. **C** C00280008

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2007

Transaction ID: C1231466

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
American Bankers Association PAC

Mailing Address 1120 Connecticut Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00004275

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2007

Transaction ID: C1305504

Amount of Each Receipt this Period
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 6000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 20 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
CALCOT LTD. FEDERAL POLITICAL ACTION COMMITTEE

Mailing Address P. O. Box 259

City State Zip Code
Bakersfield CA 93302

FEC ID number of contributing federal political committee. **C** C00172775

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 2 1 / 2 0 0 7

Transaction ID: C1238932

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
California Association of Winegrape Growers PAC -

Mailing Address 601 University Avenue Suite 135

City State Zip Code
Sacramento CA 95825

FEC ID number of contributing federal political committee. **C** C00155366

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 8 / 2 0 0 7

Transaction ID: C1231471

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
CALIFORNIA CANNING PEACH ASSOCIATION POLITICAL ACT

Mailing Address 2300 RIVER PLAZA DRIVE #100

City State Zip Code
SACRAMENTO CA 95833

FEC ID number of contributing federal political committee. **C** C00019083

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 2 / 0 6 / 2 0 0 7

Transaction ID: C1231475

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 21 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. CALIFORNIA DAIRIES INC FEDERAL POLITICAL ACTION CO | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007 |
| Mailing Address PO BOX 2198 | | Transaction ID: C1305507 |
| City LOS BANOS | State CA | Zip Code 93635 |
| FEC ID number of contributing federal political committee. C C00349746 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. CALIFORNIA FARM BUREAU FUND TO PROTECT THE FAMILY | | Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2007 |
| Mailing Address 2300 River Plaza Drive | | Transaction ID: C1305706 |
| City Sacramento | State CA | Zip Code 95833 |
| FEC ID number of contributing federal political committee. C C00041954 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. CALIFORNIA GRAPE & TREE FRUIT LEAGUE POLITICAL ACT | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007 |
| Mailing Address 1540 E SHAW SUITE 120 | | Transaction ID: C1310432 |
| City FRESNO | State CA | Zip Code 93710 |
| FEC ID number of contributing federal political committee. C C00121582 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 22 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. CALIFORNIA POULTRY INDUSTRY FEDERATION POULTRY PA | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 7 |
| Mailing Address 4640 Spyres Way Ste 4 | | Transaction ID: C1238934 |
| City Modesto | State CA | Amount of Each Receipt this Period 1000.00 |
| Zip Code 95356-9800 | FEC ID number of contributing federal political committee. C C00296269 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. CALIFORNIA RICE INDUSTRY ASSOCIATION FUND (CALIFOR | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 |
| Mailing Address 8801 Folsom Boulevard Suite 172 | | Transaction ID: C1239597 |
| City Sacramento | State CA | Amount of Each Receipt this Period 5000.00 |
| Zip Code 95826 | FEC ID number of contributing federal political committee. C C00362624 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. CALIFORNIA THOROUGHbred BREEDERS ASSOCIATION | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 6 / 2 0 0 7 |
| Mailing Address 201 COLORADO PLAGE | | Transaction ID: C1231474 |
| City ARCADIA | State CA | Amount of Each Receipt this Period 1000.00 |
| Zip Code 91007 | FEC ID number of contributing federal political committee. C C00375154 | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) | 7000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 23 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13a | <input type="checkbox"/> 13b |
| | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
CAPITAL ONE FINANCIAL CORP. ASSOC. POLITICAL FUND

Mailing Address 1680 Capital One Drive
Attn: 19050-1204

City State Zip Code
McLean VA 22102

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2007

Transaction ID: C1305506

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Cash America International, Inc. PAC

Mailing Address 1600 W. 7th Street

City State Zip Code
Fort Worth TX 76102

FEC ID number of contributing federal political committee. **C** C00275529

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 08 / 2007

Transaction ID: C1231467

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
COSMETIC TOILETRY & FRAGRANCE ASSOCIATION POLITICA

Mailing Address 1101 17TH STREET NW SUITE 300

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing federal political committee. **C** C00113845

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 30 / 2007

Transaction ID: C1310681

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 24 / 70 |
| | <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. DAIRY FARMERS OF AMERICA INC DEPAC (DAIRY EDUCATI | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2007 |
| Mailing Address P O BOX 909700 | | Transaction ID: C1305520 |
| City KANSAS CITY | State MO | Zip Code 64190 |
| FEC ID number of contributing federal political committee. C C00001388 | | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. DEAN FOODS COMPANY POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y Y 02 / 05 / 2007 |
| Mailing Address 2515 McKinney Avenue Suite 1200 | | Transaction ID: C1231472 |
| City Dallas | State TX | Zip Code 75201 |
| FEC ID number of contributing federal political committee. C C00340083 | | Amount of Each Receipt this Period 5000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. EXCHANGE CONTRACTORS PAC | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2007 |
| Mailing Address 1047 TYLER AVENUE | | Transaction ID: C1305517 |
| City LOS BANOS | State CA | Zip Code 93635 |
| FEC ID number of contributing federal political committee. C C00394452 | | Amount of Each Receipt this Period 200.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 200.00 | |

