

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5
MCCLINTOCK FOR CONGRESS

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

2. **FEC IDENTIFICATION NUMBER** ▼ C C00446815 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT
CA 04

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of CA
06 07 2016

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
10 16 2014 through 11 24 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer David Bauer
Signature of Treasurer David Bauer *[Electronically Filed]* Date M M / D D / Y Y Y Y
03 02 2015

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
MCCLINTOCK FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	96859.44	1593186.79
(b) Total Contribution Refunds (from Line 20(d))	235.00	22865.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	96624.44	1570321.79
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	257334.04	1428457.45
(b) Total Offsets to Operating Expenditures (from Line 14).....	31.00	4127.96
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	257303.04	1424329.49
8. Cash on Hand at Close of Reporting Period (from Line 27).....	244848.21	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	449.16	

For further information contact:

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3A
Transaction ID :

Summary pages Col. B & C

Form/Schedule:
Transaction ID:

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

MCCLINTOCK FOR CONGRESS

Report Covering the Period: From: 10 / 16 / 2014 To: 11 / 24 / 2014

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 04 / 2014 (date of general election)	COLUMN C Total for 11 / 05 / 2014 (date after general election)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
53662.76	894082.15	0.00
(ii) Unitemized		
32596.68	522061.84	2538.00
(iii) Total of contributions from individuals		
86259.44	1416143.99	2538.00
(b) Political Party Committees		
0.00	1050.00	0.00
(c) Other Political Committees		
10600.00	175992.80	0.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 5 / 155

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
96859.44	1593186.79	2538.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
31.00	4127.96	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	2000.00	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
96890.44	1599314.75	2538.00

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

MCCLINTOCK FOR CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="257334.04"/>	<input type="text" value="1428457.45"/>	<input type="text" value="40662.88"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="6.25"/>	<input type="text" value="0.00"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="35.00"/>	<input type="text" value="21665.00"/>	<input type="text" value="0.00"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 7 / 155

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
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(c) Other Political Committees (such as PACs)

200.00	1200.00	0.00
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(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

235.00	22865.00	0.00
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21. OTHER DISBURSEMENTS

150000.00	287201.52	0.00
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22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

407569.04	1738530.22	40662.88
-----------	------------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

96624.44	1570321.79	2538.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

257303.04	1424329.49	40662.88
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	55526.81
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	96890.44
25. SUBTOTAL (add Line 23 and Line 24).....	652417.25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	407569.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	244848.21

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JERRY SMITH

Mailing Address 13800 AMANDALE DR APT 40F

City SEAL BEACH State CA Zip Code 90740

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 16 / 2014

Transaction ID : INCA110997

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
BARNUM TIMBER COMPANY

Mailing Address PO BOX 1365

City EUREKA State CA Zip Code 95502

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation SOLE PROP.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : INCA111004

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS AUDREY BELL

Mailing Address 15 CLARK DR

City SAN MATEO State CA Zip Code 94401

FEC ID number of contributing federal political committee.

Name of Employer AUDREY BELL INC Occupation CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 17 / 2014

Transaction ID : INCA111007

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GERALD EDWARDS

Mailing Address **PO BOX 347297**

City **SAN FRANCISCO** State **CA** Zip Code **94134**

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

Name of Employer **FIRST STUDENT** Occupation **SCHOOL BUSING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **208.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : INCA111093

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH MARTIN

Mailing Address **19932 DOUGLASS LN**

City **SARATOGA** State **CA** Zip Code **95070**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : INCA111002

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS MAY

Mailing Address **1642 CASTLEHILL CT**

City **WESTLAKE VILLAGE** State **CA** Zip Code **91361**

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

Name of Employer **GENERAL DYNAMICS** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 17 / 2014

Transaction ID : INCA111017

Amount of Each Receipt this Period
100.00

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

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

145.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JOSEPH OBERMAN

Mailing Address 620 JEFFERSON ST

City State Zip Code
HAYWARD CA 94544

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111016

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. RICHARD SILL

Mailing Address 3902 ALTURA AVE

City State Zip Code
LA CRESCENTA CA 91214

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF LAW

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111026

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. CRAIG CAMPBELL

Mailing Address 1361 ROCKY POINT DR

City State Zip Code
OCEANSIDE CA 92056

FEC ID number of contributing federal political committee.

Name of Employer Occupation
TMI REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111097

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Lisle McVicker		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2014	
Mailing Address 910 Hickory St		Transaction ID : INCA111099	
City Santa Ana	State CA	Zip Code 92701	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer PARKER MANUF. CORP.	Occupation ENGINEER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. MRS. PATRICIA AMTOWER		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address PO BOX 2456		Transaction ID : INCA111113	
City RANCHO SANTA FE	State CA	Zip Code 92067	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3000.00		

Full Name (Last, First, Middle Initial) C. MS GERALDINE BASSFORD		Date of Receipt M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 279 HACIENDA CARMEL		Transaction ID : INCA111104	
City CARMEL	State CA	Zip Code 93923	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 650.00
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 12 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
,R/ JAMES DOWNEY

Mailing Address 26000 NEWBRIDGE DR

City State Zip Code
LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation
ALTOS SONOMA CORP. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA111117

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. PAUL ENSTROM

Mailing Address 787 BIG FOOT CT

City State Zip Code
FREMONT CA 94539

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
499.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA111123

Amount of Each Receipt this Period
100.00

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

Mailing Address 2238 PHEASANT DR

City State Zip Code
HERCULES CA 94547

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA111103

Amount of Each Receipt this Period
200.00

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

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

500.00

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

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

FOR LINE NUMBER: (check only one)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 13 OF 155

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. VICTOR JEWORSKI

Mailing Address 13480 ROBLEDA RD

City State Zip Code
 LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 355.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA111112

Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
MRS. CATHERINE PERCY

Mailing Address 757 HILLSIDE DR

City State Zip Code
 SOLVANG CA 93463

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

Name of Employer Occupation
 NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 650.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA111110

Amount of Each Receipt this Period
 200.00

C. Full Name (Last, First, Middle Initial)
. SYCUAN BAND OF THE KUMEYAAY NA

Mailing Address 2 KWAAYPAAY CT

City State Zip Code
 EL CAJON CA 92019

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

Name of Employer Occupation
 SOVEREIGN NATION INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 20 / 2014

Transaction ID : INCA111925

Amount of Each Receipt this Period
 1000.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOHONO O'ODHAM NATION

Mailing Address **PO BOX 837**

City **SELLIS** State **AZ** Zip Code **85634**

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA111927

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT COOVER

Mailing Address **5 THORNWOOD**

City **IRVINE** State **CA** Zip Code **92604**

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : INCA111145

Amount of Each Receipt this Period
 50.00

C. Full Name (Last, First, Middle Initial)
MRS. ANNE HILL

Mailing Address **2231 BOBCAT TRL**

City **MOUNT SHASTA** State **CA** Zip Code **96067**

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : INCA111140

Amount of Each Receipt this Period
 100.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KEITH KALM

Mailing Address 28 VIA EMPANADA

City RANCHO SANTA MARGA State CA Zip Code 92688

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : INCA111131

Amount of Each Receipt this Period
20.00

B. Full Name (Last, First, Middle Initial)
DUSKA POWELL

Mailing Address 2548 APPLE TREE ST

City HEMET State CA Zip Code 92545

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : INCA111149

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MRS. VICTORIA SERRA

Mailing Address 28101 ESPINOZA

City MISSION VIEJO State CA Zip Code 92692

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014

Transaction ID : INCA111138

Amount of Each Receipt this Period
50.00

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

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

120.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GNEAL TREVETHAN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 2985 CATLETT RD		Transaction ID : INCA111169
City PLEASANT GROVE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer TREVETHAN FARMS	Occupation FARMER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) B. DALIA VENCKUS		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 603 14TH ST		Transaction ID : INCA111153
City SANTA MONICA	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.00
Name of Employer UNEMPLOYED	Occupation OFFICE WORKER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 512.00	

Full Name (Last, First, Middle Initial) C. MRS. KAREN WITHINGTON		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2014
Mailing Address 1085 TASMAN DR #814		Transaction ID : INCA111164
City SUNNYVALE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer SRI INTERNATIONAL	Occupation ADM ASSISTANT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 335.00	

SUBTOTAL of Receipts This Page (optional).....	177.00
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 17 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. SCOTT BANISTER

Mailing Address PO BOX 997

City HALF MOON BAY State CA Zip Code 94019

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

Name of Employer SELF EMPLOYED Occupation STARTUP CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **575.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111239

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MRS. LORA BENEDICT

Mailing Address 144 LOMA ALTA DR

City OCEANSIDE State CA Zip Code 92054

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **545.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111188

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
MS. POLLY BENSON

Mailing Address 616 17TH ST

City SANTA MONICA State CA Zip Code 90402

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111237

Amount of Each Receipt this Period
500.00

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

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

585.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BEN CAGLE

Mailing Address 10992 CANYON HILL LN

City SAN DIEGO State CA Zip Code 92126

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111203

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. KENNETH CAMPBELL

Mailing Address 3636 MCCOURTNEY RD

City LINCOLN State CA Zip Code 95648

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

Name of Employer KENNETH WADE CAMPBELL Occupation INVESTMENTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1550.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA112341

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MR. NEIL DUDDY

Mailing Address 15062 FLAMENCO PL

City VICTORVILLE State CA Zip Code 92394

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111201

Amount of Each Receipt this Period
35.00

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

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

1085.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. ARLENE FILIPPI

Mailing Address 42 WOOD ST

City State Zip Code
SAN FRANCISCO CA 94118

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

Name of Employer Occupation
AMERICAN TERRAZZO CORP. OFFICE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111233

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CARL & LINDA GROSS

Mailing Address 1615 MISTY WOOD DR

City State Zip Code
ROSEVILLE CA 95747

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111218

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
MRS. MARILYN HINTON

Mailing Address 1005 MARIPOSA ST

City State Zip Code
VALLEJO CA 94590

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2014

Transaction ID : INCA111236

Amount of Each Receipt this Period
25.00

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

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

165.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. MARTHA IRBY

Mailing Address 909 RICHARD CT

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111238

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. PETER JOHNSTONE

Mailing Address PO BOX 413

City State Zip Code
CORONA DEL MAR CA 92625

FEC ID number of contributing federal political committee.

