

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Gallegly for Congress

ADDRESS (number and street) P.O. Box 940001

Check if different than previously reported. (ACC)

Simi Valley CA 93094 0001

2. **FEC IDENTIFICATION NUMBER** C00194803

CITY STATE ZIP CODE STATE DISTRICT

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

CA 24

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

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

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] [] [] in the State of []

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

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

Election on [] [] [] in the State of []

5. Covering Period 07 01 2008 through 09 30 2008

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

Type or Print Name of Treasurer Janice Gallegly

Signature of Treasurer Electronically Filed by Janice Gallegly Date 10 09 2008

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Gallegly for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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)).....	62324.10	607203.46
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	950.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	62324.10	606253.46
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	64991.52	582950.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	1350.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	64991.52	581600.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	819194.48	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	1542.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Gallegly for Congress

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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).....

42197.00

374379.16

(ii) Unitemized.....

10127.10

101905.98

(iii) TOTAL of contributions

52324.10

476285.14

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

10000.00

130918.32

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

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

62324.10

607203.46

(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.).....

0.00

1350.00

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

3091.84

53417.75

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

65415.94

661971.21

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	64991.52	582950.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	950.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	950.00
21. OTHER DISBURSEMENTS.....	22500.00	35226.86
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	87491.52	619127.74

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	841270.06
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	65415.94
25. SUBTOTAL (add Line 23 and Line 24).....	906686.00
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	87491.52
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	819194.48

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 106
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Rose Abbate

Mailing Address 44124 Village 44

City State Zip Code
Camarillo CA 93012-8946

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

Name of Employer Occupation
Homemaker Homemaker

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

Amount of Each Receipt this Period
100.00

Transaction ID: SA11AI.21663

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

B.

Full Name (Last, First, Middle Initial)
Kel Aiken

Mailing Address 75 W. Easy Street

City State Zip Code
Simi Valley CA 93065

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

Name of Employer Occupation
Simi Stow-It Small business owner

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

Amount of Each Receipt this Period
142.50

Transaction ID: SA11AI.22324

In-kind - Storage space

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

C.

Full Name (Last, First, Middle Initial)
Henry Ardantz

Mailing Address 2222 Arrowhead Drive

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
Retired Retired

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

Amount of Each Receipt this Period
250.00

Transaction ID: SA11AI.21661

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

SUBTOTAL of Receipts This Page (optional) ► **492.50**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Susan Ash

Mailing Address 1351 Kingsboro Court

City State Zip Code
Westlake Village CA 91332

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

Name of Employer Occupation
Self-employed Investments

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

Amount of Each Receipt this Period
300.00

Transaction ID: SA11AI.22285

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

B. Full Name (Last, First, Middle Initial)
Mr Vic Avetissian

Mailing Address 6328 Tamarind Street

City State Zip Code
Oak Park CA 91377

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

Name of Employer Occupation
Northrop Grumman Corp Director of Acquisitions Division

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

Amount of Each Receipt this Period
10.00

Transaction ID: SA11AI.21888

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

C. Full Name (Last, First, Middle Initial)
Mrs. Nancy Bays

Mailing Address 1184 Colina Vista

City State Zip Code
Ventura CA 93003-1366

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

Name of Employer Occupation
Amgen Executive

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

Amount of Each Receipt this Period
25.00

Transaction ID: SA11AI.21889

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

SUBTOTAL of Receipts This Page (optional) ▶ **335.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr Edwin Beach

Mailing Address 1500 Say Road

City Santa Paula State CA Zip Code 93060

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

Name of Employer Retired Judge Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 403.00

Date of Receipt 07 / 14 / 2008
Transaction ID: SA11AI.21690
 Amount of Each Receipt this Period 55.00

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

B. Full Name (Last, First, Middle Initial)
Mrs. Martha Bennett

Mailing Address 1261 Dover Avenue

City Thousand Oaks State CA Zip Code 91360-3557

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt 08 / 20 / 2008
Transaction ID: SA11AI.21939
 Amount of Each Receipt this Period 100.00

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

C. Full Name (Last, First, Middle Initial)
Mr Ettore Berardinelli

Mailing Address 517 Walter Avenue

City Newbury Park State CA Zip Code 91320

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

Name of Employer None Occupation Retired Fire Chief

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 299.00

Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.21998
 Amount of Each Receipt this Period 100.00

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

SUBTOTAL of Receipts This Page (optional) ► 255.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr George Berger

Mailing Address 981 Woodstock Lane

City State Zip Code
Ventura CA 93001

FEC ID number of contributing federal political committee. C

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 369.00

Date of Receipt MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.21689

Amount of Each Receipt this Period 85.00

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

B.

Full Name (Last, First, Middle Initial)
Yvonne Bodle

Mailing Address 2234 Cannes Square

City State Zip Code
Oxnard CA 93030

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt MM / DD / YYYY
09 / 03 / 2008

Transaction ID: SA11AI.21978

Amount of Each Receipt this Period 200.00

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

C.

Full Name (Last, First, Middle Initial)
Mrs. Susan Boething

Mailing Address 23475 Long Valley Road

City State Zip Code
Woodland Hills CA 91367

FEC ID number of contributing federal political committee. C

Name of Employer Boething Treeland Farms Occupation Chairman

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt MM / DD / YYYY
08 / 20 / 2008

Transaction ID: SA11AI.21937

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) 535.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 106
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mrs Mickey Bolin	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 3941 High Forest Road	Transaction ID: SA11AI.22133
	City State Zip Code Colorado Springs CO 80908	Amount of Each Receipt this Period 300.00
	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 Homemaker Homemaker	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1300.00	

B.	Full Name (Last, First, Middle Initial) Dr Stan Bowers	Date of Receipt MM / DD / YYYY 07 / 09 / 2008
	Mailing Address 1164-A South Westlake Blvd.	Transaction ID: SA11AI.21668
	City State Zip Code Westlake Village CA 91361	Amount of Each Receipt this Period 50.00
	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 None Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 448.00	

C.	Full Name (Last, First, Middle Initial) Timothy Boyle	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 5180 Tapo Canyon Road	Transaction ID: SA11AI.22034
	City State Zip Code Simi Valley CA 93063	Amount of Each Receipt this Period 100.00
	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 Slim's Welding Self-Employed	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 10 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr Rodger Bronner

Mailing Address 1596 E. Prima Court

City State Zip Code
Camarillo CA 93010

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period: 110.00

Transaction ID: SA11AI.21723

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

350.00

B. Full Name (Last, First, Middle Initial)
Mr. Joseph Brown

Mailing Address 15 Pinecrest Drive

City State Zip Code
Thousand Oaks CA 91361

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period: 50.00

Transaction ID: SA11AI.21730

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

1990.00

C. Full Name (Last, First, Middle Initial)
Cyndee Bryant-Quinn

Mailing Address 1120 Fredensborg Canyon Rd.

City State Zip Code
Solvang CA 93463

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

Name of Employer Cyndee Bryant-Quinn Insurance Occupation Insurance Agent

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

Amount of Each Receipt this Period: 250.00

Transaction ID: SA11AI.22065

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

250.00

SUBTOTAL of Receipts This Page (optional) ▶ **410.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr David Buchanan

Mailing Address 1120 Avenida Acaso

City State Zip Code
Camarillo CA 93012

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Tacticom, USA President

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	0		2	0	0	8

Transaction ID: SA11AI.22073

Amount of Each Receipt this Period
270.00

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

B. Full Name (Last, First, Middle Initial)
John Burke

Mailing Address 715 Viewcrest Drive

City State Zip Code
Ventura CA 93003-1113

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Photographer

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	2		2	0	0	8

Transaction ID: SA11AI.22130

Amount of Each Receipt this Period
225.00

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

C. Full Name (Last, First, Middle Initial)
Mr. George Cady

Mailing Address 10945 Kings Road

City State Zip Code
Ventura CA 93004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Retired Retired

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

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	9		2	0	0	8

Transaction ID: SA11AI.21672

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) 520.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. George Cady

Mailing Address 10945 Kings Road

City State Zip Code
Ventura CA 93004

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1925.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	9	/	2	0	0	8

Transaction ID: SA11AI.21894

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Mr. George Cady

Mailing Address 10945 Kings Road

City State Zip Code
Ventura CA 93004

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2025.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	6	/	2	0	0	8

Transaction ID: SA11AI.22299

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Joseph Caligiuri

Mailing Address 1353 Oak Grove Place

City State Zip Code
Westlake Village CA 91362

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 289.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.21692

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional) ► **250.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Glenn Cardoso

Mailing Address 213 - 14th Street

City State Zip Code
Santa Monica CA 90402

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

Name of Employer Occupation
New Urban West, Inc. Principal

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 08 / 2008

Transaction ID: SA11AI.22056

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)
Carolyn Casavan

Mailing Address 5573 Rushmore Street

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
West Coast Environment & Engineering Engineer

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2008

Transaction ID: SA11AI.21653

Amount of Each Receipt this Period
149.00

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

C. Full Name (Last, First, Middle Initial)
Lore Caulfield-Hamilton

Mailing Address 1830 Via Latina Drive

City State Zip Code
Camarillo CA 93012

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

Name of Employer Occupation
Self-Employed Free Lance Writer

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2008

Transaction ID: SA11AI.21712

Amount of Each Receipt this Period
74.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **473.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 106
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Lore Caulfield-Hamilton		Date of Receipt
	Mailing Address 1830 Via Latina Drive		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 03 / 2008
	City	State	Zip Code
	Camarillo	CA	93012
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21972
Name of Employer Self-Employed		Occupation Free Lance Writer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 450.00
		<input type="text"/> 1024.00	<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) Mr. Daniel Ch'en		Date of Receipt
	Mailing Address 3663 Via De Costa		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 28 / 2008
	City	State	Zip Code
	Thousand Oaks	CA	91360-7117
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21810
Name of Employer Microwave Monolithics		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 1530.00	<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) Mr. Daniel Ch'en		Date of Receipt
	Mailing Address 3663 Via De Costa		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 12 / 2008
	City	State	Zip Code
	Thousand Oaks	CA	91360-7117
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22084
Name of Employer Microwave Monolithics		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 2030.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 975.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 15 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