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 6200.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 25 / 70 |
| | <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. FARM CREDIT COUNCIL POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 03 / 12 / 2007 |
| Mailing Address 50 F Street NW Suite 900 | | Transaction ID: C1305515 |
| City State Zip Code Washington DC 20001 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00193631 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. FARMERS' RICE COOPERATIVE FUND | | Date of Receipt M M / D D / Y Y Y Y 02 / 13 / 2007 |
| Mailing Address PO BOX 15223 | | Transaction ID: C1239604 |
| City State Zip Code SACRAMENTO CA 95851 | Amount of Each Receipt this Period 1500.00 | |
| FEC ID number of contributing federal political committee. C C00146605 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. FEDERAL NATIONAL MORTGAGE ASSOCIATION POLITICAL ACT | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007 |
| Mailing Address 3900 Wisconsin Avenue NW | | Transaction ID: C1310687 |
| City State Zip Code Washington DC 20016 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00393520 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 26 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) A. HOME DEPOT INC. POLITICAL ACTION COMMITTEE, THE | | Date of Receipt M M / D D / Y Y Y Y 03 / 19 / 2007 |
| Mailing Address 101 Constitution Ave. NW Suite 800 West | | Transaction ID: C1272607 |
| City Washington State DC Zip Code 20001 | Amount of Each Receipt this Period 2000.00 | |
| FEC ID number of contributing federal political committee. C C00284885 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 3000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) B. INDEPENDENT COMMUNITY BANKERS OF AMERICA POLITICAL | | Date of Receipt M M / D D / Y Y Y Y 02 / 06 / 2007 |
| Mailing Address 1615 L Street NW Suite 900 | | Transaction ID: C1231473 |
| City Washington State DC Zip Code 20036 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00032698 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) C. INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS CO | | Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007 |
| Mailing Address 900 Seventh St. N.W. | | Transaction ID: C1310675 |
| City Washington State DC Zip Code 20001 | Amount of Each Receipt this Period 5000.00 | |
| FEC ID number of contributing federal political committee. C C00027342 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 5000.00 | |

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|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 8000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

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

FOR LINE NUMBER: PAGE 27 / 70
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
LOUISIANA RICE POLITICAL ACTION COMMITTEE INC

Mailing Address P.O. Box 1691

City State Zip Code
Lake Charles LA 70602

FEC ID number of contributing federal political committee. **C** C00389916

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 1 3 / 2 0 0 7

Transaction ID: C1239601

Amount of Each Receipt this Period
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MASTERCARD INTERNATIONAL INC. EMPLOYEES' PAC

Mailing Address 2000 Purchase St.

City State Zip Code
Purchase NY 10577

FEC ID number of contributing federal political committee. **C** C00410274

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 7

Transaction ID: C1312413

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MORTGAGE BANKERS ASSOCIATION POLITICAL ACTION COMM

Mailing Address 1919 Pennsylvania Ave NW
8th Floor

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00004812

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 3 / 2 8 / 2 0 0 7

Transaction ID: C1312409

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 28 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) A. NACS POLITICAL ACTION COMMITTEE | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 | |
| Mailing Address 1600 Duke Street | | Transaction ID: C1238921 | |
| City State Zip Code Alexandria VA 22314 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00126763 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) B. NATIONAL GRAPE CO-OPERATIVE ASSOCIATION INC/WELCH | | Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7 | |
| Mailing Address 2 SOUTH PORTAGE STREET | | Transaction ID: C1231468 | |
| City State Zip Code WESTFIELD NY 14787 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00133215 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1000.00 | | |

| | | | |
|---|---|---|--|
| Full Name (Last, First, Middle Initial) C. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION CO | | Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7 | |
| Mailing Address 1850 M Street NW Suite 540 | | Transaction ID: C1310688 | |
| City State Zip Code Washington DC 20036 | Amount of Each Receipt this Period 1000.00 | | |
| FEC ID number of contributing federal political committee. C C00130773 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) | |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1000.00 | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 29 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| A. Full Name (Last, First, Middle Initial) NBWA PAC Mailing Address 1101 King Street Suite 600 City State Zip Code Alexandria VA 22314 FEC ID number of contributing federal political committee. C C00144766 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007 Transaction ID: C1310689 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|--|--|---|

| | | |
|---|--|---|
| B. Full Name (Last, First, Middle Initial) PRODUCERS RICE MILL INC PAC Mailing Address P. O. Box 1248 City State Zip Code Stuttgart AR 72160 FEC ID number of contributing federal political committee. C C00378083 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | | Date of Receipt M M / D D / Y Y Y Y Y 02 / 13 / 2007 Transaction ID: C1239590 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|---|--|---|

| | | |
|---|--|---|
| C. Full Name (Last, First, Middle Initial) Raisin Bargaining Association Mailing Address 1300 E SHAW AVE SUITE 175 City State Zip Code FRESNO CA 93710 FEC ID number of contributing federal political committee. C C00128686 Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 | | Date of Receipt M M / D D / Y Y Y Y Y 03 / 12 / 2007 Transaction ID: C1305516 Amount of Each Receipt this Period 1000.00 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
|---|--|---|

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3000.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 30 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 801 Pennsylvania Avenue Suite 720

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033779

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2007

Transaction ID: C1309655

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. SOUTHERN MINNESOTA BEET SUGAR COOPERATIVE POLITICA

Full Name (Last, First, Middle Initial)
Mailing Address P O BOX 500

City RENVILLE State MN Zip Code 56284

FEC ID number of contributing federal political committee. **C** C00166348

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 23 / 2007

Transaction ID: C1239484

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. TITLE INDUSTRY POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1828 L STREET NW SUITE 705

City WASHINGTON State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 30 / 2007

Transaction ID: C1310685

Amount of Each Receipt this Period
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 31 / 70 |
| | <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 11d |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| | <input type="checkbox"/> 13b | <input type="checkbox"/> 14 |
| | | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|---|
| A. Full Name (Last, First, Middle Initial) UNITED EGG ASSOCIATION EGGPAC | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 7 |
| Mailing Address 1720 Windward Concourse Suite 230 | | Transaction ID: C1231469 |
| City State Zip Code Alpharetta GA 30005 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00172841 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|---|---|
| B. Full Name (Last, First, Middle Initial) UNITED FRESH FRUIT AND VEGETABLE ASSOCIATION FRESH | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 7 |
| Mailing Address 1901 Pennsylvania Avenue NW Suite 1100 | | Transaction ID: C1231470 |
| City State Zip Code Washington DC 20006 | Amount of Each Receipt this Period 2500.00 | |
| FEC ID number of contributing federal political committee. C C00040725 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 2500.00 | |