Name of Employer Occupation
KENT PROPERTIES INVESTMENTS INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111213

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. CALVIN MALINKA

Mailing Address 117 W WABASH ST

City State Zip Code
RIALTO CA 92376

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111178

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 1058 N LA CADENA DR

City State Zip Code
COLTON CA 92324

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111182

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. JEAN METCALF

Mailing Address PO BOX 3787

City State Zip Code
TUSTIN CA 92781

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PREFERRED GROUP PROP. REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111463

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
. SAN MANUEL BAND OF MISSION IND

Mailing Address 26569 COMMUNITY CENTER DR

City State Zip Code
HIGHLAND CA 92346

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SAN MANUEL BAND OF MISSION INDIANS INDIAN TRIBE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111464

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DR. RALPH WAUGH		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address 40646 16TH ST W		Transaction ID : INCA111179	
City PALMDALE	State CA	Zip Code 93551	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer RALPH WAUGH, D.D.S., M.D., INC.	Occupation DDS		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 475.00		

Full Name (Last, First, Middle Initial) B. MRS. BARBARA ZINK		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2014	
Mailing Address PO BOX 1676		Transaction ID : INCA111194	
City VISTA	State CA	Zip Code 92085	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) C. MS SHIRLEY ALLSMAN		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 22554 FESTIVIDAD DR		Transaction ID : INCA111282	
City SAUGUS	State CA	Zip Code 91350	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 223.00		

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: (check only one)	PAGE 23 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RAY BALLARINI

Mailing Address 411 OXFORD DR

City State Zip Code
ARCADIA CA 91007

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111251

Amount of Each Receipt this Period
75.00

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

Mailing Address 8518 PONCE AVE

City State Zip Code
WEST HILLS CA 91304

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

Name of Employer Occupation
LA VALLEY COLLEGE TEACHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111263

Amount of Each Receipt this Period
30.00

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

Mailing Address 5262 TUFTON ST

City State Zip Code
WESTMINSTER CA 92683

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111279

Amount of Each Receipt this Period
35.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. SALLY BROWN		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 5311 RUSTIC CANYON ST		Transaction ID : INCA111259	
City BAKERSFIELD	State CA	Zip Code 93306	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 210.00		

Full Name (Last, First, Middle Initial) B. CARROLLS RIPPEY ROAD		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address PO BOX 1387		Transaction ID : INCA111757	
City LOOMIS	State CA	Zip Code 95650	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer		Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) C. MR. HUNTER COOK		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 227 MORNING CANYON RD		Transaction ID : INCA111287	
City CORONA DEL MAR	State CA	Zip Code 92625	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE		Occupation RETIRED	
Receipt For: 2014 <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).....	1085.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

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

FOR LINE NUMBER: PAGE 25 OF 155
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 11e 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. BRENDAN EICH

Mailing Address 2871 PRUNERIDGE AVE

City State Zip Code
SANTA CLARA CA 95051

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

Name of Employer Occupation
MOZILLA CORPORATION CTO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111312

Amount of Each Receipt this Period
250.00

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

Mailing Address 112 FAIRWAY DR

City State Zip Code
SANTA ROSA CA 95409

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

Name of Employer Occupation
JOHN FLITNER, ATTORNEY AT LAW ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111248

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. GERD FUCHS

Mailing Address 22402 INDALS PL

City State Zip Code
CALABASAS CA 91302

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111303

Amount of Each Receipt this Period
25.00

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

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

775.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. ANITA FULBRIGHT

Mailing Address 1536 W MARINETTE AVE UNIT A

City State Zip Code
EXETER CA 93221

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111293

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
JENNIFER GOODE

Mailing Address 6801 LEISURE TOWN RD APT 84

City State Zip Code
VACAVILLE CA 95688

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

Name of Employer Occupation
NATOMA TECHNOLOGIES PROPOSAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111322

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
H. BRUCE HANES

Mailing Address 4286 COACHMAN CIR

City State Zip Code
WESTLAKE VILLAGE CA 91362

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

Name of Employer Occupation
HANES INVESTMENT REALTY INC. REAL ESTATE BROKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111245

Amount of Each Receipt this Period
300.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. WILLIAM INGLIS JR.		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 514 HIGHCREST CT		Transaction ID : INCA111258	
City NEWBURY PARK	State CA	Zip Code 91320	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00		

Full Name (Last, First, Middle Initial) B. MR. DRAKE KING		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 1102 E KELSO AVE		Transaction ID : INCA111273	
City FRESNO	State CA	Zip Code 93720	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer R. M. KING COMPANY	Occupation MANGEMENT		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 235.00		

Full Name (Last, First, Middle Initial) C. MRS. NADINE LEYTON		Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2014	
Mailing Address 1150 POLARIS DR		Transaction ID : INCA111290	
City NEWPORT BEACH	State CA	Zip Code 92660	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 750.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3750.00		

SUBTOTAL of Receipts This Page (optional).....	900.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 1410 W COLORADO BLVD

City PASADENA State CA Zip Code 91105

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

Name of Employer ROBERT V MACISAAC INC., DBA C & R REAL Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111269

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MS. PAULINE MORRISH

Mailing Address 1904 CHURCH ST

City BURBANK State CA Zip Code 91504

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111255

Amount of Each Receipt this Period
30.00

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

Mailing Address 6745 COLTON BLVD

City OAKLAND State CA Zip Code 94611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111243

Amount of Each Receipt this Period
150.00

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

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

230.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS & EILEEN PARKS

Mailing Address 17009 CROTHERS RD

City SAN JOSE State CA Zip Code 95127

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **202.60**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111315

Amount of Each Receipt this Period
 17.76

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL RICE

Mailing Address 515 S 2ND ST

City KING CITY State CA Zip Code 93930

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111247

Amount of Each Receipt this Period
 100.00

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

Mailing Address 76 OAKMONT AVE

City PIEDMONT State CA Zip Code 94610

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

Name of Employer JAMES SOPER, ATTORNEY AT LAW Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 23 / 2014

Transaction ID : INCA111267

Amount of Each Receipt this Period
 50.00

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

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

167.76

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. GLENN TANIMURA		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 1079 NOBLE LN		Transaction ID : INCA111310
City SAN JOSE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer SELF EMPLOYED	Occupation ELECTRICAL ENGINEER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 240.00	

Full Name (Last, First, Middle Initial) MR. THOMAS TIGNINO		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 3255 SAWTOOTH CT		Transaction ID : INCA111311
City WESTLAKE VILLAGE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer THOMAS TIGNINO CPA	Occupation CPA	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MS CARLA TRENT		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 23 / 2014
Mailing Address 324 CHESTNUT HILL CT APT 16		Transaction ID : INCA111291
City THOUSAND OAKS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3050.00	

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: (check only one)	PAGE 31 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILMA WALSH

Mailing Address 5161 DONNA AVE

City State Zip Code
TARZANA CA 91356

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111270

Amount of Each Receipt this Period
70.00

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

Mailing Address 196 QUAILS TRL

City State Zip Code
THOUSAND OAKS CA 91361

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111250

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. HAROLD ZECHEL

Mailing Address 8679 LEMON AVE APT 10

City State Zip Code
LA MESA CA 91941

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
330.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 23 / 2014

Transaction ID : INCA111284

Amount of Each Receipt this Period
30.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RAYMOND AGOSTI

Mailing Address 754 E MACARTHUR ST

City State Zip Code
SONOMA CA 95476

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111350

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. GLORIA BARCOJO

Mailing Address 50 LAPHAM WAY

City State Zip Code
SAN FRANCISCO CA 94112

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111346

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
MS GERALDINE BASSFORD

Mailing Address 279 HACIENDA CARMEL

City State Zip Code
CARMEL CA 93923

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111334

Amount of Each Receipt this Period
100.00

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

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

235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DAVID BENEDICT

Mailing Address 2860 COUNTRY DR APT 218

City State Zip Code
FREMONT CA 94536

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111360

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. BRADFORD BOEHM

Mailing Address 3681 PARK DR

City State Zip Code
EL DORADO HILLS CA 95762

FEC ID number of contributing federal political committee.

Name of Employer Occupation
STATE ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111413

Amount of Each Receipt this Period

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

Mailing Address 683 ANDERSON AVE

City State Zip Code
BRENTWOOD CA 94513

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111329

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. HENRIETTA BUGAJ		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 1703 CRINELLA DR		Transaction ID : INCA111351	
City SAINT HELENA	State CA	Zip Code 94574	Amount of Each Receipt this Period _____ 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 295.00		

Full Name (Last, First, Middle Initial) B. MR. WILLIAM COLLINS		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 1150 FLYING FISH ST		Transaction ID : INCA111335	
City FOSTER CITY	State CA	Zip Code 94404	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1300.00		

Full Name (Last, First, Middle Initial) C. MR. ROBERT CRIDER		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 8454 EL MODENA AVE		Transaction ID : INCA111394	
City ELVERTA	State CA	Zip Code 95626	Amount of Each Receipt this Period _____ 51.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 386.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 126.00
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 35 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 1505 GRASS VALLEY HIGHWAY

City State Zip Code
AUBURN CA 95603

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

Name of Employer Occupation
SELF EMPLOYED LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111419

Amount of Each Receipt this Period
100.00

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

Mailing Address 4528 SCENIC DR

City State Zip Code
ROCKLIN CA 95765

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111391

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOYCE FERN

Mailing Address 668 MEADOW CANYON DR

City State Zip Code
PITTSBURG CA 94565

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111429

Amount of Each Receipt this Period
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 3040 JAVA RD

City COSTA MESA State CA Zip Code 92626

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111401

Amount of Each Receipt this Period
100.00

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

Mailing Address PO BOX 620099

City WOODSIDE State CA Zip Code 94062

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111332

Amount of Each Receipt this Period
100.00

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

Mailing Address 600 HAWTHORN RD

City SACRAMENTO State CA Zip Code 95864

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111327

Amount of Each Receipt this Period
1000.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. JOHN HAMLIN		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1848 N SAGE AVE		Transaction ID : INCA111355
City RIALTO	State CA	
Zip Code 92376		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 215.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 215.00	

Full Name (Last, First, Middle Initial) JOAN HERDOCIA		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1520 JASPER DR		Transaction ID : INCA111448
City SUNNYVALE	State CA	
Zip Code 94087		Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JOAN HERDOCIA	Occupation ACCOUNTANT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) MRS. BETTY HOOD		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 15615 HUMMER LN		Transaction ID : INCA111380
City GRASS VALLEY	State CA	
Zip Code 95949		Amount of Each Receipt this Period 20.00
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 220.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 220.00	

SUBTOTAL of Receipts This Page (optional).....	195.00
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 38 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 7940 AMALFI WAY

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111347

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID KEYSTON

Mailing Address PO BOX 7066

City State Zip Code
CARMEL CA 93921

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111339

Amount of Each Receipt this Period
500.00

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

Mailing Address 724 E GRINELL DR

City State Zip Code
BURBANK CA 91501

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

Name of Employer Occupation
CA STATE DEPT OF JUSTICE LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 24 / 2014

Transaction ID : INCA111437

Amount of Each Receipt this Period
100.00

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

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

675.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. JUDITH LOUGHRIN		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 3460 LIVE OAK RD		Transaction ID : INCA111337	
City SANTA YNEZ	State CA	Zip Code 93460	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation HOMEMAKER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 255.00		

Full Name (Last, First, Middle Initial) B. MRS. RAMONA MOLOSKI		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 16100 CURTIS TRL # 4		Transaction ID : INCA111454	
City FRAZIER PARK	State CA	Zip Code 93225	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 490.00		

Full Name (Last, First, Middle Initial) C. MRS. FUKIKO MORITA		Date of Receipt M M / D D / Y Y Y Y 10 / 24 / 2014	
Mailing Address 5162 N BIOLA AVE		Transaction ID : INCA111349	
City FRESNO	State CA	Zip Code 93723	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 230.00		

SUBTOTAL of Receipts This Page (optional).....	150.00
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 40 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GERALD PERRY

Mailing Address 49 SLEEPY HOLLOW LN

City ORINDA State CA Zip Code 94563

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111388

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. JANICE PINKSTON

Mailing Address 20 TAMALPAIS AVE

City BELVEDERE State CA Zip Code 94920

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111449

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. DENNIS PRATHER

Mailing Address 968 ROSEWOOD LN

City LEMOORE State CA Zip Code 93245

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
860.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111425

Amount of Each Receipt this Period
200.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. STEVEN PRITT

Mailing Address 949 NANTUCKET BLVD UNIT 2

City SALINAS State CA Zip Code 93906

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

Name of Employer EDEN VALLEY CARE CENTER Occupation HEALTH CARE ADMINISTRATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111452