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

Mailing Address 24734 Via Pradera

City State Zip Code
Calabasas CA 91302

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

Name of Employer Occupation
None Homemaker

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

Amount of Each Receipt this Period
50.00

Transaction ID: SA11AI.22047

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

249.00

B. Full Name (Last, First, Middle Initial)
Mr. Howard Christie

Mailing Address 26 Corral Road

City State Zip Code
Conoga Park CA 91307

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

Name of Employer Occupation
Retired Retired

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

Amount of Each Receipt this Period
30.00

Transaction ID: SA11AI.22057

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

249.00

C. Full Name (Last, First, Middle Initial)
Gerald Clark

Mailing Address 484 Mobil Avenue

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation
Clark Agency Insurance Industry

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

Amount of Each Receipt this Period
50.00

Transaction ID: SA11AI.22011

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

304.00

SUBTOTAL of Receipts This Page (optional) ► **130.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mrs. Linda Cohenour
Mailing Address 6950 Calle Dia
City Camarillo State CA Zip Code 93012
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1625.00
Date of Receipt 07 / 28 / 2008
Transaction ID: SA11AI.21778
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mrs. Linda Cohenour
Mailing Address 6950 Calle Dia
City Camarillo State CA Zip Code 93012
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2075.00
Date of Receipt 09 / 15 / 2008
Transaction ID: SA11AI.22095
Amount of Each Receipt this Period 450.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Douglas Coleman
Mailing Address P. O. Box 5783
City Santa Maria State CA Zip Code 93456
FEC ID number of contributing federal political committee. **C**
Name of Employer CSI Occupation Marketing
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00
Date of Receipt 08 / 19 / 2008
Transaction ID: SA11AI.21896
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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Scott Coleman

Mailing Address 612 Hillside Court

City State Zip Code
Arroyo Grande CA 93420

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

Name of Employer Spiess Construction Co. Occupation Contractor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: SA11AI.22111

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)
Mrs Mary Conant

Mailing Address 1420 Magnolia Drive

City State Zip Code
Santa Paula CA 93060

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

Name of Employer None Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21729

Amount of Each Receipt this Period
50.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Harry Copeland

Mailing Address 382 Meredith Avenue

City State Zip Code
Ventura CA 93003

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 498.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21747

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) ► **575.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Harry Copeland

Mailing Address 382 Meredith Avenue

City State Zip Code
Ventura CA 93003

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period
100.00

Transaction ID: SA11AI.21940

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

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

Mailing Address 382 Meredith Avenue

City State Zip Code
Ventura CA 93003

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period
200.00

Transaction ID: SA11AI.22300

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

C. Full Name (Last, First, Middle Initial)
Ann Costigan

Mailing Address P. O. Box 659

City State Zip Code
Ojai CA 93024

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period
200.00

Transaction ID: SA11AI.22058

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

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Patrick Coulter

Mailing Address 4591 Silverbell Circle

City State Zip Code
Moorpark CA 93021

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

Name of Employer Occupation
Raytheon Vice-president

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

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2008

Transaction ID: SA11AI.21779

Amount of Each Receipt this Period
50.00

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

550.00

B. Full Name (Last, First, Middle Initial)
Diana Crothers

Mailing Address 895 Oak Grove Court

City State Zip Code
Ojai CA 93023

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21696

Amount of Each Receipt this Period
50.00

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

550.00

C. Full Name (Last, First, Middle Initial)
Mrs Rebecca Dabney

Mailing Address 14051 W. Telegraph Road

City State Zip Code
Santa Paula CA 93060

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

Name of Employer Occupation
Reed Land Clearing Small Business Owner

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 10 / 2008

Transaction ID: SA11AI.22074

Amount of Each Receipt this Period
200.00

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

300.00

SUBTOTAL of Receipts This Page (optional) ▶ **300.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 106 (check only one)
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Mrs Cathleen Dalzell</p> <p>Mailing Address 6580 La Cumbre Road</p> <p>City State Zip Code Somis CA 93066</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Homemaker</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">300.00</p>	<p>Date of Receipt 08 / 19 / 2008</p> <p>Transaction ID: SA11AI.21900</p> <p>Amount of Each Receipt this Period 100.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>B. Full Name (Last, First, Middle Initial) Mr Oswald Da Ros</p> <p>Mailing Address 976 Carillo Road</p> <p>City State Zip Code Santa Barbara CA 93103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">350.00</p>	<p>Date of Receipt 08 / 19 / 2008</p> <p>Transaction ID: SA11AI.21899</p> <p>Amount of Each Receipt this Period 125.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Mr Oswald Da Ros</p> <p>Mailing Address 976 Carillo Road</p> <p>City State Zip Code Santa Barbara CA 93103</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Retired Occupation Retired</p> <p>Receipt For: 2008 Election Cycle-to-Date ▼</p> <p><input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p style="text-align: right;">400.00</p>	<p>Date of Receipt 09 / 03 / 2008</p> <p>Transaction ID: SA11AI.22002</p> <p>Amount of Each Receipt this Period 50.00</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
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SUBTOTAL of Receipts This Page (optional)	275.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr James Diani

Mailing Address 1320 Foxenwood Drive

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
A. J. Diani Construction Co., Inc Construction

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

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2008

Transaction ID: SA11AI.21766

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)
Mr Anthony Diaz

Mailing Address 560 N. 6th Street

City State Zip Code
Santa Paula CA 93060

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

Name of Employer Occupation
None Retired

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2008

Transaction ID: SA11AI.21982

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Mr Edward Drogmund

Mailing Address 1066 Westcreek Lane

City State Zip Code
Westlake Village CA 91362

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

Name of Employer Occupation
Conejo Car Wash Small business owner

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

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21736

Amount of Each Receipt this Period
49.00

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

SUBTOTAL of Receipts This Page (optional) ► **1149.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 106
	<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mr Edward Drogmund		Date of Receipt
	Mailing Address 1066 Westcreek Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Westlake Village	CA	91362
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21941
Name of Employer Conejo Car Wash		Occupation Small business owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 50.00
		<input type="text"/> 487.00	<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) Mr Edward Drogmund		Date of Receipt
	Mailing Address 1066 Westcreek Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 9 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Westlake Village	CA	91362
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22071
Name of Employer Conejo Car Wash		Occupation Small business owner	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 100.00
		<input type="text"/> 587.00	<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) Mr. Robert Dudley		Date of Receipt
	Mailing Address 3365 W. Telegraph Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 1 9 / 2 0 0 8
	City	State	Zip Code
	Fillmore	CA	93015
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21903
Name of Employer Dudley Ranch		Occupation Citrus grower	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/>	<input type="text"/> 25.00
		<input type="text"/> 218.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 175.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr Lawrence Elder

Mailing Address 888 Blue Spring Drive

City State Zip Code
Westlake Village CA 91361

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

Name of Employer Occupation
Larry Elder & Assoc. Engineer

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 6 / 2 0 0 8

Transaction ID: SA11AI.22305

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Mr George Esseff

Mailing Address 3801 Weatherly Circle

City State Zip Code
Westlake Village CA 91361

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

Name of Employer Occupation
Titanium Products Design President

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.21947

Amount of Each Receipt this Period
200.00

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

C. Full Name (Last, First, Middle Initial)
George Esseff, Jr

Mailing Address 351 Cortez Circle

City State Zip Code
Camarillo CA 93012

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

Name of Employer Occupation
Supra Alloys CEO

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.22313

Amount of Each Receipt this Period
50.00

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

SUBTOTAL of Receipts This Page (optional) ► **300.00**

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

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

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

FOR LINE NUMBER: PAGE 24 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Warren Faue
Mailing Address 217 Echo Court
City State Zip Code
Ventura CA 93003
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 349.00
Date of Receipt 08 / 19 / 2008
Transaction ID: SA11AI.21904
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. David Faul
Mailing Address 1310 Lantana Street
City State Zip Code
Camarillo CA 93010
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1825.00
Date of Receipt 08 / 25 / 2008
Transaction ID: SA11AI.21952
Amount of Each Receipt this Period 100.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr Lawrence Faulkner
Mailing Address 2529 Loretta Circle
City State Zip Code
Simi Valley CA 93065
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 352.00
Date of Receipt 07 / 16 / 2008
Transaction ID: SA11AI.21711
Amount of Each Receipt this Period 104.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 254.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 106

(check only one)

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

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

NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr Lawrence Faulkner

Mailing Address 2529 Loretta Circle

City State Zip Code
Simi Valley CA 93065

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 402.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2008

Transaction ID: SA11AI.22003

Amount of Each Receipt this Period

50.00

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

B.

Full Name (Last, First, Middle Initial)
Fred Ferro

Mailing Address 251 Walnut Drive

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
Seacoast Associates Farmer

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 05 / 2008

Transaction ID: SA11AI.22035

Amount of Each Receipt this Period

200.00

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

C.

Full Name (Last, First, Middle Initial)
Mrs Ellen Fowler

Mailing Address 6098 Gitana Avenue

City State Zip Code
Camarillo CA 93012

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 223.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21702

Amount of Each Receipt this Period

25.00

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

SUBTOTAL of Receipts This Page (optional) ▶

275.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 106
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Spiro Galiatzatos

Mailing Address 3556 Corona Street

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation
Kaiser Physician

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

400.00

Date of Receipt
MM / DD / YYYY
08 / 19 / 2008

Transaction ID: SA11AI.21905

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Daren Gee

Mailing Address 1786 Oak Brook Lane

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
DB Specialty Farms Farmer

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

1000.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2008

Transaction ID: SA11AI.21847

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)
Mr Grant Gerson

Mailing Address P.O. Box 787

City State Zip Code
Agoura CA 91376

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

Name of Employer Occupation
Calimigos Ranch Executive

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

1670.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.21708

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) ► **1125.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. John Gilbert

Mailing Address 621 Via Alondra # 602

City Camarillo State CA Zip Code 93012

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

Name of Employer Told Corporation Occupation Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2350.00

Date of Receipt 09 / 05 / 2008

Transaction ID: SA11AI.22036

Amount of Each Receipt this Period 300.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. Dennis Gillette

Mailing Address 286 W Sidlee Street

City Thousand Oaks State CA Zip Code 91360

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 213.00

Date of Receipt 07 / 09 / 2008

Transaction ID: SA11AI.21666

Amount of Each Receipt this Period 50.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. Dennis Gillette

Mailing Address 286 W Sidlee Street

City Thousand Oaks State CA Zip Code 91360

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 413.00

Date of Receipt 09 / 05 / 2008

Transaction ID: SA11AI.22037

Amount of Each Receipt this Period 200.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 28 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Paula Ginsberg