| | | |
|---|---|---|
| C. Full Name (Last, First, Middle Initial) USA RICE FEDERATION PAC | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 3 / 2 0 0 7 |
| Mailing Address 4301 North Fairfax Drive Suite 425 | | Transaction ID: C1239592 |
| City State Zip Code Arlington VA 22203 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C C00308478 | | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Name of Employer | Occupation | |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 4500.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

| | | |
|--|---|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 32 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. UST INC. EXECUTIVES ADMINISTRATORS AND MANAGERS P | | Date of Receipt MM / DD / YYYY 03 / 14 / 2007 |
| Mailing Address 100 West Putnam Avenue | | Transaction ID: C1305525 |
| City State Zip Code Greenwich CT 06830 | FEC ID number of contributing federal political committee. C C00104851 | Amount of Each Receipt this Period 1500.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1500.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. WASHINGTON MUTUAL POLITICAL ACTION COMMITTEE (WAMU) | | Date of Receipt MM / DD / YYYY 03 / 30 / 2007 |
| Mailing Address 1215 Fourth Avenue FCB 1620 P.O. Box 834 | | Transaction ID: C1310674 |
| City State Zip Code Seattle WA 98111 | FEC ID number of contributing federal political committee. C C00129833 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. WESTERN GROWERS ASSOCIATION POLITICAL ACTION COMMI | | Date of Receipt MM / DD / YYYY 02 / 22 / 2007 |
| Mailing Address 17620 FITCH STREET PO BOX 2130 | | Transaction ID: C1238922 |
| City State Zip Code IRVINE CA 92714 | FEC ID number of contributing federal political committee. C C00193979 | Amount of Each Receipt this Period 1000.00 |
| Name of Employer | Occupation | <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) |
| Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Election Cycle-to-Date ▼ 1000.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3500.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | |
|--|------------------------------|---|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 33 / 70 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c |
| <input type="checkbox"/> 11d | <input type="checkbox"/> 12 | <input type="checkbox"/> 13a |
| <input type="checkbox"/> 13b | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Wine & Spirits Wholesalers PAC

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 3 | 0 | / | 2 | 0 | 0 | 7 |

Transaction ID: C1310678

Amount of Each Receipt this Period
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1000.00 |
| TOTAL This Period (last page this line number only) | ▶ | 64200.00 |

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

| | | |
|--|--|--------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 34 / 70 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d | |
| | <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input checked="" type="checkbox"/> 15 | |

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Fremont Investment & Loan Mailing Address 2727 E Imperial Hwy City State Zip Code Brea CA 92821-6713 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Transaction ID: C1310525 Amount of Each Receipt this Period 237.96 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest income |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1127.17 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Fremont Investment & Loan Mailing Address 2727 E Imperial Hwy City State Zip Code Brea CA 92821-6713 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 7 Transaction ID: C1310526 Amount of Each Receipt this Period 209.08 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest income |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1127.17 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) Fremont Investment & Loan Mailing Address 2727 E Imperial Hwy City State Zip Code Brea CA 92821-6713 FEC ID number of contributing federal political committee. C | | Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 7 Transaction ID: C1310527 Amount of Each Receipt this Period 232.44 <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) * Interest income |
| Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Occupation Election Cycle-to-Date ▼ 1127.17 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 679.48 |
| TOTAL This Period (last page this line number only) | 679.48 |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) A. Alaska Airlines | | Transaction ID: D75372 | |
| Mailing Address PO Box 68900 | | Date of Disbursement 02 / 13 / 2007 | |
| City Seattle | State WA | Zip Code 98168-0900 | Amount of Each Disbursement this Period 119.40 |
| Purpose of Disbursement Travel/airfare | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name Darlene Hooley | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | [MEMO ITEM] In-Kind, See Line 21 |
| State: OR District: 05 | | | |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) B. Alaska Airlines | | Transaction ID: D75373 | |
| Mailing Address PO Box 68900 | | Date of Disbursement 02 / 13 / 2007 | |
| City Seattle | State WA | Zip Code 98168-0900 | Amount of Each Disbursement this Period 119.40 |
| Purpose of Disbursement Travel/airfare | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name Rick R. Larsen | | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | [MEMO ITEM] In-Kind, See Line 21 |
| State: WA District: 02 | | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) C. Bank of America | | Transaction ID: D75371 | |
| Mailing Address PO Box 53132 | | Date of Disbursement 02 / 08 / 2007 | |
| City Phoenix | State AZ | Zip Code 85072-3132 | Amount of Each Disbursement this Period 60.00 |
| Purpose of Disbursement Service charges | | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name | | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |
| State: District: | | | |

| | |
|--|--------------|
| SUBTOTAL of Disbursements This Page (optional) | 60.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 36 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Bank of America | | Transaction ID: D75401 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7 |
| Mailing Address PO Box 53132 | | Amount of Each Disbursement this Period 573.00 |
| City Phoenix State AZ Zip Code 85072-3132 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Corporate tax deposit | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Cingular Wireless | | Transaction ID: D75364 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7 |
| Mailing Address PO Box 60017 | | Amount of Each Disbursement this Period 93.33 |
| City Los Angeles State CA Zip Code 90060-0017 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Telephone expense | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Franchise Tax Board | | Transaction ID: D75400 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7 |
| Mailing Address PO Box 942867 | | Amount of Each Disbursement this Period 352.00 |
| City Sacramento State CA Zip Code 94267-0001 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Corporate taxes | Candidate Name | Category/ Type |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1018.33 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|---|----------|--|---|
| Full Name (Last, First, Middle Initial) A. Gowans Printing Co. | | Transaction ID: D75362 Date of Disbursement 02 / 05 / 2007 | |
| Mailing Address 1310 H St | | Amount of Each Disbursement this Period 2663.71 | |
| City Modesto | State CA | Zip Code 95354-2428 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement Printing expense | | Category/Type | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | |

| | | | |
|---|----------|--|---|
| Full Name (Last, First, Middle Initial) B. Greater Merced Chamber of Commerce | | Transaction ID: D75355 Date of Disbursement 02 / 05 / 2007 | |
| Mailing Address 360 East Yosemite Avenue Suite 100 | | Amount of Each Disbursement this Period 68.00 | |
| City Merced | State CA | Zip Code 95340 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement Event tickets | | Category/Type | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | |

| | | | |
|---|----------|--|---|
| Full Name (Last, First, Middle Initial) C. Greater Stockton Chamber of Commerce | | Transaction ID: D75394 Date of Disbursement 03 / 09 / 2007 | |
| Mailing Address 445 W Weber Ave Ste 220 | | Amount of Each Disbursement this Period 205.00 | |
| City Stockton | State CA | Zip Code 95203-3148 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Purpose of Disbursement Dues | | Category/Type | |
| Candidate Name | | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | State: District: | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2936.71 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|--|---|
| <p>A. Harry's Affairs</p> <p>Full Name (Last, First, Middle Initial) Harry's Affairs</p> <p>Mailing Address 2760 Sherwood Apt. A</p> <p>City Modesto State CA Zip Code 95350</p> <p>Purpose of Disbursement Fundraising event catering</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D75380</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

| | | |
|--|--|--|
| <p>B. Inn at Port Gardner</p> <p>Full Name (Last, First, Middle Initial) Inn at Port Gardner</p> <p>Mailing Address 1700 W. Marine View Drive</p> <p>City Everett State WA Zip Code 98201</p> <p>Purpose of Disbursement Travel/lodging</p> <p>Candidate Name Rick R. Larsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: WA District: 02</p> | | <p>Transaction ID: D75389</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="131.61"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> <p>[MEMO ITEM] In-Kind, See Line 21</p> |

| | | |
|--|--|---|
| <p>C. Andrew R. Johnson</p> <p>Full Name (Last, First, Middle Initial) Andrew R. Johnson</p> <p>Mailing Address 1525 Morse Dr</p> <p>City Merced State CA Zip Code 95340-7521</p> <p>Purpose of Disbursement Fundraising consulting fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> | | <p>Transaction ID: D75392</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1058.25"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Disbursement For: 2008</p> <p><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify) ▼</p> | | <p>Category/Type</p> |