Amount of Each Receipt this Period
 _____ 100.00

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

Mailing Address 3068 DONA SUSANA DR

City STUDIO CITY State CA Zip Code 91604

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111424

Amount of Each Receipt this Period
 _____ 25.00

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

Mailing Address 629 BARCELONA DR

City SONOMA State CA Zip Code 95476

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111345

Amount of Each Receipt this Period
 _____ 50.00

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

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

_____ 175.00

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

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

FOR LINE NUMBER: PAGE 42 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOANN RICE

Mailing Address 6156 CAMP FAR WEST RD

City State Zip Code
SHERIDAN CA 95681

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111369

Amount of Each Receipt this Period
10.00

B. Full Name (Last, First, Middle Initial)
MR. Eric Roberts

Mailing Address 2449 Granite Ln

City State Zip Code
Lincoln CA 95648

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111414

Amount of Each Receipt this Period
150.00

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

Mailing Address 5440 WASHINGTON ST

City State Zip Code
NAPA CA 94558

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

Name of Employer Occupation
NONE RETIRED MARINE ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111387

Amount of Each Receipt this Period
200.00

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

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

360.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 19 REATA PL

City OAKLAND State CA Zip Code 94618

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **375.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111358

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. KARL SCHEIDHAUER

Mailing Address 1196 FOOTHILL ST

City REDWOOD CITY State CA Zip Code 94061

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

Name of Employer MOUNTAIN VIEW FORIEGN CAR Occupation OFFICE WORKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111333

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS. MARCIA SEEGER

Mailing Address 3053 COLETTE DR

City RICHMOND State CA Zip Code 94806

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **290.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111362

Amount of Each Receipt this Period
50.00

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

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

200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. THOMAS STADE

Mailing Address 16147 TINA CT

City GRASS VALLEY State CA Zip Code 95949

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111399

Amount of Each Receipt this Period
50.00

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

Mailing Address 1432 CRENSHAW BLVD

City LOS ANGELES State CA Zip Code 90019

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

Name of Employer LOS ANGELES COUNTY AUDITOR Occupation INTERMEDIATE CLERK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
258.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111435

Amount of Each Receipt this Period
18.00

C. Full Name (Last, First, Middle Initial)
RICHARD VICTOR

Mailing Address 3491 QUEENS CT

City COSTA MESA State CA Zip Code 92626

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111438

Amount of Each Receipt this Period
100.00

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

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

168.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. FRED WEILER

Mailing Address 16331 MAHOGANY ST

City FOUNTAIN VALLEY State CA Zip Code 92708

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
295.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111404

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MRS. BONNIE WILLIAMS

Mailing Address 9260 WINDING OAK DR

City FAIR OAKS State CA Zip Code 95628

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

Name of Employer FOLSOM AUTOTECH Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 24 / 2014

Transaction ID : INCA111338

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. CYNTHIA IBRAHIM

Mailing Address 18175 FAIRFIELD DR

City MADERA State CA Zip Code 93638

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

Name of Employer LA VINA RANCH Occupation SAFETY COORDINATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2014

Transaction ID : INCA111459

Amount of Each Receipt this Period
25.00

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

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

160.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TATNALL HILLMAN

Mailing Address 504 W BLEEKER ST

City ASPEN State CO Zip Code 81611

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 26 / 2014

Transaction ID : INCA111173

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
MR. SAMUEL AUTREY

Mailing Address 725 PASEO PL

City FULLERTON State CA Zip Code 92835

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111472

Amount of Each Receipt this Period
100.00

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

Mailing Address 3103 ARIZONA AVE

City SANTA MONICA State CA Zip Code 90404

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **455.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111466

Amount of Each Receipt this Period
100.00

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

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

2800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DON BIDDLE

Mailing Address **PO BOX 1320**

City **ROCKLIN** State **CA** Zip Code **95677**

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

Name of Employer **SELF EMPLOYED** Occupation **CPA**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111516

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
REV. WAYNE BIGELOW

Mailing Address **1112 SEDONA ST**

City **ROCKLIN** State **CA** Zip Code **95765**

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

Name of Employer **ADVENTURE CHRISTIAN CHURCH** Occupation **PASTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **380.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111550

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. ROSALIND BLACK

Mailing Address **11252 BIMINI DR**

City **SANTA ANA** State **CA** Zip Code **92705**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111480

Amount of Each Receipt this Period
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. FRANK BOURBEAU

Mailing Address 5411 TOLTEC DR

City State Zip Code
SANTA BARBARA CA 93111

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

Name of Employer Occupation
ENERPRO INC ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111465

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MS. CELIA BROWN

Mailing Address PO BOX 530

City State Zip Code
LAGUNITAS CA 94938

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
635.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111543

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. GEORGE BUSBY

Mailing Address 4839 WHITEWOOD AVE

City State Zip Code
LONG BEACH CA 90808

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

Name of Employer Occupation
THE BOEING COMPANY ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111479

Amount of Each Receipt this Period
200.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PAMELA CHAPIN

Mailing Address 2737 E 2ND ST UNIT 1

City State Zip Code
LONG BEACH CA 90803

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

Name of Employer Occupation
CALIFORNIA STATE UNIVERSITY SR. MANAGER, BENEFITS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111508

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. HOWARD CHRISTIE

Mailing Address 26 CORRAL RD

City State Zip Code
BELL CANYON CA 91307

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111546

Amount of Each Receipt this Period
40.00

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

Mailing Address 1702 VIA REDONDO

City State Zip Code
SAN LORENZO CA 94580

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 27 / 2014

Transaction ID : INCA111484

Amount of Each Receipt this Period
25.00

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

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

165.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. OLEVA DORMAN

Mailing Address 4571 PARK PAXTON PL

City State Zip Code
SAN JOSE CA 95136

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
845.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111613

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MRS. MARY DOYLE

Mailing Address 2325 CORY AVE

City State Zip Code
SAN JOSE CA 95128

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111556

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. WILLIAM DUFFY JR.

Mailing Address 20637 LEONARD RD

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111569

Amount of Each Receipt this Period
100.00

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

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

190.00

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

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

FOR LINE NUMBER: PAGE 51 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 26026 ADAMOR RD

City State Zip Code
CALABASAS CA 91302

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111557

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
ALBERT & JANET GONZALES

Mailing Address 19132 CONSUL AVE

City State Zip Code
CORONA CA 92881

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111502

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA GOW

Mailing Address 10944 LOCH LOMOND DR

City State Zip Code
WHITTIER CA 90606

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111554

Amount of Each Receipt this Period
150.00

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 52 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. E. CARL HANKS JR.

Mailing Address 6994 GRANDWOOD WAY

City State Zip Code
SAN JOSE CA 95120

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111616

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
DENNIS AND LEXY HOMEN

Mailing Address 5910 RODEO PL

City State Zip Code
ROCKLIN CA 95677

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
335.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111598

Amount of Each Receipt this Period
60.00

C. Full Name (Last, First, Middle Initial)
SUMNER AND MARGO HOWES

Mailing Address 1026 CHARLESTON CIR

City State Zip Code
ROSEVILLE CA 95661

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111596

Amount of Each Receipt this Period
50.00

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

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

160.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 550 W 16TH ST

City UPLAND State CA Zip Code 91784

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
207.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111494

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
LT. COL. ARVO KANNISTO

Mailing Address 5915 LA CUESTA DR

City SANTA ROSA State CA Zip Code 95409

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
420.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111572

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD LEHMKUHL

Mailing Address 904 PENINSULA AVE APT 312

City SAN MATEO State CA Zip Code 94401

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111553

Amount of Each Receipt this Period
50.00

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

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

125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RICHARD MARSHALL

Mailing Address 11720 EASTSIDE RD

City State Zip Code
FORT JONES CA 96032

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111636

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MR. RONALD MORRIS

Mailing Address 330 S REESE PL

City State Zip Code
BURBANK CA 91506

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

Name of Employer Occupation
SELF SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111593

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
TERENCE MURPHREE

Mailing Address 1330 ENCLAVE PKWY STE 400

City State Zip Code
HOUSTON TX 77077

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

Name of Employer Occupation
UNITED STEEL STRUCTURES CONSTRUCTION EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111523

Amount of Each Receipt this Period
1000.00

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

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

1275.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAURIE NITSCH

Mailing Address 2325 KUEHNER DR STE 130

City State Zip Code
SIMI VALLEY CA 93063

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 27 2014

Transaction ID : INCA111532

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. LEONARD PERHAM

Mailing Address PO BOX 2610

City State Zip Code
SARATOGA CA 95070

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

Name of Employer Occupation
MOSYS INC. EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1375.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 27 2014

Transaction ID : INCA111495

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. THOMAS PETERSEN

Mailing Address 1457 ALAMO PINTADO RD

City State Zip Code
SOLVANG CA 93463

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 27 2014

Transaction ID : INCA111500

Amount of Each Receipt this Period
100.00

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

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

650.00

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

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

FOR LINE NUMBER: PAGE 56 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. COLLEEN RICKEY

Mailing Address 860 ALOHA ST

City State Zip Code
CAMARILLO CA 93010

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111487

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MRS. VIRGINIA ROWLEY

Mailing Address PO BOX 7

City State Zip Code
LOOMIS CA 95650

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111590

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MS. DOLORES SCHMIDT

Mailing Address 251 N LEIGH AVE

City State Zip Code
CAMPBELL CA 95008

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111560

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. TY SONNTAG

Mailing Address 215 OAK WOOD WAY

City LOS GATOS State CA Zip Code 95032

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

Name of Employer LE T INC. Occupation CONSTRUCTION SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111589

Amount of Each Receipt this Period
150.00

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

Mailing Address PO BOX 867

City OXNARD State CA Zip Code 93032

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
560.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111482

Amount of Each Receipt this Period
50.00

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

Mailing Address 13813 MASLINE ST

City BALDWIN PARK State CA Zip Code 91706

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111501

Amount of Each Receipt this Period
50.00

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

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

250.00

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

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

FOR LINE NUMBER: PAGE 58 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. EDWARD TREADGOLD

Mailing Address 1025 ANZA ST

City State Zip Code
SAN FRANCISCO CA 94118

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
436.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111606

Amount of Each Receipt this Period
53.00

B. Full Name (Last, First, Middle Initial)
JIRO TSUSHIMA

Mailing Address 5414 W 141ST ST

City State Zip Code
HAWTHORNE CA 90250

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111506

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN VAN HOOSEAR

Mailing Address 1184 VIA SANTA PAULO

City State Zip Code
VISTA CA 92081

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
315.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 27 2014

Transaction ID : INCA111579

Amount of Each Receipt this Period
70.00

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

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

173.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 380 AILANTHUS LN

City PLACERVILLE State CA Zip Code 95667

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111549

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
DR. CORNELIS WESSELING

Mailing Address 904 SANTA CRUZ CT

City ROSEVILLE State CA Zip Code 95661

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

Name of Employer CASE MEDICAL SYSTEM, INC. Occupation ANESTHESIOLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 27 / 2014

Transaction ID : INCA111619

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. LINDA ADAMS

Mailing Address 441 W FAIRVIEW BLVD

City INGLEWOOD State CA Zip Code 90302

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111724

Amount of Each Receipt this Period
25.00

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

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

725.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 6609 MONT BLANC CT

City BAKERSFIELD State CA Zip Code 93306

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111971

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MR. THOMAS ATWOOD

Mailing Address PO BOX 890

City KENWOOD State CA Zip Code 95452

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

Name of Employer CYPRESS ABBEY CO. Occupation REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111687