Mailing Address 3920 Mesa Circle Drive

City Lompoc State CA Zip Code 93436

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

Name of Employer Lompoc Unified School District Occupation Registered Nurse

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 05 / 2008
Transaction ID: SA11AI.22029
 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)
Mr. Joseph Glab

Mailing Address 1691 Daphne Street

City Camarillo State CA Zip Code 93010-2064

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1050.00

Date of Receipt 07 / 28 / 2008
Transaction ID: SA11AI.21780
 Amount of Each Receipt this Period 50.00

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

C. Full Name (Last, First, Middle Initial)
Lois Glab

Mailing Address 1691 Daphne Street

City Camarillo State CA Zip Code 93010

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

Name of Employer None Occupation Retired teacher

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2008
Transaction ID: SA11AI.21767
 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) ► **800.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Dr. Tom Glancy
Mailing Address 2402 La Granada
City Thousand Oaks State CA Zip Code 91362
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-Employed Occupation Dentist
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 449.00
Date of Receipt 07 / 28 / 2008
Transaction ID: SA11AI.21783
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Jurgen Gramckow
Mailing Address 1060 Shokat Drive
City Ojai State CA Zip Code 93023
FEC ID number of contributing federal political committee. **C**
Name of Employer Southland Sod Farms Occupation Farmer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1700.00
Date of Receipt 09 / 10 / 2008
Transaction ID: SA11AI.22075
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Dale Hampton
Mailing Address 2515 Professional Parkway
City Santa Maria State CA Zip Code 93455
FEC ID number of contributing federal political committee. **C**
Name of Employer Hampton Farming Company Occupation Farmer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 08 / 20 / 2008
Transaction ID: SA11AI.21934
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) ► 1250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 106
	<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Randi Harris		Date of Receipt
	Mailing Address 1090 Calle Arroyo		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 03 / 2008
	City	State	Zip Code
	Thousand Oaks	CA	91360
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22001
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 200.00
		<input type="text"/> 300.00	<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) Mrs Gail Harwood		Date of Receipt
	Mailing Address 2332 Lexington Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 21 / 2008
	City	State	Zip Code
	Ventura	CA	93003
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21726
Name of Employer None		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 85.00
		<input type="text"/> 224.00	<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) Patricia Haubrich		Date of Receipt
	Mailing Address 4 Humboldt Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 14 / 2008
	City	State	Zip Code
	Simi Valley	CA	93065
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21684
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 110.00
		<input type="text"/> 380.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 395.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 106
	<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Tsgio Hiji	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address P. O. Box 389	Transaction ID: SA11AI.22101
	City State Zip Code Oxnard CA 93032	Amount of Each Receipt this Period 200.00
	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 Hiji Brothers Farmers	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 266.67	

B.	Full Name (Last, First, Middle Initial) Robert A. Hill	Date of Receipt MM / DD / YYYY 08 / 19 / 2008
	Mailing Address 228 S. 7th Street	Transaction ID: SA11AI.21908
	City State Zip Code Lompoc CA 93436	Amount of Each Receipt this Period 125.00
	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 Retired Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	

C.	Full Name (Last, First, Middle Initial) Mr Thomas Hinds	Date of Receipt MM / DD / YYYY 09 / 05 / 2008
	Mailing Address 774 Via Ondulando	Transaction ID: SA11AI.22038
	City State Zip Code Ventura CA 93003	Amount of Each Receipt this Period 100.00
	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 Retired Retired	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional)	425.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 106
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr Robert Hinkel

Mailing Address 39026 Village 39

City State Zip Code
Camarillo CA 93012-5669

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

Name of Employer Retired Occupation Retired

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

Date of Receipt
MM / DD / YYYY
07 / 28 / 2008

Transaction ID: SA11AI.21769

Amount of Each Receipt this Period
104.00

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

352.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Huber

Mailing Address 487 Canyon Crest Drive

City State Zip Code
Simi Valley CA 93065

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

Name of Employer Huber & Takasugi Occupation Attorney

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

Date of Receipt
MM / DD / YYYY
09 / 24 / 2008

Transaction ID: SA11AI.22287

Amount of Each Receipt this Period
200.00

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

1600.00

C.

Full Name (Last, First, Middle Initial)
Deborah Hunt

Mailing Address 1031 Burlington Drive

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Tri W Enterprises, Inc. Occupation Executive Vice President

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

Date of Receipt
MM / DD / YYYY
08 / 04 / 2008

Transaction ID: SA11AI.21849

Amount of Each Receipt this Period
1000.00

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

1000.00

SUBTOTAL of Receipts This Page (optional) ► **1304.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Harry Isaman

Mailing Address 2539 Carpenter Street

City State Zip Code
Thousand Oaks CA 91362

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

Name of Employer Retired Occupation Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21703

Amount of Each Receipt this Period
25.00

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

387.00

B. Full Name (Last, First, Middle Initial)
Calvin Johnston

Mailing Address 1103 Country Valley Road

City State Zip Code
Westlake Village CA 91362

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

Name of Employer The Johnston Group Occupation Business Executive

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2008

Transaction ID: SA11AI.21950

Amount of Each Receipt this Period
100.00

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

2100.00

C. Full Name (Last, First, Middle Initial)
Mrs. Catherine Johnston

Mailing Address 1839 Foster Avenue

City State Zip Code
Ventura CA 93001-2335

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

Name of Employer Buccaneer Marine Occupation Administrative Assistant

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 20 / 2008

Transaction ID: SA11AI.21942

Amount of Each Receipt this Period
100.00

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

1150.00

SUBTOTAL of Receipts This Page (optional) ► **225.00**

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

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

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

FOR LINE NUMBER: PAGE 34 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Lammy Johnstone-Kockler

Mailing Address 850 Adobe Creek Road

City Solvang State CA Zip Code 93463

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 23 / 2008
Transaction ID: SA11AI.21753
 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)
Eleanor Kanthack

Mailing Address 3107 Hilltop Drive

City Ventura State CA Zip Code 93003

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 243.00

Date of Receipt 07 / 23 / 2008
Transaction ID: SA11AI.21756
 Amount of Each Receipt this Period 55.00

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

C. Full Name (Last, First, Middle Initial)
Mrs. Elise Kearney

Mailing Address 2828 W. Pacific Coast Hwy.

City Ventura State CA Zip Code 93001

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2800.00

Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.21986
 Amount of Each Receipt this Period 200.00

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

SUBTOTAL of Receipts This Page (optional) ► 1255.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Victor Kerlins
Mailing Address 5012 Hampton Court
City Westminister State CA Zip Code 92683
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 225.00
Date of Receipt 09 / 29 / 2008
Transaction ID: SA11AI.22317
Amount of Each Receipt this Period 75.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
David Lack
Mailing Address P. O. Box 5364
City Montecito State CA Zip Code 93150
FEC ID number of contributing federal political committee. **C**
Name of Employer Lack Construction Occupation Commercial Construction Developer
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 08 / 08 / 2008
Transaction ID: SA11AI.21875
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)
Hon. Robert Lagomarsino
Mailing Address 3040 Solimar Beach Road
City Ventura State CA Zip Code 93001-9755
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2200.00
Date of Receipt 07 / 14 / 2008
Transaction ID: SA11AI.21695
Amount of Each Receipt this Period 50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 1125.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Hon. Robert Lagomarsino

Mailing Address 3040 Solimar Beach Road

City State Zip Code
Ventura CA 93001-9755

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: SA11AI.22135

Amount of Each Receipt this Period

200.00

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

B.

Full Name (Last, First, Middle Initial)
David Landers

Mailing Address 8200 Kerry Road

City State Zip Code
Chevy Chase MD 20815

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

Name of Employer Occupation
Credit Suisse Securities Director, Public Policy

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

Date of Receipt

M M / D D / Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21682

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)
Lynne Dai Landers

Mailing Address 3751 Martz Street

City State Zip Code
Simi Valley CA 93063

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

Name of Employer Occupation
Gold Rush Corp. Administrative Assistant

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1195.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2008

Transaction ID: SA11AI.22080

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) ▶

950.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr David Lee

Mailing Address 526 Primrose Lane

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
Self employed Coast Frost Protection, Inc.

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2008

Transaction ID: SA11AI.22069

Amount of Each Receipt this Period
450.00

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

548.00

B. Full Name (Last, First, Middle Initial)
Helen Lindsey

Mailing Address 4806 Aurora Drive

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
Retired Retired

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 09 / 2008

Transaction ID: SA11AI.21664

Amount of Each Receipt this Period
110.00

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

250.00

C. Full Name (Last, First, Middle Initial)
Mrs. Cynthia Lloyd-Butler

Mailing Address P.O. Box 4007

City State Zip Code
Saticoy CA 93007-4007

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

Name of Employer Occupation
Self-Employed Farmer

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2008

Transaction ID: SA11AI.21946

Amount of Each Receipt this Period
200.00

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

500.00

SUBTOTAL of Receipts This Page (optional) ► **760.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mrs. Cynthia Lloyd-Butler

Mailing Address P.O. Box 4007

City State Zip Code
Saticoy CA 93007-4007

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) ▼

Amount of Each Receipt this Period
100.00

Transaction ID: SA11AI.22123

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

B.

Full Name (Last, First, Middle Initial)
Sherry Lotan

Mailing Address 1629 Vista Oaks Way

City State Zip Code
Westlake Village CA 91361

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

Name of Employer None Occupation Homemaker

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

Amount of Each Receipt this Period
450.00

Transaction ID: SA11AI.21936

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

C.

Full Name (Last, First, Middle Initial)
Mr. Robert MacAlister

Mailing Address 78 Lopaco Court

City State Zip Code
Camarillo CA 93010

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

Name of Employer None Occupation Retired

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

Amount of Each Receipt this Period
55.00

Transaction ID: SA11AI.21691

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

SUBTOTAL of Receipts This Page (optional) ▶ **605.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Bob Majorino

Mailing Address 2860 Thousand Oaks Blvd.

City State Zip Code
Thousand Oaks CA 91362

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

Name of Employer Prudential California Realty
Occupation Owner/Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.21680

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)
Bob Majorino

Mailing Address 2860 Thousand Oaks Blvd.

City State Zip Code
Thousand Oaks CA 91362

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

Name of Employer Prudential California Realty
Occupation Owner/Broker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
07 / 28 / 2008

Transaction ID: SA11AI.21776

Amount of Each Receipt this Period
60.00

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

C.