| | |
|---|---|
| <p>SUBTOTAL of Disbursements This Page (optional)</p> | <p><input type="text" value="2058.25"/></p> |
| <p>TOTAL This Period (last page this line number only)</p> | <p><input type="text"/></p> |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Andrew R. Johnson | | Transaction ID: D75404 Date of Disbursement 03 / 20 / 2007 | |
| Mailing Address 1525 Morse Dr | | Amount of Each Disbursement this Period 1000.00 | |
| City Merced State CA Zip Code 95340-7521 | Purpose of Disbursement Fundraising consulting fee | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Andrew R. Johnson | | Transaction ID: D75354 Date of Disbursement 02 / 05 / 2007 | |
| Mailing Address 1525 Morse Dr | | Amount of Each Disbursement this Period 252.45 | |
| City Merced State CA Zip Code 95340-7521 | Purpose of Disbursement Fundraising consulting fee | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. Lori B. LaFave | | Transaction ID: D75348 Date of Disbursement 02 / 01 / 2007 | |
| Mailing Address 200 East Jefferson Street | | Amount of Each Disbursement this Period 2500.00 | |
| City Falls Church State VA Zip Code 22046 | Purpose of Disbursement Fundraising consulting fee | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3752.45 |
| 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 40 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Lori B. LaFave | | Transaction ID: D75388 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7 |
| Mailing Address 200 East Jefferson Street | | Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Falls Church State VA Zip Code 22046 | Purpose of Disbursement Fundraising consulting fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Lori B. LaFave | | Transaction ID: D75408 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address 200 East Jefferson Street | | Amount of Each Disbursement this Period 2500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Falls Church State VA Zip Code 22046 | Purpose of Disbursement Fundraising consulting fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Merced County Fair | | Transaction ID: D75375 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 7 |
| Mailing Address 900 Martin Luther King, Jr. Way | | Amount of Each Disbursement this Period 650.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Merced State CA Zip Code 95340 | Purpose of Disbursement Fundraising event space rental fee Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5650.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. National Democratic Club | | Transaction ID: D75374 Date of Disbursement 02 / 14 / 2007 |
| Mailing Address 20 Ivy St SE | | Amount of Each Disbursement this Period 713.69 |
| City Washington State DC Zip Code 20003-4006 | Purpose of Disbursement Food & Beverage for meetings | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. National Democratic Club | | Transaction ID: D75377 Date of Disbursement 02 / 19 / 2007 |
| Mailing Address 20 Ivy St SE | | Amount of Each Disbursement this Period 894.71 |
| City Washington State DC Zip Code 20003-4006 | Purpose of Disbursement Fundraising event catering | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. National Democratic Club | | Transaction ID: D75412 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address 20 Ivy St SE | | Amount of Each Disbursement this Period 189.95 |
| City Washington State DC Zip Code 20003-4006 | Purpose of Disbursement Food & Beverage for meetings | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 1798.35 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. NGP Software, Inc. | | Transaction ID: D75363 Date of Disbursement 02 / 05 / 2007 |
| Mailing Address 1101 Vermont Avenue, NW Suite 710 | | Amount of Each Disbursement this Period 2950.00 |
| City Washington State DC Zip Code 20005 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Software purchase Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Olson, Hagel & Fishburn, LLP | | Transaction ID: D1837 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address 555 Capitol Mall Suite 1425 | | Amount of Each Disbursement this Period 3182.95 |
| City Sacramento State CA Zip Code 95814-4602 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Legal & Reporting Services Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Olson, Hagel & Fishburn, LLP | | Transaction ID: D75409 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address 555 Capitol Mall Suite 1425 | | Amount of Each Disbursement this Period 3366.14 |
| City Sacramento State CA Zip Code 95814-4602 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Legal & Reporting Services Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 9499.09 |
| 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 43 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Olson, Hagel & Fishburn, LLP | | Transaction ID: D75410 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address 555 Capitol Mall Suite 1425 | | Amount of Each Disbursement this Period 72.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Sacramento State CA Zip Code 95814-4602 | | |
| Purpose of Disbursement Legal & Reporting Services Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Pathways | | Transaction ID: D75378 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 7 |
| Mailing Address 1243 North Emerald Avenue Suite D | | Amount of Each Disbursement this Period 466.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Modesto State CA Zip Code 95351 | | |
| Purpose of Disbursement Fundraising mailing Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Pathways | | Transaction ID: D75368 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7 |
| Mailing Address 1243 North Emerald Avenue Suite D | | Amount of Each Disbursement this Period 1374.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Modesto State CA Zip Code 95351 | | |
| Purpose of Disbursement Postage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1912.30 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) A. Phoenix Grand Hotel | | Transaction ID: D75387 Date of Disbursement 02 / 25 / 2007 |
| Mailing Address 201 Liberty Street SE | | Amount of Each Disbursement this Period 130.90 |
| City Salem State OR Zip Code 97301 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/lodging | Category/Type | [MEMO ITEM] In-Kind, See Line 21 |
| Candidate Name Darlene Hooley | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: OR District: 05 | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Rachel's Kitchen | | Transaction ID: D75376 Date of Disbursement 02 / 19 / 2007 |
| Mailing Address 1400 Lone Palm, #B | | Amount of Each Disbursement this Period 1875.00 |
| City Modesto State CA Zip Code 95351 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Fundraising catering expense | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Staples Credit Plan | | Transaction ID: D75351 Date of Disbursement 02 / 01 / 2007 |
| Mailing Address PO Box 689020 | | Amount of Each Disbursement this Period 187.86 |
| City Des Moines State IA Zip Code 50368-9020 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Office supplies | Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | State: District: | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2062.86 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Staples Credit Plan | | Transaction ID: D1835 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 7 |
| Mailing Address PO Box 689020 | | Amount of Each Disbursement this Period 155.91 |
| City Des Moines State IA Zip Code 50368-9020 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Office Supplies Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US Postmaster | | Transaction ID: D75395 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7 |
| Mailing Address Main Post Office | | Amount of Each Disbursement this Period 2000.00 |
| City Modesto State CA Zip Code 95350-9998 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Postage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. US Postmaster | | Transaction ID: D75398 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 7 |
| Mailing Address Main Post Office | | Amount of Each Disbursement this Period 14.40 |
| City Modesto State CA Zip Code 95350-9998 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Postage Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2170.31 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Verizon Wireless | | Transaction ID: D75411 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address PO Box 17464 | | Amount of Each Disbursement this Period 68.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Baltimore State MD Zip Code 21297-1464 | Purpose of Disbursement Telephone expense Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Verizon Wireless | | Transaction ID: D75390 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7 |
| Mailing Address PO Box 17464 | | Amount of Each Disbursement this Period 68.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Baltimore State MD Zip Code 21297-1464 | Purpose of Disbursement Telephone expense Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Verizon Wireless | | Transaction ID: D75352 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7 |
| Mailing Address PO Box 17464 | | Amount of Each Disbursement this Period 68.54 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Baltimore State MD Zip Code 21297-1464 | Purpose of Disbursement Telephone expense Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 205.62 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. Winpisinger & Associates, Inc. | | Transaction ID: D75391 Date of Disbursement M M / D D / Y Y Y Y 03 / 05 / 2007 |
| Mailing Address 315 Inspiration Lane | | Amount of Each Disbursement this Period 1539.51 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City Gaithersburg State MD Zip Code 20878 | Category/ Type <input type="checkbox"/> | |
| Purpose of Disbursement Admin/FEC compliance Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|--------------------------|--|
| Full Name (Last, First, Middle Initial) B. US Bank Visa | | Transaction ID: D1838 Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 140.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Category/ Type 001 | |
| Purpose of Disbursement Credit card (see below if itemized) Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

| | | |
|--|--------------------------|--|
| Full Name (Last, First, Middle Initial) C. US Bank Visa | | Transaction ID: D1839 Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 4.99 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Category/ Type 001 | |
| Purpose of Disbursement Office Supplies Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: | | |