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD BEST

Mailing Address PO BOX 34683

City LOS ANGELES State CA Zip Code 90034

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

Name of Employer DONALD M. BEST Occupation REAL ESTATE INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111736

Amount of Each Receipt this Period
500.00

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

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

1025.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HUGH BRADLEY

Mailing Address 2921 PEBBLE BEACH CIR

City State Zip Code
FAIRFIELD CA 94534

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111710

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. DANIEL BUTALA

Mailing Address 11805 LAMBERT AVE

City State Zip Code
EL MONTE CA 91732

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111669

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. DANIEL CASEY

Mailing Address 1439 ELLSMERE AVE

City State Zip Code
LOS ANGELES CA 90019

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111662

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. HELEN CLOER		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 2315 TREELANE AVE		Transaction ID : INCA111959	
City MONROVIA	State CA	Zip Code 91016	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 750.00		

Full Name (Last, First, Middle Initial) B. M. COLE		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 13640 PASEO DEL ROBLE CT		Transaction ID : INCA111945	
City LOS ALTOS HILLS	State CA	Zip Code 94022	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1057.00		

Full Name (Last, First, Middle Initial) C. MR. GREGORY DESY		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 5324 DOTY LN		Transaction ID : INCA111976	
City PLACERVILLE	State CA	Zip Code 95667	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C _____			
Name of Employer NONE	Occupation DISABLED VETERAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 425.00		

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: (check only one)	PAGE 63 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. BARBARA FERRERRA

Mailing Address 367 FAIRFIELD DR

City State Zip Code
SAN CARLOS CA 94070

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111661

Amount of Each Receipt this Period

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

Mailing Address 399 LIVE OAK CT

City State Zip Code
MILPITAS CA 95035

FEC ID number of contributing federal political committee.

Name of Employer Occupation
PHYSICAL ELECTRONICS USA ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111740

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
HAROLDENE FREEMAN

Mailing Address PO BOX 2002

City State Zip Code
DIAMOND SPRINGS CA 95619

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111977

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 64 OF 155
(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)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEONA GRANT

Mailing Address 16003 GRIFFITH AVE

City State Zip Code
WASCO CA 93280

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111696

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT HENDRICH

Mailing Address 520 E LEMON AVE

City State Zip Code
GLENDDORA CA 91741

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111668

Amount of Each Receipt this Period
35.00

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

Mailing Address 139 LANSBERRY CT

City State Zip Code
LOS GATOS CA 95032

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

Name of Employer Occupation
SELF, PATRICIA A. HERRON BOOKKEEPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111665

Amount of Each Receipt this Period
175.00

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

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

260.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 880 CAMPUS COMMONS RD

City State Zip Code
SACRAMENTO CA 95825

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1800.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111754

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. MARVIN HOFFMAN

Mailing Address 2277 MANZANITA DR

City State Zip Code
OAKLAND CA 94611

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111685

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
INGER HOGAN

Mailing Address 29046 HOLLOW OAK CT

City State Zip Code
AGOURA HILLS CA 91301

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111981

Amount of Each Receipt this Period
500.00

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

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

650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. IAN HUEBSCH

Mailing Address PO BOX 1137

City State Zip Code
EL CERRITO CA 94530

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111984

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID IBERSHOFF

Mailing Address PO BOX 80247

City State Zip Code
SAN MARINO CA 91118

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111978

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
M. MATEEL JOHNSON

Mailing Address 8328 MANITOBA ST APT 10

City State Zip Code
PLAYA DEL REY CA 90293

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

Name of Employer Occupation
FAA COMP SPEC.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
270.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111718

Amount of Each Receipt this Period
50.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) LINDA & R. S. KEEFER		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 900 SEQUOIA AVE		Transaction ID : INCA111709	
City MILLBRAE	State CA	Zip Code 94030	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer DEL MONTE FOODS	Occupation MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 410.00		

Full Name (Last, First, Middle Initial) MR. RANDY KEITH		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 2095 VISTA MAR DR		Transaction ID : INCA111731	
City EL DORADO HILLS	State CA	Zip Code 95762	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer REQUESTED	Occupation REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) MR. WAYNE KELLY		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 25275 LA LOMA DR		Transaction ID : INCA111653	
City LOS ALTOS HILLS	State CA	Zip Code 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700.00		

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: (check only one)	PAGE 68 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. ROBERT KENNEDY JR.

Mailing Address 1779 CIPRIAN AVE

City CAMARILLO State CA Zip Code 93010

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111930

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD KEVORKIAN

Mailing Address 966 HIGHLAND DR

City LOS OSOS State CA Zip Code 93402

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
488.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111694

Amount of Each Receipt this Period
113.00

C. Full Name (Last, First, Middle Initial)
MRS. DOROTHY KRACK

Mailing Address 1128 TOBIAS DR

City CHULA VISTA State CA Zip Code 91911

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

Name of Employer NONE Occupation HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111932

Amount of Each Receipt this Period
50.00

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

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

213.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARION LANDSGAARD

Mailing Address **PO BOX 573**

City **ROSAMOND** State **CA** Zip Code **93560**

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

Name of Employer **HARDWARE STORE & REAL ESTATE** Occupation **BUSINESS OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **220.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111934

Amount of Each Receipt this Period
100.00

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

Mailing Address **PO BOX 952**

City **LA MIRADA** State **CA** Zip Code **90637**

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

Name of Employer **ARGUS CONTRACTING INC.** Occupation **ADMIN. ASSISTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **315.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111648

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
MR. HENRY LEONARDI

Mailing Address **432 CALLE DE LA MESA**

City **NOVATO** State **CA** Zip Code **94949**

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

Name of Employer **LEONARDI PROPERTIES** Occupation **PROPERTY MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **530.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111678

Amount of Each Receipt this Period
50.00

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

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

165.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. EMMETT LYNCH

Mailing Address 608 31ST ST

City RICHMOND State CA Zip Code 94804

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111679

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
EZIO MAIOLINI

Mailing Address 5056 PROCTOR AVE

City OAKLAND State CA Zip Code 94618

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

Name of Employer ATT Occupation PROJECT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111747

Amount of Each Receipt this Period
250.00

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

Mailing Address 1029 GILSTRAP AVE

City GRIDLEY State CA Zip Code 95948

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111974

Amount of Each Receipt this Period
50.00

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

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

325.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. LESTER MCNALL

Mailing Address 311 E COUNTRY HILLS DR

City LA HABRA State CA Zip Code 90631

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

Name of Employer NONE Occupation RETIRED CHEMIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111704

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID MENNE

Mailing Address 1554 CALLE PORTADA

City CAMARILLO State CA Zip Code 93010

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

Name of Employer DEL CHARRO RANCH Occupation FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111640

Amount of Each Receipt this Period
200.00

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

Mailing Address 16211 DOWNEY AVE UNIT 66

City PARAMOUNT State CA Zip Code 90723

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111642

Amount of Each Receipt this Period
35.00

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

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

335.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. RAMONA MOLOSKI

Mailing Address 16100 CURTIS TRL # 4

City State Zip Code
FRAZIER PARK CA 93225

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
490.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111744

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MAURIE NITSCH

Mailing Address 2325 KUEHNER DR STE 130

City State Zip Code
SIMI VALLEY CA 93063

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

Name of Employer Occupation
REQUESTED REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111973

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH OBERMAN

Mailing Address 620 JEFFERSON ST

City State Zip Code
HAYWARD CA 94544

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
240.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 28 / 2014

Transaction ID : INCA111670

Amount of Each Receipt this Period
40.00

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

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

165.00

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

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

FOR LINE NUMBER: PAGE 73 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. MATT PANDOL

Mailing Address 32540 PETERSON RD

City State Zip Code
DELANO CA 93215

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

Name of Employer Occupation
PANDOL BROTHERS, INC. FARM MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 28 2014

Transaction ID : INCA111673

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. ELIZABETH PANKEY

Mailing Address PO BOX 10274

City State Zip Code
SANTA ANA CA 92711

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 28 2014

Transaction ID : INCA111641

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. CATHERINE PERCY

Mailing Address 757 HILLSIDE DR

City State Zip Code
SOLVANG CA 93463

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 28 2014

Transaction ID : INCA111682

Amount of Each Receipt this Period
200.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JACK PERRIN		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 500 EASTGATE LN		Transaction ID : INCA111929	
City SANTA BARBARA	State CA	Zip Code 93108	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation NONE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 925.00		

Full Name (Last, First, Middle Initial) B. MR. BRUCE POWER		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address 147 ESCOBAR AVE		Transaction ID : INCA111644	
City LOS GATOS	State CA	Zip Code 95032	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		C	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 220.00		

Full Name (Last, First, Middle Initial) C. MR. LEW PRICE		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2014	
Mailing Address PO BOX 88		Transaction ID : INCA111716	
City GARDEN VALLEY	State CA	Zip Code 95633	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SELF, LEW P. PRICE	Occupation WRITER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

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: (check only one)	PAGE 75 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. J. PURKEY

Mailing Address 140 MAGNOLIA AVE

City LARKSPUR State CA Zip Code 94939

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111672

Amount of Each Receipt this Period
25.00

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

Mailing Address 808 WEST ST

City HOLLISTER State CA Zip Code 95023

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

Name of Employer AMERICAN CASTING COMPANY Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111677

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. JOHN ROSS

Mailing Address 340 W CLARK ST

City UPLAND State CA Zip Code 91784

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

Name of Employer ROLYN OPTICS COMPANY Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
650.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111721

Amount of Each Receipt this Period
100.00

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

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

225.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 513 STARLIGHT LN

City State Zip Code
ARROYO GRANDE CA 93420

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111940

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. EDWARD SIVAS

Mailing Address 26648 INDIAN PEAK RD

City State Zip Code
RANCHO PALOS VERDE CA 90275

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111659

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. RAY STRONG

Mailing Address 975 MARLINTON CT

City State Zip Code
SAN JOSE CA 95120

FEC ID number of contributing federal political committee.

Name of Employer Occupation
IBM RESEARCH SCIENTIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111750

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. HERMAN THOMS JR.