Full Name (Last, First, Middle Initial)
Leonard Mann

Mailing Address 9650 Calvin Avenue

City State Zip Code
Northridge CA 91324-2109

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

Name of Employer Simi Stow It
Occupation Small Business Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11AI.22327

Amount of Each Receipt this Period
142.50

In-kind - Storage space

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

SUBTOTAL of Receipts This Page (optional) ► **1202.50**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 106
	<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)
Gallegly for Congress

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

Mailing Address 628 St. Andrews Way

City Lompoc State CA Zip Code 93436

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

Name of Employer Sue's Place Occupation Business Owner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 03 / 2008
Transaction ID: SA11AI.21973
 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)
Mr Alex Manos

Mailing Address 2075 Celle Yucca

City Thousand Oaks State CA Zip Code 91360

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

Name of Employer Coldwell Banker Occupation Real Estate

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 615.00

Date of Receipt: 07 / 28 / 2008
Transaction ID: SA11AI.21811
 Amount of Each Receipt this Period: 25.00

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

C. Full Name (Last, First, Middle Initial)
Doneda May

Mailing Address 1642 Castlehill Court

City Westlake Village State CA Zip Code 91361

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 09 / 03 / 2008
Transaction ID: SA11AI.21989
 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) **525.00**

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Guy McCreary

Mailing Address 4167 Bakman Avenue

City State Zip Code
Tulaca Lake CA 91602-3329

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

Name of Employer Occupation
Wedding Investments Management

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

Date of Receipt
MM / DD / YYYY
07 / 28 / 2008

Transaction ID: SA11AI.21786

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Guy McCreary

Mailing Address 4167 Bakman Avenue

City State Zip Code
Tulaca Lake CA 91602-3329

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

Name of Employer Occupation
Wedding Investments Management

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

Date of Receipt
MM / DD / YYYY
09 / 12 / 2008

Transaction ID: SA11AI.22090

Amount of Each Receipt this Period
200.00

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

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

Mailing Address 2411 Pierpont Blvd.

City State Zip Code
Ventura CA 93001-4068

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

Name of Employer Occupation
Los Angeles Superior Court Superior Court Commissioner

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

Date of Receipt
MM / DD / YYYY
07 / 14 / 2008

Transaction ID: SA11AI.21709

Amount of Each Receipt this Period
25.00

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

SUBTOTAL of Receipts This Page (optional) ► **275.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mrs Maria Mendez

Mailing Address 43 E. Vista Hermosa

City State Zip Code
Simi Valley CA 93065

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

Name of Employer Occupation
Self-Employed Assisted Living Povider

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2008

Transaction ID: SA11AI.21772

Amount of Each Receipt this Period
99.00

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

B. Full Name (Last, First, Middle Initial)
William Miller

Mailing Address 12000 Stockton Road

City State Zip Code
Moorpark CA 93021

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

Name of Employer Occupation
Miller & Sons Construction Builder/Rancher

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 27 / 2008

Transaction ID: SA11AI.21962

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)
William Miller

Mailing Address 12000 Stockton Road

City State Zip Code
Moorpark CA 93021

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

Name of Employer Occupation
Miller & Sons Construction Builder/Rancher

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.22096

Amount of Each Receipt this Period
450.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **799.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr Winston Miller

Mailing Address 730 Vista Palacio

City State Zip Code
Camarillo CA 93012

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

Name of Employer None Occupation Retired, US Navy

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

Amount of Each Receipt this Period: 20.00

Transaction ID: SA11AI.21921

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

B. Full Name (Last, First, Middle Initial)
Mr Winston Miller

Mailing Address 730 Vista Palacio

City State Zip Code
Camarillo CA 93012

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

Name of Employer None Occupation Retired, US Navy

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

Amount of Each Receipt this Period: 100.00

Transaction ID: SA11AI.21948

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

C. Full Name (Last, First, Middle Initial)
Lothrop Mittenthal

Mailing Address 240 Los Padres Drive

City State Zip Code
Thousand Oaks CA 91361

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

Name of Employer Custom Cryptography Co. Occupation Cryptographer

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

Amount of Each Receipt this Period: 25.00

Transaction ID: SA11AI.21922

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

SUBTOTAL of Receipts This Page (optional) ► **145.00**

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

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

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

FOR LINE NUMBER: PAGE 44 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Lothrop Mittenenthal

Mailing Address 240 Los Padres Drive

City State Zip Code
Thousand Oaks CA 91361

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

Name of Employer Occupation
Custom Cryptography Co. Cryptographer

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 10 / 2008

Transaction ID: SA11AI.22081

Amount of Each Receipt this Period
25.00

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

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

Mailing Address 525 E. Plaza Drive, #200

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
M. Moats, Inc. Physician

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

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 25 / 2008

Transaction ID: SA11AI.21944

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)
Richard Moerler

Mailing Address 5626 Grey Feather Court

City State Zip Code
Westlake Village CA 91362

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

Name of Employer Occupation
Moerler Property Management Real estate management

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 23 / 2008

Transaction ID: SA11AI.21757

Amount of Each Receipt this Period
55.00

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

SUBTOTAL of Receipts This Page (optional) ► **330.00**

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

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

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

FOR LINE NUMBER: PAGE 45 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Lee Molesworth

Mailing Address 5967 Bridgeview Drive

City State Zip Code
Ventura CA 93003

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

Name of Employer Occupation
None Retired

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

Amount of Each Receipt this Period
300.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21706

Amount of Each Receipt this Period
25.00

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

B. Full Name (Last, First, Middle Initial)
Mr. John Moriarity

Mailing Address 4413 Park Mallorca

City State Zip Code
Calabasas CA 91302

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

Name of Employer Occupation
Moriarity & Associates Attorney

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

Amount of Each Receipt this Period
1860.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21722

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)
Mr. John Moriarity

Mailing Address 4413 Park Mallorca

City State Zip Code
Calabasas CA 91302

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

Name of Employer Occupation
Moriarity & Associates Attorney

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

Amount of Each Receipt this Period
1915.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21728

Amount of Each Receipt this Period
55.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **580.00**

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

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

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

FOR LINE NUMBER: PAGE 46 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. John Moriarity

Mailing Address 4413 Park Mallorca

City State Zip Code
Calabasas CA 91302

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

Name of Employer Moriarity & Associates Occupation Attorney

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: SA11AI.22117

Amount of Each Receipt this Period
270.00

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

B. Full Name (Last, First, Middle Initial)
Mrs Jean Morris

Mailing Address 758 Camden Vista Court

City State Zip Code
Simi Valley CA 93065

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

Name of Employer None Occupation Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2008

Transaction ID: SA11AI.21923

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Gareth Neumann

Mailing Address 315 Vista Del Mar

City State Zip Code
Camarillo CA 93010

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

Name of Employer Automotive Performance Systems Occupation CEO

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2008

Transaction ID: SA11AI.22122

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **470.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 47 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr John Newton

Mailing Address P.O. Box 471

City State Zip Code
Moorpark CA 93020

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

Name of Employer Occupation
Moorpark Advantage Realty Real estate

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

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2008

Transaction ID: SA11AI.22318

Amount of Each Receipt this Period
100.00

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

B. Full Name (Last, First, Middle Initial)
Mr. Glenn Nucci

Mailing Address 7781 Redondo Street

City State Zip Code
Ventura CA 93004

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

Name of Employer Occupation
Nuccis Land Management Management

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 19 / 2008

Transaction ID: SA11AI.21924

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)
Glenda Payne

Mailing Address 4575 Lamplighter Lane

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
Santa Maria Bonita School Teacher

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

Date of Receipt
M M / D D / Y Y Y Y
08 / 08 / 2008

Transaction ID: SA11AI.21884

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) ▶ **600.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 48 / 106
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mr. C. Frank Penrose		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 1790 Lemonwood Drive		Transaction ID: SA11AI.22023
	City Santa Paula	State CA	Zip Code 93060
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer Aurora Casting & Engineering	Occupation Manufacturing	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

B.	Full Name (Last, First, Middle Initial) Claire Peterson		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
	Mailing Address 2219 Goldsmith Avenue		Transaction ID: SA11AI.21716
	City Thousand Oaks	State CA	Zip Code 91360
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
	Name of Employer None	Occupation Retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 303.00		

C.	Full Name (Last, First, Middle Initial) Joan Porteous		Date of Receipt MM / DD / YYYY 09 / 03 / 2008
	Mailing Address 490 La Marina Drive		Transaction ID: SA11AI.22024
	City Camarillo	State CA	Zip Code 93010
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer Dux Sales	Occupation Business woman	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 398.00		

SUBTOTAL of Receipts This Page (optional)	▶	1150.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one) <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	PAGE 49 / 106
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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Linda Prinn		Date of Receipt MM / DD / YYYY 09 / 24 / 2008		
	Mailing Address 3515 Seabreeze		Transaction ID: SA11AI.22291		
	City Corona Del Mar	State CA	Zip Code 92625	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 Homemaker	Occupation Homemaker			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00				

B.	Full Name (Last, First, Middle Initial) Thomas Punch		Date of Receipt MM / DD / YYYY 07 / 28 / 2008		
	Mailing Address 135 N. Ash Street		Transaction ID: SA11AI.21781		
	City Ventura	State CA	Zip Code 93001	Amount of Each Receipt this Period 50.00	
	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 Fresenius Medical	Occupation Sales			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 324.00				

C.	Full Name (Last, First, Middle Initial) Mr Don Putnam		Date of Receipt MM / DD / YYYY 09 / 03 / 2008		
	Mailing Address 764 Camino Manzanaz		Transaction ID: SA11AI.22005		
	City Thousand Oaks	State CA	Zip Code 91360	Amount of Each Receipt this Period 100.00	
	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 None	Occupation Retired			
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00				

SUBTOTAL of Receipts This Page (optional)	1150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 50 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
F. Charles Radaz

Mailing Address 579 St. Andrews Way

City State Zip Code
Lompoc CA 93436

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

Name of Employer Occupation
Lockheed Martin Aerospace Manager

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.21925

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)
Don Regan

Mailing Address 1516 W. Branch Street

City State Zip Code
Arroyo Grande CA 93420

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

Name of Employer Occupation
Regan Clinics, Inc. Audiologist

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.21926

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)
Don Regan

Mailing Address 1516 W. Branch Street

City State Zip Code
Arroyo Grande CA 93420

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

Name of Employer Occupation
Regan Clinics, Inc. Audiologist

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.22097

Amount of Each Receipt this Period
300.00

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

SUBTOTAL of Receipts This Page (optional) ► **1050.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Diane Reichenbach

Mailing Address 1094 N. Country Club Drive

City State Zip Code
Simi Valley AL 93065

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

Name of Employer Occupation
None Homemaker

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

Amount of Each Receipt this Period
390.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 05 / 2008

Transaction ID: SA11AI.22031

Amount of Each Receipt this Period
50.00

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

B. Full Name (Last, First, Middle Initial)
Diane Reichenbach

Mailing Address 1094 N. Country Club Drive

City State Zip Code
Simi Valley AL 93065

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

Name of Employer Occupation
None Homemaker

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

Amount of Each Receipt this Period
590.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 17 / 2008

Transaction ID: SA11AI.22118

Amount of Each Receipt this Period
200.00

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

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

Mailing Address P. O. Box 70489

City State Zip Code
Pasadena CA 91117

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

Name of Employer Occupation
Rusnak Group Automobile dealerships

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

Amount of Each Receipt this Period
2300.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21720

Amount of Each Receipt this Period
2300.00

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

SUBTOTAL of Receipts This Page (optional) ► **2550.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. David Sadler

Mailing Address P.O. Box 630061

City State Zip Code
Simi Valley CA 93063-0061

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 786.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 21 / 2008

Transaction ID: SA11AI.21735

Amount of Each Receipt this Period

50.00

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

B.