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|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1684.50 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. US Bank Visa | | Transaction ID: D1840 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 566.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card (see below) | |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. House Gift Shop | | Transaction ID: D3518 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address B-217 Longworth House Office Bldg. | | Amount of Each Disbursement this Period 566.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| City Washington State DC Zip Code 20515 | Purpose of Disbursement Gifts for Constituents | |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. US Bank Visa | | Transaction ID: D1842 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 53.93 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Postage | |
| Candidate Name | Category/Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 620.69 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 49 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Bank Visa | | Transaction ID: D1845 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 78.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Postage Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Category/Type: 001 | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US Bank Visa | | Transaction ID: D1846 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 1088.85 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card (see below) Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Category/Type: 001 | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Manuel Tavares, LDA | | Transaction ID: D3516 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address Rua de Betesga Niaeb, 1100-090 | | Amount of Each Disbursement this Period 637.07 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| City Lisbon, Portugal State Zip Code | Purpose of Disbursement Food & Beverage for Meeting Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| Category/Type: 001 | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1166.85 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 50 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. The Branding Iron | | Transaction ID: D3517 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address 640 W 16th St | | Amount of Each Disbursement this Period 235.00 |
| City Merced State CA Zip Code 95340-4721 | Purpose of Disbursement Food & Beverage for Meeting Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US Bank Visa | | Transaction ID: D1847 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 42.28 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Staff Travel Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. US Bank Visa | | Transaction ID: D1848 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 70.57 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Telephone expense Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 112.85 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Bank Visa | | Transaction ID: D1849 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 286.07 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card (see below) Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Central Self Storage | | Transaction ID: D69424 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address 55 W 24th St | | Amount of Each Disbursement this Period 118.00 |
| City Merced State CA Zip Code 95340-3863 | Purpose of Disbursement Storage rent Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Staples | | Transaction ID: D69425 Date of Disbursement 01 / 16 / 2007 |
| Mailing Address 20 W Olive Ave | | Amount of Each Disbursement this Period 168.07 |
| City Merced State CA Zip Code 95348-3134 | Purpose of Disbursement Office supplies Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 286.07 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Bank Visa | | Transaction ID: D69426 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 86.13 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card (see below) | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Sprint PCS | | Transaction ID: D69428 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address PO Box 79255 | | Amount of Each Disbursement this Period 86.13 |
| City City Of Industry State CA Zip Code 91716-9255 | Purpose of Disbursement Telephone expense | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. US Bank Visa | | Transaction ID: D75381 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 7 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 1551.50 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card payment (see below) | |
| Candidate Name | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1637.63 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Central Self Storage | | Transaction ID: D75367 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7 |
| Mailing Address 55 W 24th St | | Amount of Each Disbursement this Period 118.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| City Merced State CA Zip Code 95340-3863 | Purpose of Disbursement Storage unit rent Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Federal Express/Kinko's, Inc. | | Transaction ID: D75341 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7 |
| Mailing Address PO Box 1140 | | Amount of Each Disbursement this Period 14.67 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| City Memphis State TN Zip Code 38101-1140 | Purpose of Disbursement Shipping Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Federal Express/Kinko's, Inc. | | Transaction ID: D75343 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7 |
| Mailing Address PO Box 1140 | | Amount of Each Disbursement this Period 12.26 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| City Memphis State TN Zip Code 38101-1140 | Purpose of Disbursement Shipping Candidate Name Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) A. Merced Sun-Star | | Transaction ID: D75335 Date of Disbursement 01 / 16 / 2007 | |
| Mailing Address PO Box 739 | | Amount of Each Disbursement this Period 695.10 | |
| City Merced State CA Zip Code 95341-0739 | Purpose of Disbursement Advertising | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) B. Party Rentals | | Transaction ID: D75370 Date of Disbursement 02 / 06 / 2007 | |
| Mailing Address 4623 McHenry Ave | | Amount of Each Disbursement this Period 500.00 | |
| City Modesto State CA Zip Code 95356-9562 | Purpose of Disbursement Fundraising event expense | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

| | | | |
|--|--|---|--|
| Full Name (Last, First, Middle Initial) C. US Postmaster | | Transaction ID: D75369 Date of Disbursement 02 / 06 / 2007 | |
| Mailing Address Main Post Office | | Amount of Each Disbursement this Period 195.00 | |
| City Modesto State CA Zip Code 95350-9998 | Purpose of Disbursement Postage | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] | |
| Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Category/Type | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. US Bank Visa | | Transaction ID: D75382 Date of Disbursement 02 / 22 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 389.06 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card payment (see below) | |
| Candidate Name | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. House Gift Shop | | Transaction ID: D75339 Date of Disbursement 01 / 26 / 2007 |
| Mailing Address B-217 Longworth House Office Bldg. | | Amount of Each Disbursement this Period 181.37 |
| City Washington State DC Zip Code 20515 | Purpose of Disbursement Gifts for constituents | |
| Candidate Name | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. US Bank Visa | | Transaction ID: D75383 Date of Disbursement 02 / 22 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 4208.31 |
| City St. Louis State MO Zip Code 63179-0408 | Purpose of Disbursement Credit card payment (see below) | |
| Candidate Name | Category/ Type | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4597.37 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| <p>A. Kingsmill Resort</p> <p>Full Name (Last, First, Middle Initial) Kingsmill Resort</p> <p>Mailing Address 1010 Kingsmill Road</p> <p>City Williamsburg State VA Zip Code 23185</p> <p>Purpose of Disbursement Caucus retreat</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75385</p> <p>Date of Disbursement 02 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 1750.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|--|--|---|

| | | |
|--|--|--|
| <p>B. Kingsmill Resort</p> <p>Full Name (Last, First, Middle Initial) Kingsmill Resort</p> <p>Mailing Address 1010 Kingsmill Road</p> <p>City Williamsburg State VA Zip Code 23185</p> <p>Purpose of Disbursement Caucus retreat</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75386</p> <p>Date of Disbursement 02 / 22 / 2007</p> <p>Amount of Each Disbursement this Period 341.41</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|--|--|--|

| | | |
|--|--|--|
| <p>C. Kingsmill Resort</p> <p>Full Name (Last, First, Middle Initial) Kingsmill Resort</p> <p>Mailing Address 1010 Kingsmill Road</p> <p>City Williamsburg State VA Zip Code 23185</p> <p>Purpose of Disbursement Caucus retreat</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75365</p> <p>Date of Disbursement 02 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 866.67</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|--|--|--|