Mailing Address 2403 LINCOLN AVE

City Belmont State CA Zip Code 94002

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

Name of Employer STUDEBAKERS WEST Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111671

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. BRYAN VROOMAN

Mailing Address 25550 MOONLIGHT DR

City Edgemont State SD Zip Code 57735

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111954

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL WITHERS

Mailing Address 8450 LAUREL LN

City Granite Bay State CA Zip Code 95746

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2014

Transaction ID : INCA111949

Amount of Each Receipt this Period
50.00

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

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

180.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JONES Abraham

Mailing Address 3535 Sophia Way

City Sacramento State CA Zip Code 95820

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111888

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MRS. BONNEY BANCROFT

Mailing Address 3833 STAR RIDGE RD

City HAYWARD State CA Zip Code 94542

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

Name of Employer WIND RIVER SYSTEMS Occupation EXECUTIVE ASSISTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111895

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MR. PAUL BASS

Mailing Address 1395 MAGNOLIA AVE

City UPLAND State CA Zip Code 91786

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111816

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEBORAH BEHOUNEK

Mailing Address 3151 MONTROSE WAY

City State Zip Code
EL DORADO HILLS CA 95762

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111993

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
MR. STEPHEN BROWN

Mailing Address 3939 WALNUT AVE UNIT 352

City State Zip Code
CARMICHAEL CA 95608

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111761

Amount of Each Receipt this Period
35.00

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

Mailing Address 2244 WESTCHESTER DR

City State Zip Code
SAN JOSE CA 95124

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

Name of Employer Occupation
CALKINS ENGINEERING ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111763

Amount of Each Receipt this Period
50.00

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

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

435.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TERRENCE & BARBARA Caster

Mailing Address 4607 MISSION GORGE PL

City SAN DIEGO State CA Zip Code 92120

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

Name of Employer SELF EMPLOYED Occupation SELF EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111887

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MR. EARL CLARK

Mailing Address 1824 W 245TH ST

City TORRANCE State CA Zip Code 90501

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111851

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. SLOAN COATS

Mailing Address 2238 41ST AVE

City SAN FRANCISCO State CA Zip Code 94116

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
213.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111825

Amount of Each Receipt this Period
100.00

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. KENNETH COLLIN

Mailing Address 2972 SAILOR AVE

City State Zip Code
VENTURA CA 93001

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1305.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111796

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MARY COWAN

Mailing Address 12650 SHENANDOAH RD

City State Zip Code
PLYMOUTH CA 95669

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111843

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MS BEVERLY DI VECCHIO

Mailing Address 2825 PARKVIEW DR

City State Zip Code
ALHAMBRA CA 91803

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111771

Amount of Each Receipt this Period
35.00

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

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

360.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) MR. MICHAEL DILLION		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 13422 JESSICA DR		Transaction ID : INCA111830
City GARDEN GROVE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer L A COUNTY SANTITATION DISTRICT	Occupation WATER TREATMENT OPERATOR	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 425.00	

Full Name (Last, First, Middle Initial) MR. PHILLIP DORE		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 2414 HUNTINGTON LN		Transaction ID : INCA111855
City REDONDO BEACH	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer SOUTHLAND INDUSTRIES	Occupation HVAC ENGINEER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) DR. GERALD EDRALIN		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 5839 LOQUAT LN		Transaction ID : INCA111858
City PALMDALE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer EDRALIN PEDIATRIC CENTER	Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

SUBTOTAL of Receipts This Page (optional).....	215.00
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 83 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. KENT ENDERLE		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 3274 WISDOM CT		Transaction ID : INCA111829
City SIMI VALLEY	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 112.00
Name of Employer ENDERLE FUEL INJECTION	Occupation PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 224.00	

Full Name (Last, First, Middle Initial) B. MRS. KAY FINLAY		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 10 LA CERRA CIR		Transaction ID : INCA111889
City RANCHO MIRAGE	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1150.00	

Full Name (Last, First, Middle Initial) C. MR. JESSE FOSTER JR.		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 29 / 2014
Mailing Address 305 KAREN WAY		Transaction ID : INCA111765
City TIBURON	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer COUNTY OF SONOMA	Occupation CIVIL ENGINEER TECH	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

SUBTOTAL of Receipts This Page (optional).....	287.00
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 84 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. EDWIN FRANZEN		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 1524 MILAN AVE		Transaction ID : INCA111850	
City SOUTH PASADENA	State CA	Zip Code 91030	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 399.00		

Full Name (Last, First, Middle Initial) B. MR. ROBERT GOURLAY		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 10400 SHIRLEY AVE		Transaction ID : INCA111857	
City NORTHRIDGE	State CA	Zip Code 91326	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) C. MR. J. KERN HAMILTON		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 800 BLOSSOM HILL RD UNIT E324		Transaction ID : INCA111783	
City LOS GATOS	State CA	Zip Code 95032	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2900.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 650.00
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 85 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACK AND SHANNON HANSEN

Mailing Address 7360 STATE HIGHWAY 49

City State Zip Code
EL DORADO CA 95623

FEC ID number of contributing federal political committee.

Name of Employer Occupation
CDC CORRECTIONAL OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111910

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. MARK HEDLUND

Mailing Address 1045 TRANQUIL HILLS CT

City State Zip Code
PASO ROBLES CA 93446

FEC ID number of contributing federal political committee.

Name of Employer Occupation
P G & E SYSTEM OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111840

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
JAYNE & DENNIS HORN

Mailing Address 5211 MOUNT ARIANE TER

City State Zip Code
SAN DIEGO CA 92111

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111901

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CHERYLE INBODEN

Mailing Address 531 PALOS SECOS

City State Zip Code
ARROYO GRANDE CA 93420

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
275.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111838

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. PETER JOHNSTONE

Mailing Address PO BOX 413

City State Zip Code
CORONA DEL MAR CA 92625

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

Name of Employer Occupation
KENT PROPERTIES INVESTMENTS INVESTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111900

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MR. RONALD KOLLMANSBERGER

Mailing Address 1115 INSPIRATION LN

City State Zip Code
ESCONDIDO CA 92025

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

Name of Employer Occupation
BOEING MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111854

Amount of Each Receipt this Period
150.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. MARJORIE LINDEE		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 64 BAY TREE LN		Transaction ID : INCA111760	
City LOS ALTOS	State CA	Zip Code 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) B. MRS. JANE MAC LEOD		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 650 HARRISON AVE		Transaction ID : INCA111780	
City CLAREMONT	State CA	Zip Code 91711	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 310.00		

Full Name (Last, First, Middle Initial) C. MR. JAMES MASSON JR.		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2014	
Mailing Address 267 KNIGHT DR		Transaction ID : INCA111822	
City SAN RAFAEL	State CA	Zip Code 94901	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....	185.00
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 88 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. NICHOLAS MEYER

Mailing Address 922 BUCKSKIN RD

City ANGELS CAMP State CA Zip Code 95222

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111881

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR. MATTHEW MITCHELL

Mailing Address 3006 HAMMOND WAY

City EL DORADO HILLS State CA Zip Code 95762

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111885

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
RAYMOND & SARAH MONTAGNE

Mailing Address 6305 PUERTO DR

City RANCHO MURIETA State CA Zip Code 95683

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111770

Amount of Each Receipt this Period
50.00

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

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

140.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHI HARU MUKAIHATA

Mailing Address 17903 MANHATTAN PL

City State Zip Code
TORRANCE CA 90504

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111817

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. EUGENE NAUMANN

Mailing Address 5007 KENNETH AVE

City State Zip Code
FAIR OAKS CA 95628

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

Name of Employer Occupation
NONE BUILDER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
480.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111819

Amount of Each Receipt this Period
70.00

C. Full Name (Last, First, Middle Initial)
MRS. SALLY O'BRYAN

Mailing Address 9308 ANNETTA AVE

City State Zip Code
SOUTH GATE CA 90280

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111767

Amount of Each Receipt this Period
100.00

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

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

270.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 185 SENTAR RD

City State Zip Code
CARPINTERIA CA 93013

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

Name of Employer Occupation
SELF, MICHAEL POLLARD REAL ESTATE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1375.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111782

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MRS. KATHRYN PRITCHARD

Mailing Address 507 E SUNNY HILLS RD

City State Zip Code
FULLERTON CA 92835

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111782

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MRS. JUNE SCHISLER

Mailing Address 500 N GRAPE ST APT 303

City State Zip Code
ESCONDIDO CA 92025

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
245.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 29 / 2014

Transaction ID : INCA111794

Amount of Each Receipt this Period
35.00

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

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

635.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 3120 SUNDANCE TRL

City State Zip Code
PLACERVILLE CA 95667

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111874

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MS GAIL STURGEON

Mailing Address 5657 COLTON BLVD

City State Zip Code
OAKLAND CA 94611

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111866

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
WILLIAM & HANNAH SWEET

Mailing Address 81 MOUNT TIBURON RD

City State Zip Code
TIBURON CA 94920

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111776

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 92 OF 155
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE TED L. & DIXIE L. BEAR LIVING TRUST

Mailing Address 21 GLEN ECHO

City State Zip Code
DOVE CANYON CA 92679

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111842

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111872

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MRS. LOIS TITUS

Mailing Address 33 N LINDEN DR

City State Zip Code
VENTURA CA 93004

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111824

Amount of Each Receipt this Period

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

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

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

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

FOR LINE NUMBER: PAGE 93 OF 155
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address PO BOX 2488

City State Zip Code
SAN RAFAEL CA 94912

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111813

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MR. GILLES VAN NEDERVEEN

Mailing Address PO BOX 610

City State Zip Code
LINCOLN CA 95648

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111768

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
DALIA VENCKUS

Mailing Address 603 14TH ST

City State Zip Code
SANTA MONICA CA 90402

FEC ID number of contributing federal political committee.

Name of Employer Occupation
UNEMPLOYED OFFICE WORKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA111870

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. SIMONIE WOOLRIDGE

Mailing Address PO BOX 3830

City SONORA State CA Zip Code 95370

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

Name of Employer TUOLUMNE GENERAL HOSPITAL Occupation RN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111863

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MS. M. GLORIA ZARAVIA

Mailing Address 1425 2ND AVE SPC 132

City CHULA VISTA State CA Zip Code 91911

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 29 / 2014

Transaction ID : INCA111861

Amount of Each Receipt this Period
35.00

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

Mailing Address 55 BROAD ST APT 203

City SAN LUIS OBISPO State CA Zip Code 93405

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA111999

Amount of Each Receipt this Period
100.00

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

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

235.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. NITA BLASHAW

Mailing Address 14618 MCADAMS CREEK RD

City State Zip Code
FORT JONES CA 96032

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
365.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112018

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. YVONNE CARR

Mailing Address 2215 VINA DEL MAR

City State Zip Code
OXNARD CA 93035

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA111997

Amount of Each Receipt this Period
100.00

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

Mailing Address 1487 ROCKVILLE RD

City State Zip Code
SUISUN CITY CA 94534

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112015

Amount of Each Receipt this Period
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. BETTY EMANSKI

Mailing Address 29 LINARIA WAY

City PORTOLA VALLY State CA Zip Code 94028

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112034

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MR. HAROLD GILBREATH

Mailing Address 7630 EL ESCORIAL WAY

City BUENA PARK State CA Zip Code 90620

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
378.45

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112005

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
MR. GARY GRAVES

Mailing Address 17350 TEMPLE AVE SPC 440

City LA PUENTE State CA Zip Code 91744

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112003

Amount of Each Receipt this Period
50.00

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

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

260.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 3551 GRAND AVE

City SAN MARCOS State CA Zip Code 92078

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

Name of Employer EDISON INTERNATIONAL Occupation NUCLEAR COMPUTER TECH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 580.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112014

Amount of Each Receipt this Period
 _____ 60.00

B. Full Name (Last, First, Middle Initial)
Mr. JOHN HURABIELL Sr.

Mailing Address 259 14TH AVE

City SAN FRANCISCO State CA Zip Code 94118

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

Name of Employer J.P. HURABIELL, APC Occupation LAWYER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112045

Amount of Each Receipt this Period
 _____ 100.00

C. Full Name (Last, First, Middle Initial)
MRS. JOAN LAMOREAUX

Mailing Address 111 HACIENDA DR

City ARCADIA State CA Zip Code 91006

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 270.00

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 30 / 2014

Transaction ID : INCA112002

Amount of Each Receipt this Period
 _____ 100.00

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

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

_____ 260.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 837 E WALNUT AVE

City State Zip Code
GLEN DORA CA 91741

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

Name of Employer Occupation
NONE RETIRED POLICE DET. SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : INCA112019

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MRS. SUSAN MCMASTER

Mailing Address 14921 ROMA DR

City State Zip Code
LA MIRADA CA 90638

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
253.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : INCA112040

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
SOFIA MORGAN

Mailing Address 43761 ABELOE TER

City State Zip Code
FREMONT CA 94539

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

Name of Employer Occupation
LMSSC SYSTEMS INTEGRATION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : INCA112062

Amount of Each Receipt this Period
250.00

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. WARREN RILEY

Mailing Address 6991 PENNINGTON RD

City State Zip Code
LIVE OAK CA 95953

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

Name of Employer Occupation
SELF-WARREN RILEY FARMER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 30 2014

Transaction ID : INCA112017

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. RALPH SANDLER

Mailing Address 9 LA ENTRADA WAY

City State Zip Code
YUBA CITY CA 95993

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
215.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 30 2014

Transaction ID : INCA112039

Amount of Each Receipt this Period
40.00

C. Full Name (Last, First, Middle Initial)
DR. MICHAEL STEPPE

Mailing Address 350 N LORAIN AVENUE

City State Zip Code
GLEN DORA CA 91741

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

Name of Employer Occupation
CHINO HILLS EQUINE HOSPITAL VETERINARIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 30 2014

Transaction ID : INCA112022

Amount of Each Receipt this Period
200.00

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

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

340.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 812 BIRCHWOOD DR

City State Zip Code
LOS ANGELES CA 90024

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112020

Amount of Each Receipt this Period

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

Mailing Address 561 TOPEKA LN

City State Zip Code
VACAVILLE CA 95687

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112061

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. EDGAR WILLIAMS

Mailing Address 2900 COVE CAY DR APT 3G

City State Zip Code
CLEARWATER FL 33760

FEC ID number of contributing federal political committee.