Full Name (Last, First, Middle Initial)
Mr. David Sadler

Mailing Address P.O. Box 630061

City State Zip Code
Simi Valley CA 93063-0061

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1236.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2008

Transaction ID: SA11AI.21975

Amount of Each Receipt this Period

450.00

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

C.

Full Name (Last, First, Middle Initial)
O.L. Schimmel

Mailing Address P. O. Box 517

City State Zip Code
Port Hueneme CA 93041

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

Name of Employer Retired Occupation Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 223.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 23 / 2008

Transaction ID: SA11AI.21760

Amount of Each Receipt this Period

49.00

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

SUBTOTAL of Receipts This Page (optional)

549.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 53 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
O.L. Schimmel

Mailing Address P. O. Box 517

City State Zip Code
Port Hueneme CA 93041

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period: 25.00

Transaction ID: SA11AI.22290

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

B. Full Name (Last, First, Middle Initial)
John Schneider

Mailing Address 139 Feliz Drive

City State Zip Code
Oak View CA 93022

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

Name of Employer Retired Occupation Retired

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

Amount of Each Receipt this Period: 200.00

Transaction ID: SA11AI.22320

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

C. Full Name (Last, First, Middle Initial)
Mr William Seaver

Mailing Address 63 La Crescenta Drive

City State Zip Code
Camarillo CA 93010

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

Name of Employer None Occupation Retired

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

Amount of Each Receipt this Period: 50.00

Transaction ID: SA11AI.21665

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

SUBTOTAL of Receipts This Page (optional) ► **275.00**

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

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

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

FOR LINE NUMBER: PAGE 54 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Richard Selfridge
Mailing Address 320 Valley Vista Drive
City Camarillo State CA Zip Code 93010
FEC ID number of contributing federal political committee. **C**
Name of Employer Retired Occupation Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 450.00
Date of Receipt 08 / 19 / 2008
Transaction ID: SA11AI.21928
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)
Patrick Sheehy
Mailing Address 1705 Chancellor Street
City Santa Maria State CA Zip Code 93455
FEC ID number of contributing federal political committee. **C**
Name of Employer Los Padres Berry Farms Occupation Farmer
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.21976
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)
Dr Dennis Shepard
Mailing Address 1414 E. Main Street
City Santa Maria State CA Zip Code 93454
FEC ID number of contributing federal political committee. **C**
Name of Employer Shepard Eye Center Occupation Eye Physician & Surgeon
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00
Date of Receipt 08 / 04 / 2008
Transaction ID: SA11AI.21851
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) ► 2250.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mark J. Smith

Mailing Address 1136 W. McCoy Lane

City State Zip Code
Santa Maria CA 93455

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

Name of Employer Occupation
Mark J. Smith Contracting General Building Contractor

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

Date of Receipt

M M / D D / Y Y Y Y
0 8 / 0 8 / 2 0 0 8

Transaction ID: SA11AI.21877

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)
Nancy Smith

Mailing Address 2631 Oakshore Drive

City State Zip Code
Westlake Village CA 91361

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

Name of Employer Occupation
Retired Retired

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 425.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 2 / 2 0 0 8

Transaction ID: SA11AI.22086

Amount of Each Receipt this Period

300.00

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

C.

Full Name (Last, First, Middle Initial)
Mr. James Snell

Mailing Address 1435 Calle Lorano

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation
Video Products Group Engineer

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1388.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.21773

Amount of Each Receipt this Period

99.00

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

SUBTOTAL of Receipts This Page (optional)

1399.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 106
	(check only one)
<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"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mr. James Snell		Date of Receipt																				
	Mailing Address 1435 Calle Lorano		<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>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	9		1	2		2	0	0	8													
	City	State	Zip Code																				
Camarillo	CA	93010																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22091																					
Name of Employer Video Products Group		Occupation Engineer	Amount of Each Receipt this Period																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"><tr><td>300.00</td></tr></table>	300.00																			
300.00																							
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
		<table border="1"><tr><td>1688.00</td></tr></table>	1688.00																				
1688.00																							

B.	Full Name (Last, First, Middle Initial) Mr. Leonard Somdahl		Date of Receipt																				
	Mailing Address 1810 O'Leary Court		<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>7</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	8		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	7		2	8		2	0	0	8													
	City	State	Zip Code																				
Newbury Park	CA	91320																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21774																					
Name of Employer Attorney and Airtel Advisors		Occupation Consultant	Amount of Each Receipt this Period																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"><tr><td>75.00</td></tr></table>	75.00																			
75.00																							
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
		<table border="1"><tr><td>483.00</td></tr></table>	483.00																				
483.00																							

C.	Full Name (Last, First, Middle Initial) Lanny Stableford		Date of Receipt																				
	Mailing Address 575 Refugio Canyon Road		<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>8</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	9		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	8		1	9		2	0	0	8													
	City	State	Zip Code																				
Goleta	CA	93117																					
FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21929																					
Name of Employer Aguajitos Ranch		Occupation Avocado Grower	Amount of Each Receipt this Period																				
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<table border="1"><tr><td>100.00</td></tr></table>	100.00																			
100.00																							
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)																				
		<table border="1"><tr><td>300.00</td></tr></table>	300.00																				
300.00																							

SUBTOTAL of Receipts This Page (optional)	<table border="1"><tr><td>475.00</td></tr></table>	475.00
475.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d (check only one)	PAGE 57 / 106
	<input checked="" 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)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Debra Steinhardt

Mailing Address 17732 Melvin Lane

City Northridge State CA Zip Code 91325

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 10 / 2008

Transaction ID: SA11AI.22076

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)
Bonnie Sutton

Mailing Address P. O. Box 217

City Newbury Park State CA Zip Code 91319

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 09 / 08 / 2008

Transaction ID: SA11AI.22059

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)
Mrs. Mary Tapie

Mailing Address 369 Somerset Circle

City Thousand Oaks State CA Zip Code 91360

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

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 238.00

Date of Receipt 07 / 28 / 2008

Transaction ID: SA11AI.21789

Amount of Each Receipt this Period 50.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **700.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 106
	<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Allan Teixeira		Date of Receipt
	Mailing Address 2600 Bonita Lateral Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 05 / 2008
	City	State	Zip Code
	Santa Maria	CA	93454
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22032
Name of Employer Teixeira Brothers		Occupation Farmer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 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) David Timms		Date of Receipt
	Mailing Address P. O. Box 1385		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 07 / 28 / 2008
	City	State	Zip Code
	Simi Valley	CA	93062
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.21809
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 25.00
			<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) Mr Donn Tognazzini		Date of Receipt
	Mailing Address P.O. Box 599		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 08 / 2008
	City	State	Zip Code
	Los Olivos	CA	93441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.22054
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1325.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 59 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Ted Tuschka
Mailing Address 1367 Camden Lane
City State Zip Code
Ventura CA 93001
FEC ID number of contributing federal political committee. **C**
Name of Employer Community Memorial Hospital Occupation Medical doctor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 300.00
Date of Receipt 07 / 28 / 2008
Transaction ID: SA11AI.21768
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Ted Tuschka
Mailing Address 1367 Camden Lane
City State Zip Code
Ventura CA 93001
FEC ID number of contributing federal political committee. **C**
Name of Employer Community Memorial Hospital Occupation Medical doctor
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 09 / 03 / 2008
Transaction ID: SA11AI.22007
Amount of Each Receipt this Period 200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr Frank Visco
Mailing Address P.O. Box 5570
City State Zip Code
Lancaster CA 93539-5570
FEC ID number of contributing federal political committee. **C**
Name of Employer Antelope Valley Insurance Occupation Insurance industry
Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 2200.00
Date of Receipt 09 / 08 / 2008
Transaction ID: SA11AI.22053
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) ► 1400.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 106

(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Batta Vujicic

Mailing Address 31826 Village Center Road

City State Zip Code
Westlake Village CA 91361

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

Name of Employer Prime Associates Occupation President

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
850.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2008

Transaction ID: SA11AI.22322

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)
Mr Tom Wachtell

Mailing Address 10883 Oak Knoll Road

City State Zip Code
Ojai CA 93023

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

Name of Employer Oak Knoll Ranch Occupation Investor/Farmer

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2008

Transaction ID: SA11AI.21992

Amount of Each Receipt this Period
200.00

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

C.