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Southwest Airlines | | Transaction ID: D75340 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 0 7 |
| Mailing Address 2702 Love Field Dr | | Amount of Each Disbursement this Period 243.10 |
| City Dallas State TX Zip Code 75235-1908 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/airfare | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. United Airlines | | Transaction ID: D75332 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address 7130 Air Cargo Road | | Amount of Each Disbursement this Period 200.00 |
| City Oklahoma City State OK Zip Code 73159 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/airfare | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. United Airlines | | Transaction ID: D75333 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7 |
| Mailing Address 7130 Air Cargo Road | | Amount of Each Disbursement this Period 15.00 |
| City Oklahoma City State OK Zip Code 73159 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/airfare | | [MEMO ITEM] |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 0.00 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. United Airlines | | Transaction ID: D75384 Date of Disbursement MM / DD / YYYY 02 / 22 / 2007 |
| Mailing Address 7130 Air Cargo Road | | Amount of Each Disbursement this Period 364.80 |
| City Oklahoma City State OK Zip Code 73159 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/airfare | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. US Bank Visa | | Transaction ID: D75405 Date of Disbursement MM / DD / YYYY 03 / 23 / 2007 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 1098.36 |
| City St. Louis State MO Zip Code 63179-0408 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit card payment (see below) | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Beyondtheboxdesign | | Transaction ID: D75417 Date of Disbursement MM / DD / YYYY 03 / 23 / 2007 |
| Mailing Address 1050 N. Carpenter Suite O | | Amount of Each Disbursement this Period 300.00 |
| City Modesto State CA Zip Code 95351 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Website design | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 1098.36 |
| TOTAL This Period (last page this line number only) ▶ | _____ |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Central Self Storage | | Transaction ID: D75422 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address 55 W 24th St | | Amount of Each Disbursement this Period 118.00 |
| City Merced State CA Zip Code 95340-3863 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Storage unit rent | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Federal Express/Kinko's, Inc. | | Transaction ID: D75423 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address PO Box 1140 | | Amount of Each Disbursement this Period 68.92 |
| City Memphis State TN Zip Code 38101-1140 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Shipping | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Federal Express/Kinko's, Inc. | | Transaction ID: D75413 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address PO Box 1140 | | Amount of Each Disbursement this Period 37.64 |
| City Memphis State TN Zip Code 38101-1140 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Shipping | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 60 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) A. Sprint PCS | | Transaction ID: D75418 Date of Disbursement 03 / 23 / 2007 | |
| Mailing Address PO Box 79255 | | Amount of Each Disbursement this Period 196.90 | |
| City City Of Industry | State CA | Zip Code 91716-9255 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Telephone expense | Category/ Type | | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|---|--|--|---|
| Full Name (Last, First, Middle Initial) B. Sprint PCS | | Transaction ID: D75419 Date of Disbursement 03 / 23 / 2007 | |
| Mailing Address PO Box 79255 | | Amount of Each Disbursement this Period 28.33 | |
| City City Of Industry | State CA | Zip Code 91716-9255 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Telephone expense | Category/ Type | | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | | | |
|--|--|--|---|
| Full Name (Last, First, Middle Initial) C. Staples | | Transaction ID: D75414 Date of Disbursement 03 / 23 / 2007 | |
| Mailing Address 20 W Olive Ave | | Amount of Each Disbursement this Period 265.70 | |
| City Merced | State CA | Zip Code 95348-3134 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Office supplies | Category/ Type | | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | | |
| State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. US Postmaster

Full Name (Last, First, Middle Initial)
Mailing Address Main Post Office

City Modesto State CA Zip Code 95350-9998

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D75415

Date of Disbursement
03 / 23 / 2007

Amount of Each Disbursement this Period
36.55

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B. US Bank Visa

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 790408

City St. Louis State MO Zip Code 63179-0408

Purpose of Disbursement Credit card payment (see below)

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D75406

Date of Disbursement
03 / 23 / 2007

Amount of Each Disbursement this Period
7318.91

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Alaska Airlines

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168-0900

Purpose of Disbursement Travel/Airfare

Candidate Name

Office Sought: House Senate President

Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: D75438

Date of Disbursement
03 / 23 / 2007

Amount of Each Disbursement this Period
50.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

| | |
|--|----------------|
| SUBTOTAL of Disbursements This Page (optional) | 7318.91 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. Alaska Airlines | | Transaction ID: D75439 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address PO Box 68900 | | Amount of Each Disbursement this Period 50.00 |
| City Seattle | State WA | |
| Zip Code 98168-0900 | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Travel/Airfare | Category/ Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. Corduroy Restaurant | | Transaction ID: D75440 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address 1201 K Street, NW | | Amount of Each Disbursement this Period 710.00 |
| City Washington | State DC | |
| Zip Code 20005 | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Fundraising event food | Category/ Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Hunan Dynasty | | Transaction ID: D75434 Date of Disbursement 03 / 23 / 2007 |
| Mailing Address 215 Pennsylvania Avenue, SE | | Amount of Each Disbursement this Period 123.15 |
| City Washington | State DC | |
| Zip Code 20003 | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM] |
| Purpose of Disbursement Political meeting/meal | Category/ Type | |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: District: | | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|--|
| <p>A. Kingsmill Resort</p> <p>Full Name (Last, First, Middle Initial) Kingsmill Resort</p> <p>Mailing Address 1010 Kingsmill Road</p> <p>City Williamsburg State VA Zip Code 23185</p> <p>Purpose of Disbursement Caucus retreat</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75435</p> <p>Date of Disbursement 03 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 188.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|--|--|--|

| | | |
|--|--|--|
| <p>B. Kingsmill Resort</p> <p>Full Name (Last, First, Middle Initial) Kingsmill Resort</p> <p>Mailing Address 1010 Kingsmill Road</p> <p>City Williamsburg State VA Zip Code 23185</p> <p>Purpose of Disbursement Caucus retreat</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75432</p> <p>Date of Disbursement 03 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 150.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|--|--|--|

| | | |
|---|--|--|
| <p>C. Poste Restaurant</p> <p>Full Name (Last, First, Middle Initial) Poste Restaurant</p> <p>Mailing Address 700 F Street, NW</p> <p>City Washington State DC Zip Code 20004</p> <p>Purpose of Disbursement Political meeting/meal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | | <p>Transaction ID: D75430</p> <p>Date of Disbursement 03 / 23 / 2007</p> <p>Amount of Each Disbursement this Period 320.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p> |
|---|--|--|

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. United Airlines | | Transaction ID: D75431 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address 7130 Air Cargo Road | | Amount of Each Disbursement this Period 354.40 |
| City Oklahoma City State OK Zip Code 73159 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Travel/airfare | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. US Bank Visa | | Transaction ID: D75407 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address PO Box 790408 | | Amount of Each Disbursement this Period 2155.66 |
| City St. Louis State MO Zip Code 63179-0408 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Credit card payment (see below) | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. Hunan Dynasty | | Transaction ID: D75428 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 7 |
| Mailing Address 215 Pennsylvania Avenue, SE | | Amount of Each Disbursement this Period 379.70 |
| City Washington State DC Zip Code 20003 | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 | |
| Purpose of Disbursement Political meeting/meal | Candidate Name | [MEMO ITEM] |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|-------------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2155.66 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 65 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
Sonoma