Name of Employer Occupation
LEGACY CAPITAL GROUP, INC. COMMODITY POOL OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112119

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARIANNE BIDART

Mailing Address **PO BOX 3427**

City **HAILEY** State **ID** Zip Code **83333**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : INCA112090

Amount of Each Receipt this Period
100.00

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

Mailing Address **1111 W EL CAMINO REAL STE 109 MB 3**

City **SUNNYVALE** State **CA** Zip Code **94087**

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

Name of Employer **INTEL** Occupation **ENGINEER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : INCA112093

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
MRS. BERNADINE CLESI

Mailing Address **14280 HOLDEN CT**

City **SAN JOSE** State **CA** Zip Code **95124**

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

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **525.00**

Date of Receipt
 M M / D D / Y Y Y Y
10 / 31 / 2014

Transaction ID : INCA112065

Amount of Each Receipt this Period
100.00

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MS LO ANN DICK		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 1237 15TH AVE W		Transaction ID : INCA112084	
City DICKINSON	State ND	Zip Code 58601	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 205.00		

Full Name (Last, First, Middle Initial) B. R/ JAMES DOWNEY		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 26000 NEWBRIDGE DR		Transaction ID : INCA112077	
City LOS ALTOS HILLS	State CA	Zip Code 94022	Amount of Each Receipt this Period _____ 200.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer ALTOS SONOMA CORP.	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1300.00		

Full Name (Last, First, Middle Initial) C. MRS. JOAN RHODES		Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 30558 S TRACY BLVD		Transaction ID : INCA112068	
City TRACY	State CA	Zip Code 95377	Amount of Each Receipt this Period _____ 100.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer NONE	Occupation HOUSEWIFE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 550.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 350.00
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 103 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
G. SHELLEY

Mailing Address 1157 LAGO CT

City SAN JOSE State CA Zip Code 95121

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

Name of Employer SAN JOSE MEDICAL MANAGEMENT Occupation HELP DESK

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **210.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : INCA112064

Amount of Each Receipt this Period
40.00

B. Full Name (Last, First, Middle Initial)
MR. JERRY SMITH

Mailing Address 13800 AMANDALE DR APT 40F

City SEAL BEACH State CA Zip Code 90740

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
 10 / 31 / 2014

Transaction ID : INCA112091

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
MRS. JOANN ANDERSEN

Mailing Address PO BOX 1147

City LOWER LAKE State CA Zip Code 95457

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **235.00**

Date of Receipt
 M M / D D / Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112215

Amount of Each Receipt this Period
10.00

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

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

75.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. RICHARD BREESE

Mailing Address 5262 TUFTON ST

City WESTMINSTER State CA Zip Code 92683

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112146

Amount of Each Receipt this Period
30.00

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

Mailing Address 445 OAK HILL TER

City LOMPOC State CA Zip Code 93436

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1900.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112175

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MR. DONALD CLINTON

Mailing Address 2956 E DEL MAR BLVD APT 228

City PASADENA State CA Zip Code 91107

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

Name of Employer CLINTONS RESTURANTS Occupation RESTURANT OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112110

Amount of Each Receipt this Period
50.00

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

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

280.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
M. COLE

Mailing Address 13640 PASEO DEL ROBLE CT

City State Zip Code
LOS ALTOS HILLS CA 94022

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1057.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112104

Amount of Each Receipt this Period
100.00

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

Mailing Address 1150 FLYING FISH ST

City State Zip Code
FOSTER CITY CA 94404

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112131

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
NEAL & FRANCES CURRENT

Mailing Address 6270 WESTMORELAND PL

City State Zip Code
GOLETA CA 93117

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112197

Amount of Each Receipt this Period
150.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 300 HILL ST

City State Zip Code
SAN FRANCISCO CA 94114

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
397.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112203

Amount of Each Receipt this Period
198.00

B. Full Name (Last, First, Middle Initial)
MRS. MARY LOGASA

Mailing Address 957 FAIRWAY DR

City State Zip Code
SONOMA CA 95476

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
525.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112103

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. RAYMOND LOPEZ

Mailing Address 1221 ALTA VISTA DR

City State Zip Code
VISTA CA 92084

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

Name of Employer Occupation
CITY OF SAN MARCOS GARDENER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
205.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112138

Amount of Each Receipt this Period
25.00

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

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

273.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 837 E WALNUT AVE

City State Zip Code
GLEN DORA CA 91741

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

Name of Employer Occupation
NONE RETIRED POLICE DET. SUPERVISOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112179

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MACMULLIN FORESTRY & LOGGING

Mailing Address 944 HIDDEN POND LN

City State Zip Code
MCKINLEYVILLE CA 95519

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

Name of Employer Occupation
NONE SOLE PROP.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112164

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MRS. CHARLOTTE MAECK

Mailing Address 3145 TURK BLVD

City State Zip Code
SAN FRANCISCO CA 94118

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

Name of Employer Occupation
NONE HOUSEWIFE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112210

Amount of Each Receipt this Period
25.00

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

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

575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 111 ELM ST # 3

City SAN DIEGO State CA Zip Code 92101

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

Name of Employer JAMES S. MARINOS, A.P.C., ATTORNEY AT Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
460.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112192

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. DAVID MCCOSKER

Mailing Address 3155 SANTA MARIA DR

City CONCORD State CA Zip Code 94518

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

Name of Employer INDEPENDENT CONSTRUCTION COMPANY Occupation CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
875.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112188

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
MS VIRGINIA MEHEGAN

Mailing Address 156 LIBERTY ST

City SAN FRANCISCO State CA Zip Code 94110

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
365.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112169

Amount of Each Receipt this Period
50.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address 15 EL CAMINO REAL APT 204

City BURLINGAME State CA Zip Code 94010

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112185

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
MR. J. ALAN RIORDAN

Mailing Address PO BOX 159

City WEST POINT State CA Zip Code 95255

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112159

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
CHRIS RUFER

Mailing Address 724 MAIN ST

City WOODLAND State CA Zip Code 95695

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

Name of Employer THE MORNING STAR CO Occupation AGRICULTURALIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 03 / 2014

Transaction ID : INCA112163

Amount of Each Receipt this Period
2500.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 110 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. JACK THOMAS

Mailing Address 6701 SHOO FLY RD

City State Zip Code
KELSEY CA 95667

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
320.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112151

Amount of Each Receipt this Period
30.00

B. Full Name (Last, First, Middle Initial)
MR. EDWARD TREADGOLD

Mailing Address 1025 ANZA ST

City State Zip Code
SAN FRANCISCO CA 94118

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
436.00

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112162

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
MR. GILLES VAN NEDERVEEN

Mailing Address PO BOX 610

City State Zip Code
LINCOLN CA 95648

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
397.50

Date of Receipt
M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112135

Amount of Each Receipt this Period
25.00

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

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

105.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. EDGAR WHITMORE JR.

Mailing Address 660 S ORANGE GROVE BLVD APT K

City PASADENA State CA Zip Code 91105

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112121

Amount of Each Receipt this Period

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

Mailing Address 1002 14TH ST APT 2

City SANTA MONICA State CA Zip Code 90403

FEC ID number of contributing federal political committee.

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

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112142

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
MR. MICHAEL WITHERS

Mailing Address 8450 LAUREL LN

City GRANITE BAY State CA Zip Code 95746

FEC ID number of contributing federal political committee.

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : INCA112140

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MRS. SHARON YOUNG		Date of Receipt M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address 1317 17TH ST APT 3		Transaction ID : INCA112134	
City SACRAMENTO	State CA	Zip Code 95811	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00		

Full Name (Last, First, Middle Initial) B. SHARALEE ASPENLEITER		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 3910 RAVENSWOOD DR		Transaction ID : INCA112225	
City YORBA LINDA	State CA	Zip Code 92886	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00		

Full Name (Last, First, Middle Initial) C. M. COLE		Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 13640 PASEO DEL ROBLE CT		Transaction ID : INCA112230	
City LOS ALTOS HILLS	State CA	Zip Code 94022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00	
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1057.00		

SUBTOTAL of Receipts This Page (optional).....	350.00
TOTAL This Period (last page this line number only).....	350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. J. CROWELL

Mailing Address 1371 TREASURE LN

City State Zip Code
SANTA ANA CA 92705

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
625.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : INCA112255

Amount of Each Receipt this Period
100.00

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

Mailing Address 6075 NACIMIENTO SHORES RD

City State Zip Code
BRADLEY CA 93426

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
265.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : INCA112235

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Mrs. ANDREA GROSSMAN

Mailing Address 71 CALYPSO SHRS

City State Zip Code
NOVATO CA 94949

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 04 / 2014

Transaction ID : INCA112247

Amount of Each Receipt this Period
100.00

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

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

250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MRS. CARROLL HADSELL

Mailing Address 201 GRACE GLEN CT

City ROSEVILLE State CA Zip Code 95747

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **230.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : INCA112242

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
MR. BILL KRAUSE

Mailing Address 1951 RHONDA ST

City OXNARD State CA Zip Code 93036

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **205.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : INCA112243

Amount of Each Receipt this Period
30.00

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

Mailing Address 1635 E OCEAN BLVD UNIT 3A

City LONG BEACH State CA Zip Code 90802

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **245.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : INCA112233

Amount of Each Receipt this Period
25.00

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

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

90.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 155
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. DON MIYADA

Mailing Address 15152 TEMPLE ST

City WESTMINSTER State CA Zip Code 92683

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : INCA112227

Amount of Each Receipt this Period
40.00

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

Mailing Address PO BOX 373

City CENTER POINT State TX Zip Code 78010

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 04 / 2014

Transaction ID : INCA112246

Amount of Each Receipt this Period
100.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

140.00

53662.76

**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 116 OF 155
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CITIZENS UNITED

Mailing Address 1006 PENNSYLVANIA AVE SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00295527