Full Name (Last, First, Middle Initial)
Mary Walsh

Mailing Address 5240 Alamo

City State Zip Code
Simi Valley CA 93063

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

Name of Employer None Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 27 / 2008

Transaction ID: SA11AI.21963

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **550.00**

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

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

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

FOR LINE NUMBER: PAGE 61 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Stephany Walsh
Mailing Address 4025 E. Skelton Canyon Circle
City State Zip Code
Westlake Village CA 92362
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Homemaker Homemaker
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 339.00
Date of Receipt
M M / D D / Y Y Y Y
09 / 08 / 2008
Transaction ID: SA11AI.22064
Amount of Each Receipt this Period
50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Mr. Edmund Warren
Mailing Address P.O. Box 2186
City State Zip Code
Ventura CA 93002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2100.00
Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2008
Transaction ID: SA11AI.21788
Amount of Each Receipt this Period
50.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Mr. Edmund Warren
Mailing Address P.O. Box 2186
City State Zip Code
Ventura CA 93002
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Retired Retired
Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2300.00
Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2008
Transaction ID: SA11AI.22102
Amount of Each Receipt this Period
200.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► 300.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 62 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr. Donald Waunch

Mailing Address 2119 Via Montecito

City State Zip Code
Camarillo CA 93012

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

Name of Employer Occupation
City of Camarillo Council Member

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

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

Transaction ID: SA11AI.21938

Amount of Each Receipt this Period
225.00

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

424.00

B. Full Name (Last, First, Middle Initial)
Mr. David Weblemoe

Mailing Address 903 Vallejo Avenue

City State Zip Code
Simi Valley CA 93065-5662

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

Name of Employer Occupation
Comptek PRB Associates Engineer

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.21945

Amount of Each Receipt this Period
225.00

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

1445.00

C. Full Name (Last, First, Middle Initial)
Ms Toni Webster

Mailing Address 4498 Donlon Road

City State Zip Code
Somis CA 93066-9710

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

Name of Employer Occupation
None Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.21676

Amount of Each Receipt this Period
25.00

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

313.00

SUBTOTAL of Receipts This Page (optional) ► **475.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mr Dave White

Mailing Address P.O. Box 6045

City State Zip Code
Oxnard CA 93031

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

Name of Employer Occupation
Expo Development Commercial Developer

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 17 / 2008

Transaction ID: SA11AI.22110

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)
Montgomery Winkler

Mailing Address 1420 Grimes Canyon Road

City State Zip Code
Fillmore CA 93015

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

Name of Employer Occupation
Self Employed Rancher

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

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 14 / 2008

Transaction ID: SA11AI.21707

Amount of Each Receipt this Period
25.00

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

C. Full Name (Last, First, Middle Initial)
Montgomery Winkler

Mailing Address 1420 Grimes Canyon Road

City State Zip Code
Fillmore CA 93015

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

Name of Employer Occupation
Self Employed Rancher

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

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 15 / 2008

Transaction ID: SA11AI.22104

Amount of Each Receipt this Period
100.00

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

SUBTOTAL of Receipts This Page (optional) ► **1125.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 106
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mrs Huei-Chu Wu

Mailing Address 68 Patera Drive

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation
None Homemaker

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.22323

Amount of Each Receipt this Period
200.00

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

1930.00

B. Full Name (Last, First, Middle Initial)
Stanley Young

Mailing Address 1978 Calle Yucca

City State Zip Code
Thousand Oaks CA 91360

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

Name of Employer Occupation
PolyPak of America Vice President

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.21949

Amount of Each Receipt this Period
100.00

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

300.00

C. Full Name (Last, First, Middle Initial)
Linda Zaruka

Mailing Address 2067 Alborada Drive

City State Zip Code
Camarillo CA 93010

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

Name of Employer Occupation
Wedgewood Banquet Center Catering

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

Date of Receipt
M M / D D / Y Y Y Y Y
0 9 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.22042

Amount of Each Receipt this Period
100.00

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

399.00

SUBTOTAL of Receipts This Page (optional) ▶ **400.00**

TOTAL This Period (last page this line number only) ▶ **42197.00**

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

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

FOR LINE NUMBER: PAGE 65 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN HOTEL AND LODGING ASSOCIATION PAC

Mailing Address 1201 New York Avenue NW
Sixth Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00001198

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2008
Transaction ID: SA11C.22293
 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)
ASSOCIATED GENERAL CONTRACTORS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2300 Wilson Blvd.
Suite 400

City Arlington State VA Zip Code 22201

FEC ID number of contributing federal political committee. **C** C00082917

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 22 / 2008
Transaction ID: SA11C.22125
 Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
AT&T INC. FEDERAL POLITICAL ACTION COMMITTEE (AT&T FEDERAL PAC)

Mailing Address 175 E. Houston Street
Room 7-A-50

City San Antonio State TX Zip Code 78205

FEC ID number of contributing federal political committee. **C** C00109017

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

Date of Receipt 09 / 26 / 2008
Transaction ID: SA11C.22292
 Amount of Each Receipt this Period 3000.00

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
MCDONALDS CORPORATION POLITICAL ACTION COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2008

Mailing Address ONE MCDONALDS PLAZA

Transaction ID: SA11C.21652

City OAK BROOK State IL Zip Code 60523

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00063164

Name of Employer Occupation

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

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

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2008

Mailing Address 2901 Telestar Court

Transaction ID: SA11C.22284

City Falls Church State VA Zip Code 22042

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00

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

C. Full Name (Last, First, Middle Initial)
WEYERHAEUSER COMPANY POLITICAL ACTION COMMITTEE

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 22 / 2008

Mailing Address CH1M31

Transaction ID: SA11C.22126

City Federal Way State WA Zip Code 98063

Amount of Each Receipt this Period
2000.00

FEC ID number of contributing federal political committee. **C** C00007948

Name of Employer Occupation

Receipt For: 2008 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 4000.00

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

SUBTOTAL of Receipts This Page (optional) ► 4000.00

TOTAL This Period (last page this line number only) ► 10000.00

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

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

FOR LINE NUMBER: PAGE 67 / 106
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Merrill Lynch

Mailing Address 400 Esplanade Drive

City State Zip Code
Oxnard CA 93030

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
50264.03

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: SA15.22329

Amount of Each Receipt this Period
2986.68

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

B. Full Name (Last, First, Middle Initial)
Washington Mutual Bank

Mailing Address 660 East Los Angeles Avenue

City State Zip Code
Simi Valley CA 93065

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3153.72

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: SA15.22330

Amount of Each Receipt this Period
105.16

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

SUBTOTAL of Receipts This Page (optional)	3091.84
TOTAL This Period (last page this line number only)	3091.84

**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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Aaron Thomas Printing</p> <p>Mailing Address 9260 Owensmouth Avenue</p> <p>City Chatsworth State CA Zip Code 91311</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21837</p> <p>Date of Disbursement 07 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 148.34</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Aaron Thomas Printing</p> <p>Mailing Address 9260 Owensmouth Avenue</p> <p>City Chatsworth State CA Zip Code 91311</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22142</p> <p>Date of Disbursement 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 3325.82</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) ACN Communications</p> <p>Mailing Address P.O. Box 742546</p> <p>City Cncinati State OH Zip Code 45274-2546</p> <p>Purpose of Disbursement Telephone</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.21841</p> <p>Date of Disbursement 07 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 45.01</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3519.17

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) ACN Communications Mailing Address P.O. Box 742546 City Cincinati State OH Zip Code 45274-2546 Purpose of Disbursement Telephone service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22141 Date of Disbursement 08 / 11 / 2008 Amount of Each Disbursement this Period 65.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) ACN Communications Mailing Address P.O. Box 742546 City Cincinati State OH Zip Code 45274-2546 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22172 Date of Disbursement 09 / 08 / 2008 Amount of Each Disbursement this Period 52.36 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) ACN Communications Mailing Address P.O. Box 742546 City Cincinati State OH Zip Code 45274-2546 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22182 Date of Disbursement 09 / 08 / 2008 Amount of Each Disbursement this Period 33.19 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	151.14
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Addamo Vineyards

Mailing Address 400 E. Clark Avenue

City Orcutt State CA Zip Code 93455

Purpose of Disbursement
Fundraiser

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22261
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

4192.80

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

B.

Full Name (Last, First, Middle Initial)
Kel Aiken

Mailing Address 75 W. Easy Street

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
In-kind - Storage space

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22326
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

142.50

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

C.

Full Name (Last, First, Middle Initial)
Albertson's

Mailing Address Olson Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Dinner meeting

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District: 07-23-08

Transaction ID: SB17.21835
Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

107.49

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

SUBTOTAL of Disbursements This Page (optional) ▶

4442.79

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) American Express Mailing Address P.O. Box 0001 City Los Angeles State CA Zip Code 90096-0001 Purpose of Disbursement Credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21815 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 1480.45 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Costco Mailing Address 2660 Park Center Drive City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Office equipment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21815.1 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 733.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Marie Calender's Mailing Address Easy Street City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Volunteer lunch Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21815.2 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 24.22 <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) ▶	1480.45
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Red Lobster

Mailing Address 1740 Ventura Blvd.

City Oxnard State CA Zip Code 93030

Purpose of Disbursement
Election night dinner

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21815.3
Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

270.63

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
For Printing

Mailing Address 1957 Duncan

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Printing

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21815.4
Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

328.46

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Bluefin Grill

Mailing Address 1230 Madera Raod

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Volunteer lunch

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21815.5
Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

22.95

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) ▶

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Amy's Hallmark	Transaction ID: SB17.21815.6 Date of Disbursement 07 / 09 / 2008
	Mailing Address 1555 Simi Town Center Way	Amount of Each Disbursement this Period 16.87
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Cards	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) American Express	Transaction ID: SB17.21860 Date of Disbursement 08 / 01 / 2008
	Mailing Address P.O. Box 0001	Amount of Each Disbursement this Period 252.95
	City Los Angeles State CA Zip Code 90096-0001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Credit card payment	
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: SB17.21860.0 Date of Disbursement 08 / 01 / 2008
	Mailing Address 2660 Park Center Drive	Amount of Each Disbursement this Period 193.49
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Office supplies	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	252.95
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Marie Calender's

Mailing Address Easy Street

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Volunteer lunch

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21860.3
Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

12.11

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Bluefin Grill

Mailing Address 1230 Madera Raod

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Volunteer lunch

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21860.4
Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

19.20

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
American Express

Mailing Address P.O. Box 0001

City Los Angeles State CA Zip Code 90096-0001

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22173
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

174.83

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

SUBTOTAL of Disbursements This Page (optional) ▶

174.83

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Bluefin Grill	Transaction ID: SB17.22173.1 Date of Disbursement 09 / 08 / 2008
	Mailing Address 1230 Madera Raod	Amount of Each Disbursement this Period 27.78
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Volunteer lunch Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: SB17.22173.2 Date of Disbursement 09 / 08 / 2008
	Mailing Address 2660 Park Center Drive	Amount of Each Disbursement this Period 41.31
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Marie Calender's	Transaction ID: SB17.22173.4 Date of Disbursement 09 / 08 / 2008
	Mailing Address Easy Street	Amount of Each Disbursement this Period 24.22
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Volunteer lunch Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) American Express <hr/> Mailing Address P.O. Box 0001 <hr/> City Los Angeles State CA Zip Code 90096-0001 <hr/> Purpose of Disbursement Credit card payment Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22264 Date of Disbursement 09 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 406.76 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bluefin Grill <hr/> Mailing Address 1230 Madera Raod <hr/> City Simi Valley State CA Zip Code 93065 <hr/> Purpose of Disbursement Volunteer lunch Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22264.0 Date of Disbursement 09 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 23.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Home Depot <hr/> Mailing Address 575 Cochran Street <hr/> City Simi Valley State VT Zip Code 93065 <hr/> Purpose of Disbursement Sign supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22264.1 Date of Disbursement 09 / 29 / 2008 <hr/> Amount of Each Disbursement this Period 48.20 <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) ▶