Mailing Address 223 Pennsylvania Avenue, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Fundraising/catering

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2008 Primary General Other (specify) ▼

Transaction ID: D75424

Date of Disbursement

| | | | | | | | | | |
|--------------|--------------|---|--------------|--------------|---|--------------|--------------|--------------|--------------|
| ^M | ^M | / | ^D | ^D | / | ^Y | ^Y | ^Y | ^Y |
| 0 | 3 | | 2 | 3 | | 2 | 0 | 0 | 7 |

Amount of Each Disbursement this Period

| |
|---------|
| 1596.00 |
|---------|

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

53803.16

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

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

FOR LINE NUMBER:
(check only one)

PAGE 66 / 70

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

Full Name (Last, First, Middle Initial)

A. Committee to Re-Elect Gloria Negrete McLeod 2004

Mailing Address P.O. Box 1149

City Chino State CA Zip Code 91708

Purpose of Disbursement
Refund of Contribution

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D1841

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00

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)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. Alaska Airlines | | Transaction ID: D75444 Date of Disbursement 02 / 13 / 2007 |
| Mailing Address PO Box 68900 | | Amount of Each Disbursement this Period 119.40 |
| City Seattle | State WA Zip Code 98168-0900 | |
| Purpose of Disbursement Travel/Airfare (In-Kind) | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name Darlene Hooley | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] US Bank Visa charge |
| State: OR District: 05 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Alaska Airlines | | Transaction ID: D75445 Date of Disbursement 02 / 13 / 2007 |
| Mailing Address PO Box 68900 | | Amount of Each Disbursement this Period 119.40 |
| City Seattle | State WA Zip Code 98168-0900 | |
| Purpose of Disbursement Travel/Airfare (In-Kind) | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name Rick R. Larsen | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] US Bank Visa charge |
| State: WA District: 02 | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Inn at Port Gardner | | Transaction ID: D75446 Date of Disbursement 02 / 27 / 2007 |
| Mailing Address 1700 W. Marine View Drive | | Amount of Each Disbursement this Period 131.61 |
| City Everett | State WA Zip Code 98201 | |
| Purpose of Disbursement Travel/Lodging (In-Kind) | | <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 |
| Candidate Name Rick R. Larsen | | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | [MEMO ITEM] US Bank Visa charge |
| State: WA District: 02 | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Dennis Cardoza

A. Full Name (Last, First, Middle Initial)
MCNERNEY FOR CONGRESS

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement
Contribution

Candidate Name
Jerry McNerney

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 11

Transaction ID: D75402

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
Phoenix Grand Hotel

Mailing Address 201 Liberty Street SE

City Salem State OR Zip Code 97301

Purpose of Disbursement
Travel/lodging (In-Kind)

Candidate Name
Darlene Hooley

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OR District: 05

Transaction ID: D75447

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]
US Bank Visa charge

C. Full Name (Last, First, Middle Initial)
Turlock Community Auditorium

Mailing Address 1574 East Canal Drive

City Turlock State CA Zip Code 95381

Purpose of Disbursement
Charity auction donation

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: D75433

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

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

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

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Friends of Dennis Cardoza

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Food & Beverages for Meeting |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|--|--------------------------------|---|
| Outstanding Balance Beginning This Period 1088.85 | Transaction ID: D69416 | |
| Amount Incurred This Period 0.00 | Payment This Period 1088.85 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|--------------------------------------|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Postage |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|---|-------------------------------|---|
| Outstanding Balance Beginning This Period 131.93 | Transaction ID: D69417 | |
| Amount Incurred This Period 0.00 | Payment This Period 131.93 | Outstanding Balance at Close of This Period 0.00 |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Gifts for Constituents |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|---|-------------------------------|---|
| Outstanding Balance Beginning This Period 566.76 | Transaction ID: D69418 | |
| Amount Incurred This Period 0.00 | Payment This Period 566.76 | Outstanding Balance at Close of This Period 0.00 |

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

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

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
 Friends of Dennis Cardoza

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Office supplies |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|---|---|---|
| Outstanding Balance Beginning This Period <input style="width:100%" type="text" value="4.99"/> | Transaction ID: D69419 | |
| Amount Incurred This Period <input style="width:100%" type="text" value="0.00"/> | Payment This Period <input style="width:100%" type="text" value="4.99"/> | Outstanding Balance at Close of This Period <input style="width:100%" type="text" value="0.00"/> |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Staff Travel |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|--|--|---|
| Outstanding Balance Beginning This Period <input style="width:100%" type="text" value="42.28"/> | Transaction ID: D69420 | |
| Amount Incurred This Period <input style="width:100%" type="text" value="0.00"/> | Payment This Period <input style="width:100%" type="text" value="42.28"/> | Outstanding Balance at Close of This Period <input style="width:100%" type="text" value="0.00"/> |

| | |
|---|------------------------------------|
| C. Full Name (Last, First, Middle Initial) of Debtor or Creditor US Bank Visa | Nature of Debt (Purpose): Phone |
| Mailing Address PO Box 790408 | |
| City State ZIP Code St. Louis MO 63179-0408 | |

| | | |
|--|--|---|
| Outstanding Balance Beginning This Period <input style="width:100%" type="text" value="86.13"/> | Transaction ID: D69421 | |
| Amount Incurred This Period <input style="width:100%" type="text" value="0.00"/> | Payment This Period <input style="width:100%" type="text" value="86.13"/> | Outstanding Balance at Close of This Period <input style="width:100%" type="text" value="0.00"/> |

| | | |
|--|---|--|
| 1) SUBTOTALS This Period This Page (optional)..... | ▶ | <input style="width:100%" type="text" value="0.00"/> |
| 2) TOTALS This Period (last page this line number only)..... | ▶ | <input style="width:100%" type="text" value="0.00"/> |
| 3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)..... | ▶ | <input style="width:100%" type="text" value=""/> |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | ▶ | <input style="width:100%" type="text" value=""/> |