Name of Employer Occupation
C00295527

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
6000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 20 / 2014

Transaction ID : INCA111926

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
CIPAC FEDERAL PAC

Mailing Address 8001 IRVINE CENTER DR STE 400

City State Zip Code
IRVINE CA 92618

FEC ID number of contributing federal political committee. **C** C00318766

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 25 / 2014

Transaction ID : INCA111758

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
NAHU PAC

Mailing Address 1212 NEW YORK AVE NW STE 1100

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00283135

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 30 / 2014

Transaction ID : INCA112120

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 155
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CONSERVATIVE VICTORY FUND

Mailing Address **PO BOX 15245**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00009704**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1242.80

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112154

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
COPART INC. PAC

Mailing Address **4665 BUSINESS CENTER DR**

City **FAIRFIELD** State **CA** Zip Code **94534**

FEC ID number of contributing federal political committee. **C C00452581**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112165

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
OCCIDENTAL PETROLEUM CORP. PAC

Mailing Address **10889 WILSHIRE BLVD**

City **LOS ANGELES** State **CA** Zip Code **90024**

FEC ID number of contributing federal political committee. **C C00083857**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112266

Amount of Each Receipt this Period
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 155
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THE NATIONAL RIGHT TO WORK COMMITTEE PAC

Mailing Address 8001 BRADDOCK RD STE 500

City State Zip Code
SPRINGFIELD VA 22151

FEC ID number of contributing federal political committee. **C** C00395533

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
100.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 03 / 2014

Transaction ID : INCA112152

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
WELLS FARGO & CO EMPLOYEE PAC

Mailing Address 90 S 7TH ST 6TH FLR

City State Zip Code
MINNEAPOLIS MN 55402

FEC ID number of contributing federal political committee. **C** C00034595

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 04 / 2014

Transaction ID : INCA112376

Amount of Each Receipt this Period
1500.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1600.00

10600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 119 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address PO BOX 1198			Amount of Each Disbursement this Period 2037.97	
City ROCKLIN	State CA	Zip Code 95677	Transaction ID : EXPB110825	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MAR/COM SERVICES, INC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 21 ORINDA WAY STE C #301			Amount of Each Disbursement this Period 50028.50	
City ORINDA	State CA	Zip Code 94563	Transaction ID : EXPB110884	
Purpose of Disbursement BROADCAST ADVERTISING		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 50.10	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112324	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional)	52116.57
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 120 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 20.00 Transaction ID : EXPB112369
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. MATTHEW REED		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 2480 QUIVER DR.		Amount of Each Disbursement this Period 848.33 Transaction ID : EXPB110826
City IONE	State CA	
Zip Code 95640	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. THE MONACO GROUP		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 1011 S. LINWOOD AVE.		Amount of Each Disbursement this Period 7749.19 Transaction ID : EXPB110836
City SANTA ANA	State CA	
Zip Code 92705	Purpose of Disbursement MASS MAIL	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8617.52
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 121 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

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

Mailing Address **SACRAMENTO INT'L AIRPORT**

City **Sacramento** State **CA** Zip Code **95838**

Purpose of Disbursement **AIRFARE** Category/Type **002**

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 16 / 2014**

Amount of Each Disbursement this Period: **1000.20**

Transaction ID : **EXPB112299**

Full Name (Last, First, Middle Initial)
B. USAIRWAYS

Mailing Address **SACRAMENTO INT'L AIRPORT**

City **Sacramento** State **CA** Zip Code **95838**

Purpose of Disbursement **AIRFARE** Category/Type **002**

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 16 / 2014**

Amount of Each Disbursement this Period: **1000.20**

Transaction ID : **EXPB112300**

Full Name (Last, First, Middle Initial)
C. VOTE RITE SYSTEMS, INC.

Mailing Address **3440 VIKING DR. #105**

City **SACRAMENTO** State **CA** Zip Code **95827**

Purpose of Disbursement **DATA PROCESSING** Category/Type **001**

Candidate Name

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: **10 / 16 / 2014**

Amount of Each Disbursement this Period: **2002.60**

Transaction ID : **EXPB110828**

SUBTOTAL of Disbursements This Page (optional) **4003.00**

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 122 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Joseph Yocca Jr.		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2014
Mailing Address 4697 YORKSHIRE WAY		Amount of Each Disbursement this Period 2268.71
City GRANITE BAY	State CA	
Zip Code 95746	Purpose of Disbursement PAYROLL	Transaction ID : EXPB110824
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.03
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB112325
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 17 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 0.50
City San Jose	State CA	
Zip Code 95125	Purpose of Disbursement MERCHANT FEE	Transaction ID : EXPB112370
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2271.24
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 123 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

A. PAYPAL

Full Name (Last, First, Middle Initial)
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2014

Amount of Each Disbursement this Period: 16.55

Transaction ID : EXPB112326

Category/Type: 001

B. PAYPAL

Full Name (Last, First, Middle Initial)
Mailing Address 2145 Hamilton Avenue

City San Jose State CA Zip Code 95125

Purpose of Disbursement
MERCHANT FEE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 19 / 2014

Amount of Each Disbursement this Period: 0.85

Transaction ID : EXPB112327

Category/Type: 001

C. CAPITOL HILL CLUB

Full Name (Last, First, Middle Initial)
Mailing Address 300 FIRST ST. SE

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
MEETING

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 20 / 2014

Amount of Each Disbursement this Period: 165.24

Transaction ID : EXPB112304

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 182.64

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 124 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRY'S ELECTRONICS			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 180 N. SUNRISE AVE.			Amount of Each Disbursement this Period 107.49	
City ROSEVILLE	State CA	Zip Code 95661	Transaction ID : EXPB112302	
Purpose of Disbursement SUPPLIES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 102.75	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112329	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 5.46	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112328	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	215.70
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 125 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UNITED AIRLINES			Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014	
Mailing Address SACRAMENTO INT'L AIRPORT			Amount of Each Disbursement this Period 1534.20	
City SACRAMENTO	State CA	Zip Code 95838	Transaction ID : EXPB112301	
Purpose of Disbursement AIRFARE		002 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. TIM MACY & ASSOC.			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 1831 IRON POINT RD. #120			Amount of Each Disbursement this Period 564.28	
City FOLSOM	State CA	Zip Code 95630	Transaction ID : EXPB111125	
Purpose of Disbursement MASS MAIL		003 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SERVICE			Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2014	
Mailing Address 5515 PACIFIC ST			Amount of Each Disbursement this Period 245.00	
City Rocklin	State CA	Zip Code 95677	Transaction ID : EXPB112305	
Purpose of Disbursement POSTAGE		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	2343.48
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 155			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address P. O. BOX 7221		Amount of Each Disbursement this Period 12.55 Transaction ID : EXPB112310
City PASADENA State CA Zip Code 91109	Purpose of Disbursement SHIPPING Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 89.28 Transaction ID : EXPB112330
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 30.81 Transaction ID : EXPB112331
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	132.64
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 127 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 750.00
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement POSTAGE	Transaction ID : EXPB111220
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BLUE POINT LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 35311 N. 92ND WAY		Amount of Each Disbursement this Period 71654.92
City SCOTTSDALE	State AZ	
Zip Code 85262	Purpose of Disbursement MASS MAIL, POLLING	Transaction ID : EXPB111305
Candidate Name	004 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX OFFICE		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 1927 DOUGLAS BLVD.		Amount of Each Disbursement this Period 4.72
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement SUPPLIES	Transaction ID : EXPB112312
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	72409.64
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 128 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 55.06
City San Jose	State CA Zip Code 95125	
Purpose of Disbursement MERCHANT FEE	Category/Type 001	Transaction ID : EXPB112332
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VOTERLINK		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2014
Mailing Address 13348 ALPINE COVE DR.		Amount of Each Disbursement this Period 1023.49
City ALPINE	State UT Zip Code 84004	
Purpose of Disbursement MAILING LIST	Category/Type 004	Transaction ID : EXPB112313
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. FEDEX		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address P. O. BOX 7221		Amount of Each Disbursement this Period 72.92
City PASADENA	State CA Zip Code 91109	
Purpose of Disbursement SHIPPING	Category/Type 001	Transaction ID : EXPB111307
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1151.47
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 129 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 2.25 Transaction ID : EXPB112333
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 7.85 Transaction ID : EXPB112334
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. BLUE POINT LLC		Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014
Mailing Address 35311 N. 92ND WAY		Amount of Each Disbursement this Period 40145.00 Transaction ID : EXPB111443
City SCOTTSDALE State AZ Zip Code 85262	Purpose of Disbursement MASS MAIL 004 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	40155.10
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 130 OF 155			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CRISWELL ASSOCIATES			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 21 ORINDA WAY #C 301			Amount of Each Disbursement this Period 3650.00	
City ORINDA	State CA	Zip Code 94563	Transaction ID : EXPB111445	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type 004		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address P. O. BOX 7221			Amount of Each Disbursement this Period 16.90	
City PASADENA	State CA	Zip Code 91109	Transaction ID : EXPB112318	
Purpose of Disbursement SHIPPING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address P. O. BOX 7221			Amount of Each Disbursement this Period 34.25	
City PASADENA	State CA	Zip Code 91109	Transaction ID : EXPB112315	
Purpose of Disbursement SHIPPING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	3701.15
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 131 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MAILCHIMP.COM			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 512 MEANS ST. #404			Amount of Each Disbursement this Period 215.00	
City ATLANTA	State GA	Zip Code 30318	Transaction ID : EXPB112316	
Purpose of Disbursement BROADCAST E-MAIL		Category/ Type 004		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 49.43	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112336	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

Full Name (Last, First, Middle Initial) C. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 27 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 43.87	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112335	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....	308.30
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 132 OF 155		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address P. O. BOX 537104		Amount of Each Disbursement this Period 85.92 Transaction ID : EXPB111633
City ATLANTA State GA Zip Code 30353	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. AT&T MOBILITY		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address P. O. BOX 6463		Amount of Each Disbursement this Period 116.78 Transaction ID : EXPB111632
City Carol Stream State IL Zip Code 60197	Purpose of Disbursement PHONE SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DAVID BAUER		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 2150 RIVER PLAZA DR. #150		Amount of Each Disbursement this Period 718.75 Transaction ID : EXPB111631
City SACRAMENTO State CA Zip Code 95833	Purpose of Disbursement ACCOUNTING SVC. Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	921.45
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 133 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CAPITAL DEVELOPMENT STRATEGIES

Mailing Address 1127 11TH ST. #310

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement FUNDRAISING COMMISSION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 3036.13

Transaction ID : EXPB111629

Category/Type: 003

Full Name (Last, First, Middle Initial)

B. GOLDWATER 50 COMMITTEE

Mailing Address 1428 DUKE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement CONFERENCE

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 500.00

Transaction ID : EXPB111627

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. JENNIFER RODRIGUEZ

Mailing Address 3245 SPECTRUM DR.