406.76

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

406.76

**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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Marie Calender's	Transaction ID: SB17.22264.2 Date of Disbursement 09 / 29 / 2008
	Mailing Address Easy Street	Amount of Each Disbursement this Period 55.91
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Volunteer meals Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Costco	Transaction ID: SB17.22264.4 Date of Disbursement 09 / 29 / 2008
	Mailing Address 2660 Park Center Drive	Amount of Each Disbursement this Period 196.68
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Assets Management	Transaction ID: SB17.21868 Date of Disbursement 08 / 04 / 2008
	Mailing Address 805 Los Angeles Avenue	Amount of Each Disbursement this Period 750.00
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Rent Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	750.00
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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Assets Management</p> <p>Mailing Address 805 Los Angeles Avenue</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22165</p> <p>Date of Disbursement 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 750.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Assets Management</p> <p>Mailing Address 805 Los Angeles Avenue</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22228</p> <p>Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 334.51</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Assets Management</p> <p>Mailing Address 805 Los Angeles Avenue</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Office space</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22278</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1684.51

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 79075 City Phoenix State AZ Zip Code 85062-9075 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.21840 Date of Disbursement 07 / 23 / 2008 Amount of Each Disbursement this Period 181.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 79075 City Phoenix State AZ Zip Code 85062-9075 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.21842 Date of Disbursement 07 / 23 / 2008 Amount of Each Disbursement this Period 286.92 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) AT&T Mailing Address P.O. Box 79075 City Phoenix State AZ Zip Code 85062-9075 Purpose of Disbursement Telephone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.22157 Date of Disbursement 08 / 19 / 2008 Amount of Each Disbursement this Period 160.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	628.82
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: SB17.22158
Date of Disbursement

Mailing Address P.O. Box 79075

/ /

City State Zip Code
Phoeniz AZ 85062-9075

Amount of Each Disbursement this Period

Purpose of Disbursement
Telephone

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: SB17.22223
Date of Disbursement

Mailing Address P.O. Box 79075

/ /

City State Zip Code
Phoeniz AZ 85062-9075

Amount of Each Disbursement this Period

Purpose of Disbursement
Telephone

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: SB17.22224
Date of Disbursement

Mailing Address P.O. Box 79075

/ /

City State Zip Code
Phoeniz AZ 85062-9075

Amount of Each Disbursement this Period

Purpose of Disbursement
Telephone

Category/
Type

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

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Bansbach, Mary <hr/> Mailing Address 3174 Evelyn Avenue <hr/> City Simi Valley State CA Zip Code 96063 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21824 Date of Disbursement 07 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Bansbach, Mary <hr/> Mailing Address 3174 Evelyn Avenue <hr/> City Simi Valley State CA Zip Code 96063 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21872 Date of Disbursement 08 / 04 / 2008 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Bansbach, Mary <hr/> Mailing Address 3174 Evelyn Avenue <hr/> City Simi Valley State CA Zip Code 96063 <hr/> Purpose of Disbursement Wages Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22163 Date of Disbursement 08 / 25 / 2008 <hr/> Amount of Each Disbursement this Period 1750.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	5250.00
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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Bansbach, Mary</p> <p>Mailing Address 3174 Evelyn Avenue</p> <p>City Simi Valley State CA Zip Code 96063</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22275</p> <p>Date of Disbursement 09 / 30 / 2008</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>B. Full Name (Last, First, Middle Initial) Bansbach, Mary</p> <p>Mailing Address 3174 Evelyn Avenue</p> <p>City Simi Valley State CA Zip Code 96063</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22281</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 311.16</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Smart and Final</p> <p>Mailing Address 1856 Erringer Road</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Fundraiser food & supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22281.0</p> <p>Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 280.83</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2061.16

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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
California Vote by Mail

Mailing Address 705-2 E. Bidwell Street

City Folsom State CA Zip Code 95630

Purpose of Disbursement
Voter guide

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22233
Date of Disbursement

09 / 24 / 2008

Amount of Each Disbursement this Period

250.00

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

B.

Full Name (Last, First, Middle Initial)
California Voter Guide

Mailing Address 1954 W. Carson Street

City Torrance State CA Zip Code 90501

Purpose of Disbursement
State mailer

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22227
Date of Disbursement

09 / 23 / 2008

Amount of Each Disbursement this Period

2000.00

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

C.

Full Name (Last, First, Middle Initial)
Chase Card Service

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21829
Date of Disbursement

07 / 23 / 2008

Amount of Each Disbursement this Period

2961.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

5211.00

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Northwest Airlines Mailing Address 7500 Airline Drive City Minneapolis State MN Zip Code 55450 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21829.0 Date of Disbursement 07 / 23 / 2008 Amount of Each Disbursement this Period 654.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Aaron Thomas Printing Mailing Address 9260 Owensmouth Avenue City Chatsworth State CA Zip Code 91311 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21829.2 Date of Disbursement 07 / 23 / 2008 Amount of Each Disbursement this Period 2179.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Chase Card Service Mailing Address P.O. Box 94014 City Palatine State IL Zip Code 60094-4014 Purpose of Disbursement Credit card payment Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22143 Date of Disbursement 08 / 18 / 2008 Amount of Each Disbursement this Period 177.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	177.59
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Chase Card Service

Transaction ID: SB17.22147
Date of Disbursement

Mailing Address P.O. Box 94014

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	0	8

City Palatine State IL Zip Code 60094-4014

Amount of Each Disbursement this Period

108.19

Purpose of Disbursement
Credit card payment

--

Candidate Name

--

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Ronald Reagan Presidential Library

Transaction ID: SB17.22147.0
Date of Disbursement

Mailing Address Presidential Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	8		2	0	0	8

City Simi Valley State CA Zip Code 93065

Amount of Each Disbursement this Period

66.33

Purpose of Disbursement
Books

--

Candidate Name

--

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Chase Card Service

Transaction ID: SB17.22219
Date of Disbursement

Mailing Address P.O. Box 94014

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	9		2	0	0	8

City Palatine State IL Zip Code 60094-4014

Amount of Each Disbursement this Period

119.26

Purpose of Disbursement
Credit card payment

--

Candidate Name

--

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

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

227.45

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

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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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Home Depot</p> <p>Mailing Address 575 Cochran Street</p> <p>City Simi Valley State VT Zip Code 93065</p> <p>Purpose of Disbursement Sign supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22219.0</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 22.80</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. Full Name (Last, First, Middle Initial) Chase Card Service</p> <p>Mailing Address P.O. Box 94014</p> <p>City Palatine State IL Zip Code 60094-4014</p> <p>Purpose of Disbursement Credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22244</p> <p>Date of Disbursement 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 3681.17</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) House Gift Shop</p> <p>Mailing Address B 218 Longworth HOB</p> <p>City Washington State DC Zip Code 20515</p> <p>Purpose of Disbursement Gifts</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22244.0</p> <p>Date of Disbursement 09 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 232.81</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ►

3681.17

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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Sheraton Hotels

Mailing Address 7800 Normandale Blvd.

City State Zip Code
Minneapolis MN 55439

Purpose of Disbursement
Convention lodging

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22244.6
Date of Disbursement

09 / 26 / 2008

Amount of Each Disbursement this Period

2965.41

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Circle K

Mailing Address 510 E. Los Angeles Avenue

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Sign crew fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22263
Date of Disbursement

09 / 29 / 2008

Amount of Each Disbursement this Period

60.00

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

C.

Full Name (Last, First, Middle Initial)
Citi Card

Mailing Address P.O. Box 6415

City State Zip Code
The Lakes NV 88901-6415

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21856
Date of Disbursement

08 / 01 / 2008

Amount of Each Disbursement this Period

253.91

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

SUBTOTAL of Disbursements This Page (optional) ▶

313.91

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Symantec	Transaction ID: SB17.21856.0 Date of Disbursement 08 / 01 / 2008
	Mailing Address 20330 Stevens Creek Blvd.	Amount of Each Disbursement this Period 89.98
	City Cupertino State CA Zip Code 95014-2132	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Computer software Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Citi Card	Transaction ID: SB17.22154 Date of Disbursement 08 / 18 / 2008
	Mailing Address P.O. Box 6415	Amount of Each Disbursement this Period 212.30
	City The Lakes State NV Zip Code 88901-6415	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Credit card payment Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Redfish	Transaction ID: SB17.22154.0 Date of Disbursement 08 / 18 / 2008
	Mailing Address 1555 Simi Town Center	Amount of Each Disbursement this Period 148.70
	City Simi Valley State CA Zip Code 93065	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Dinner meeting Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	▶	212.30
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)
Gallegly for Congress

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bluefin Grill</p> <p>Mailing Address 1230 Madera Raod</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Luncheon meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22154.1</p> <p>Date of Disbursement 08 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 63.60</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.</p> <p>Full Name (Last, First, Middle Initial) Citi Card</p> <p>Mailing Address P.O. Box 6415</p> <p>City The Lakes State NV Zip Code 88901-6415</p> <p>Purpose of Disbursement Credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22206</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 644.12</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Hertz</p> <p>Mailing Address 4300 Glumack Drive</p> <p>City Minneapolis State MN Zip Code 55437</p> <p>Purpose of Disbursement Car rental</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22206.4</p> <p>Date of Disbursement 09 / 19 / 2008</p> <p>Amount of Each Disbursement this Period 363.40</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>644.12</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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) Continuing the Republican Revolution</p> <p>Mailing Address 1300 Bristol Street Suite 100</p> <p>City Newport Beach State CA Zip Code 92660</p> <p>Purpose of Disbursement State Mailer</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22226 Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) COP's Voter Guide</p> <p>Mailing Address 705-2 E. Bidwell Street</p> <p>City Folsom State CA Zip Code 95830</p> <p>Purpose of Disbursement Voter guide</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22232 Date of Disbursement 09 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Dazzo Auto Detailing</p> <p>Mailing Address 2828 Cochran Street #161</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Firetruck washing</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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.22193 Date of Disbursement 09 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 60.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

810.00

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Employment Dev. Dept. Mailing Address P.O. Box 826880 City Sacramento State CA Zip Code 94280-0001 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21827 Date of Disbursement 07 / 09 / 2008 Amount of Each Disbursement this Period 1938.84 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Mrs. Sophie Estala Mailing Address 3636 Walnut Street City Simi Valley State CA Zip Code 93063 Purpose of Disbursement Office maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21869 Date of Disbursement 08 / 04 / 2008 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Mrs. Sophie Estala Mailing Address 3636 Walnut Street City Simi Valley State CA Zip Code 93063 Purpose of Disbursement Office maintenance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22166 Date of Disbursement 08 / 25 / 2008 Amount of Each Disbursement this Period 100.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶	2138.84
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Mrs. Sophie Estala <hr/> Mailing Address 3636 Walnut Street <hr/> City Simi Valley State CA Zip Code 93063 <hr/> Purpose of Disbursement Office maintenance Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.22279 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Federal Express <hr/> Mailing Address P.O. Box 1140 <hr/> City Memphis State TN Zip Code 38101-1140 <hr/> Purpose of Disbursement Mailing Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.22159 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 32.26 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Federal Express <hr/> Mailing Address P.O. Box 1140 <hr/> City Memphis State TN Zip Code 38101-1140 <hr/> Purpose of Disbursement Shipping Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB17.22274 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 135.65 <hr/> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	267.91
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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Janice Gallegly	Transaction ID: SB17.21825 Date of Disbursement 07 / 09 / 2008
	Mailing Address P.O. Box 940001	
	City Simi Valley State CA Zip Code 93094-0001	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Salary 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Janice Gallegly	Transaction ID: SB17.21873 Date of Disbursement 08 / 04 / 2008
	Mailing Address P.O. Box 940001	
	City Simi Valley State CA Zip Code 93094-0001	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Salary 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Janice Gallegly	Transaction ID: SB17.22164 Date of Disbursement 08 / 25 / 2008
	Mailing Address P.O. Box 940001	
	City Simi Valley State CA Zip Code 93094-0001	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Wages 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 type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6600.00
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Janice Gallegly

Mailing Address P.O. Box 940001

City State Zip Code
Simi Valley CA 93094-0001

Purpose of Disbursement
Wages

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22276
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

2200.00

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

B.

Full Name (Last, First, Middle Initial)
Leonard Mann

Mailing Address 9650 Calvin Avenue

City State Zip Code
Northridge CA 91324-2109

Purpose of Disbursement
In-kind - Storage space

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22328
Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

142.50

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

C.

Full Name (Last, First, Middle Initial)
Morgan, Meredith & Associates

Mailing Address 3351 Brookfield Corporate # 200

City State Zip Code
Chantilly VA 20515-1652

Purpose of Disbursement
Fundraising

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21823
Date of Disbursement

07 / 09 / 2008

Amount of Each Disbursement this Period

500.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2842.50

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Steven Pascone Mailing Address 1004 Hendrix Avenue City Thousand Oaks State CA Zip Code 91360 Purpose of Disbursement Signs Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22189 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8 Amount of Each Disbursement this Period 205.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Mr. Tom Pfeifer Mailing Address 8209 Smithfield Avenue City Springfield State VA Zip Code 22152 Purpose of Disbursement Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21828 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Precision Roller Mailing Address 2102 W. Quail City Phoenix State AZ Zip Code 85027 Purpose of Disbursement Toner cartridges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22260 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 8 Amount of Each Disbursement this Period 372.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	1077.00
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)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial) Beau Sasson <hr/> Mailing Address 1390 Norman Avenue <hr/> City Thousand Oaks State CA Zip Code 91360 <hr/> Purpose of Disbursement Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22188 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 205.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) Beau Sasson <hr/> Mailing Address 1390 Norman Avenue <hr/> City Thousand Oaks State CA Zip Code 91360 <hr/> Purpose of Disbursement Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22191 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 8
	Amount of Each Disbursement this Period 60.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) Beau Sasson <hr/> Mailing Address 1390 Norman Avenue <hr/> City Thousand Oaks State CA Zip Code 91360 <hr/> Purpose of Disbursement Reimbursement travel Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22201 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 8
	Amount of Each Disbursement this Period 95.59 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	360.59
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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Circle K

Mailing Address 510 E. Los Angeles Avenue

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Fuel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22201.1
Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

17.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Beau Sasson

Mailing Address 1390 Norman Avenue

City State Zip Code
Thousand Oaks CA 91360

Purpose of Disbursement
Signs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22205
Date of Disbursement

09 / 19 / 2008

Amount of Each Disbursement this Period

80.00

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

C.

Full Name (Last, First, Middle Initial)
Beau Sasson

Mailing Address 1390 Norman Avenue

City State Zip Code
Thousand Oaks CA 91360

Purpose of Disbursement
Signs

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22242
Date of Disbursement

09 / 25 / 2008

Amount of Each Disbursement this Period

180.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

260.00

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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Sheraton Hotels

Mailing Address 7800 Normandale Blvd.

City State Zip Code
Minneapolis MN 55439

Purpose of Disbursement
Convention deposit

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22170
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

800.00

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

B.

Full Name (Last, First, Middle Initial)
Simi Stow it

Mailing Address 75 W. Easy Street

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.21871
Date of Disbursement

08 / 04 / 2008

Amount of Each Disbursement this Period

86.00

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

C.

Full Name (Last, First, Middle Initial)
Simi Stow it

Mailing Address 75 W. Easy Street

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Storage

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.22167
Date of Disbursement

08 / 25 / 2008

Amount of Each Disbursement this Period

86.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

972.00

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Simi Stow it <hr/> Mailing Address 75 W. Easy Street <hr/> City Simi Valley State CA Zip Code 93065 <hr/> Purpose of Disbursement Storage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22280 Date of Disbursement 09 / 30 / 2008 <hr/> Amount of Each Disbursement this Period 86.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Ben Smith <hr/> Mailing Address 200 N. McClelland <hr/> City Santa Maria State CA Zip Code 93454 <hr/> Purpose of Disbursement Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22199 Date of Disbursement 09 / 19 / 2008 <hr/> Amount of Each Disbursement this Period 125.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Spanish Hills Country Club <hr/> Mailing Address 999 Crestview Avenue <hr/> City Camarillo State CA Zip Code 93010 <hr/> Purpose of Disbursement Breakfast meeting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21846 Date of Disbursement 07 / 26 / 2008 <hr/> Amount of Each Disbursement this Period 3509.22 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

3720.22

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 100 / 106

<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) State Farm Insurance Mailing Address 31303 Agoura Road City Westlake Village State CA Zip Code 91363 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22192 Date of Disbursement 09 / 12 / 2008 Amount of Each Disbursement this Period 531.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Time Warner Mailing Address 485 East Street City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Internet service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21836 Date of Disbursement 07 / 23 / 2008 Amount of Each Disbursement this Period 69.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Time Warner Mailing Address 485 East Street City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Internet provider Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22140 Date of Disbursement 08 / 12 / 2008 Amount of Each Disbursement this Period 69.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

669.00

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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Time Warner Mailing Address 485 East Street City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Internet provider Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22181 Date of Disbursement 09 / 08 / 2008 Amount of Each Disbursement this Period 69.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box 66282 City Chicago State IL Zip Code 60666-0282 Purpose of Disbursement Travel Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22162 Date of Disbursement 08 / 25 / 2008 Amount of Each Disbursement this Period 662.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) United Financial Casualty Insurance Mailing Address P.O. Box 54239 City Los Angeles State CA Zip Code 90099-9298 Purpose of Disbursement Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22183 Date of Disbursement 09 / 08 / 2008 Amount of Each Disbursement this Period 1591.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

2323.30

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 102 / 106

<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)
Gallegly for Congress

A.	Full Name (Last, First, Middle Initial) Washington Mutual Bank Mailing Address 660 East Los Angeles Avenue City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21826 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 9 / 2 0 0 8 Amount of Each Disbursement this Period 2565.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B.	Full Name (Last, First, Middle Initial) Washington Mutual Bank Mailing Address 660 East Los Angeles Avenue City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.21874 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 8 Amount of Each Disbursement this Period 2565.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Washington Mutual Bank Mailing Address 660 East Los Angeles Avenue City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22168 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 8 Amount of Each Disbursement this Period 2565.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

7697.40

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 103 / 106

<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)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial) Washington Mutual Bank Mailing Address 660 East Los Angeles Avenue City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22277 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 8
	Amount of Each Disbursement this Period 2565.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
B. Full Name (Last, First, Middle Initial) Your Copy Company Mailing Address 4565 E. Industrial Street City Simi Valley State CA Zip Code 93063 Purpose of Disbursement Repair Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.22160 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 149.74 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

2715.54

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

64560.01

**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)

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<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)
Gallegly for Congress

<p>A. Full Name (Last, First, Middle Initial) CHABOT, STEVE</p> <p>Mailing Address 3014 Harrison Ave.</p> <p>City Cincinnati State OH Zip Code 45211</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21.22235</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></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>B. Full Name (Last, First, Middle Initial) MCCLINTOCK FOR CONGRESS</p> <p>Mailing Address 2150 RIVER PLAZA DR. #150</p> <p>City SACRAMENTO State CA Zip Code 95833</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21.21844</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></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>C. Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE CONTRIBUTIONS</p> <p>Mailing Address 320 FIRST STREET SE</p> <p>City WASHINGTON State DC Zip Code 20003</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21.21853</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="22000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)

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<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)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Santa Barbara Co. Republican Women

Mailing Address 1687 Kronen Way

City Solvang State CA Zip Code 93463

Purpose of Disbursement
Donation

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.22230

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)

500.00

TOTAL This Period (last page this line number only)

22500.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 106 / 106
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Rowan dba DeAnza Communication	Nature of Debt (Purpose): Slate mailer refund owed
Mailing Address 65 Washington Street, #310	
City State ZIP Code Santa Clara CA 95050	

Outstanding Balance Beginning This Period 1310.00	Transaction ID: SD9.6280	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1310.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor KADY / TV	Nature of Debt (Purpose): Media but still owed
Mailing Address 633 Maulhardt Avenue	
City State ZIP Code Oxnard CA 93030	

Outstanding Balance Beginning This Period 232.00	Transaction ID: SD9.6281	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 232.00

1) SUBTOTALS This Period This Page (optional).....	1542.00
2) TOTALS This Period (last page this line number only).....	1542.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	1542.00