City IRVINE State CA Zip Code 92618

Purpose of Disbursement FUNDRAISING COMMISSION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 28 / 2014

Amount of Each Disbursement this Period: 2867.72

Transaction ID : EXPB111628

Category/Type: 003

SUBTOTAL of Disbursements This Page (optional)..... 6403.85

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 134 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KATIE USSERY		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 4240 SE 17TH ST.		Amount of Each Disbursement this Period 12.60
City DES MOINES	State IA Zip Code 50310	
Purpose of Disbursement MILEAGE	Category/Type 002	Transaction ID : EXPB111626
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. VOTERLINK		Date of Disbursement M M / D D / Y Y Y Y 10 / 28 / 2014
Mailing Address 13348 ALPINE COVE DR.		Amount of Each Disbursement this Period 1873.98
City ALPINE	State UT Zip Code 84004	
Purpose of Disbursement MAILING LIST	Category/Type 004	Transaction ID : EXPB112319
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 54.54
City San Jose	State CA Zip Code 95125	
Purpose of Disbursement MERCHANT FEE	Category/Type 001	Transaction ID : EXPB112337
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1941.12
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 135 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CALIF. STATE DISBURSEMENT UNIT		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P. O. BOX 989067		Amount of Each Disbursement this Period 5064.76 Transaction ID : EXPB111918
City WEST SACRAMENTO	State CA	
Zip Code 95798	Purpose of Disbursement SUPPORT PAYMENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. DELTA AIRLINES		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address LOS ANGELES INT'L AIRPORT		Amount of Each Disbursement this Period 371.60 Transaction ID : EXPB112321
City Los Angeles	State CA	
Zip Code 90045	Purpose of Disbursement AIRFARE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. EMPLOYMENT DEVELOPMENT DEPT.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P. O. BOX 826276		Amount of Each Disbursement this Period 549.93 Transaction ID : EXPB111919
City SACRAMENTO	State CA	
Zip Code 94230	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	5986.29
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 136 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 2037.97 Transaction ID : EXPB111912
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. INTERNAL REVENUE SVC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address		Amount of Each Disbursement this Period 22.50 Transaction ID : EXPB111916
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. INTERNAL REVENUE SVC.		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address		Amount of Each Disbursement this Period 5285.96 Transaction ID : EXPB111917
City OGDEN	State UT	
Zip Code 84201	Purpose of Disbursement TAXES	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	7346.43
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 137 OF 155			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NIKITA KOSTYUK			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 800 PONY CT.			Amount of Each Disbursement this Period 334.31	
City SACRAMENTO	State CA	Zip Code 95830	Transaction ID : EXPB111915	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 16.00	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112338	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. MATTHEW REED			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 2480 QUIVER DR.			Amount of Each Disbursement this Period 346.31	
City IONE	State CA	Zip Code 95640	Transaction ID : EXPB111914	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	696.62
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 138 OF 155			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VERIZON WIRELESS			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address P. O. BOX 660720			Amount of Each Disbursement this Period 40.00	
City DALLAS	State TX	Zip Code 74266	Transaction ID : EXPB112320	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Mr. Joseph Yocca Jr.			Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014	
Mailing Address 4697 YORKSHIRE WAY			Amount of Each Disbursement this Period 1394.08	
City GRANITE BAY	State CA	Zip Code 95746	Transaction ID : EXPB111913	
Purpose of Disbursement PAYROLL		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. FEDEX			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address P. O. BOX 7221			Amount of Each Disbursement this Period 16.90	
City PASADENA	State CA	Zip Code 91109	Transaction ID : EXPB112323	
Purpose of Disbursement SHIPPING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1450.98
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 139 OF 155			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 15.73	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112339	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. PAYPAL			Date of Disbursement M M / D D / Y Y Y Y 11 / 02 / 2014	
Mailing Address 2145 Hamilton Avenue			Amount of Each Disbursement this Period 1.73	
City San Jose	State CA	Zip Code 95125	Transaction ID : EXPB112415	
Purpose of Disbursement MERCHANT FEE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. AT&T			Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014	
Mailing Address P. O. BOX 5025			Amount of Each Disbursement this Period 32.25	
City CAROL STREAM	State IL	Zip Code 60197	Transaction ID : EXPB112412	
Purpose of Disbursement PHONE SVC.		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	49.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 60.00
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB112413
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PAYPAL		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 2145 Hamilton Avenue		Amount of Each Disbursement this Period 19.37
City San Jose State CA Zip Code 95125	Purpose of Disbursement MERCHANT FEE	
Candidate Name	001 Category/Type	Transaction ID : EXPB112416
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. SAMMY'S ROCKIN' GRILL		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014
Mailing Address 220 VERNON ST.		Amount of Each Disbursement this Period 3791.31
City ROSEVILLE State CA Zip Code 95678	Purpose of Disbursement CAMPAIGN NIGHT GATHERING	
Candidate Name	001 Category/Type	Transaction ID : EXPB112481
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	3870.68
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 141 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SAMMY'S ROCKIN' GRILL			Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2014	
Mailing Address 220 VERNON ST.			Amount of Each Disbursement this Period 54.15	
City ROSEVILLE	State CA	Zip Code 95678	Transaction ID : EXPB112480	
Purpose of Disbursement CAMPAIGN NIGHT GATHERING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. LISA CHARLTON			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014	
Mailing Address 1507 8TH ST.			Amount of Each Disbursement this Period 500.00	
City LINCOLN	State CA	Zip Code 95648	Transaction ID : EXPB112265	
Purpose of Disbursement RENT		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. CHASE BANK			Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014	
Mailing Address 801 K ST. #110			Amount of Each Disbursement this Period 389.89	
City SACRAMENTO	State CA	Zip Code 95814	Transaction ID : EXPB112409	
Purpose of Disbursement BANK FEES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	944.04
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 142 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial)
A. CONSOLIDATED COMMUNICATIONS

Mailing Address P. O. BOX 30697

City LOS ANGELES State CA Zip Code 90030

Purpose of Disbursement PHONE SVC. Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 05 / 2014

Amount of Each Disbursement this Period 414.74

Transaction ID : EXPB112264

Full Name (Last, First, Middle Initial)
B. FIA CARD SERVICES

Mailing Address P. O. BOX 15716

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement CREDIT CARD PAYMENT Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2016 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 05 / 2014

Amount of Each Disbursement this Period 648.13

Transaction ID : EXPB112262

Full Name (Last, First, Middle Initial)
C. LIME LITE RESTAURANT

Mailing Address 1054 W. SHAW

City FRESNO State CA Zip Code 93711

Purpose of Disbursement MEALS Category/Type 002

Candidate Name

Office Sought: House Senate President Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement 11 / 05 / 2014

Amount of Each Disbursement this Period 280.74

Transaction ID : EDTB311EXPB112262

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 1062.87

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 143 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STOR N LOK		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 21 MASSIE CT.		Amount of Each Disbursement this Period 140.00
City SACRAMENTO	State CA	
Zip Code 95828	Purpose of Disbursement STORAGE	Transaction ID : EDTB312EXPB112262
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. THE CATALYST GROUP RW, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 600 PENNSYLVANIA AVE. #330		Amount of Each Disbursement this Period 7350.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement FUNDRAISING COMMISSION	Transaction ID : EXPB112261
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. THE MONACO GROUP		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 1011 S. LINWOOD AVE.		Amount of Each Disbursement this Period 9974.62
City SANTA ANA	State CA	
Zip Code 92705	Purpose of Disbursement MASS MAIL	Transaction ID : EXPB112263
Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	17324.62
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 144 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. U.S. POSTAL SERVICE		Date of Disbursement M M / D D / Y Y Y Y 11 / 05 / 2014
Mailing Address 5515 PACIFIC ST		Amount of Each Disbursement this Period 245.00
City Rocklin	State CA	
Zip Code 95677	Purpose of Disbursement POSTAGE	Transaction ID : EXPB112411
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ALAMO RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014
Mailing Address 6320 MCNAIR CIR.		Amount of Each Disbursement this Period 593.79
City SACRAMENTO	State CA	
Zip Code 95837	Purpose of Disbursement AUTO RENTAL	Transaction ID : EXPB112407
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ALAMO RENT-A-CAR		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2014
Mailing Address 6320 MCNAIR CIR.		Amount of Each Disbursement this Period 65.91
City SACRAMENTO	State CA	
Zip Code 95837	Purpose of Disbursement AUTO RENTAL	Transaction ID : EXPB112408
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	904.70
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 145 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLUE POINT LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2014
Mailing Address 35311 N. 92ND WAY		Amount of Each Disbursement this Period 3000.00 Transaction ID : EXPB112283
City SCOTTSDALE	State AZ	
Zip Code 85262	Purpose of Disbursement CAMPAIGN CONSULTING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. HOUSE GIFT SHOP		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address HOUSE OF REPRESENTATIVES		Amount of Each Disbursement this Period 5400.00 Transaction ID : EXPB112404
City Washington	State DC	
Zip Code 20515	Purpose of Disbursement GIFTS FOR SUPPORTERS	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 10 / 2014
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 264.10 Transaction ID : EXPB112403
City Washington	State DC	
Zip Code 20006	Purpose of Disbursement POSTAGE	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	8664.10
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 146 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MR. JON HUEY		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address PO BOX 1198		Amount of Each Disbursement this Period 2037.97 Transaction ID : EXPB112343
City ROCKLIN	State CA	
Zip Code 95677	Purpose of Disbursement PAYROLL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. THOMAS MCCLINTOCK		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 2601 MARINA POINT LN.		Amount of Each Disbursement this Period 1813.62 Transaction ID : EXPB112340
City Elk Grove	State CA	
Zip Code 95672	Purpose of Disbursement MILEAGE	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 2000 ROYAL OAKS DR.		Amount of Each Disbursement this Period 278.00 Transaction ID : EXPB112342
City SACRAMENTO	State CA	
Zip Code 95813	Purpose of Disbursement BOX RENTAL	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	4129.59
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 147 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. Mr. Joseph Yocca Jr.		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2014
Mailing Address 4697 YORKSHIRE WAY		Amount of Each Disbursement this Period 787.52 Transaction ID : EXPB112344
City GRANITE BAY State CA Zip Code 95746	Purpose of Disbursement PAYROLL Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. CHASE BANK		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2014
Mailing Address 801 K ST. #110		Amount of Each Disbursement this Period 2.00 Transaction ID : EXPB112398
City SACRAMENTO State CA Zip Code 95814	Purpose of Disbursement BANK FEE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. POSTAL SVC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 18 / 2014
Mailing Address 1750 Pennsylvania Ave. NW		Amount of Each Disbursement this Period 11.55 Transaction ID : EXPB112397
City Washington State DC Zip Code 20006	Purpose of Disbursement POSTAGE Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	801.07
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 148 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. VOTE RITE SYSTEMS, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 3440 VIKING DR. #105		Amount of Each Disbursement this Period 1757.50 Transaction ID : EXPB112373
City SACRAMENTO	State CA	
Zip Code 95827	Purpose of Disbursement DATA PROCESSING	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. ZINFANDEL CENTER		Date of Disbursement M M / D D / Y Y Y Y 11 / 19 / 2014
Mailing Address 2220 DOUGLAS BLVD. #280		Amount of Each Disbursement this Period 1293.00 Transaction ID : EXPB112374
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement RENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. ZINFANDEL CENTER		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2014
Mailing Address 2220 DOUGLAS BLVD. #280		Amount of Each Disbursement this Period 2586.50 Transaction ID : EXPB112375
City ROSEVILLE	State CA	
Zip Code 95661	Purpose of Disbursement RENT	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5637.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 155	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SALESFORCE.COM		Date of Disbursement M M / D D / Y Y Y Y 11 / 24 / 2014
Mailing Address 1 MARKET ST. #300		Amount of Each Disbursement this Period 375.00 Transaction ID : EXPB112392
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement SOFTWARE Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	256118.57

**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 150 OF 155	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. OUR COUNTRY DESERVES BETTER PAC		Date of Disbursement M M / D D / Y Y Y Y 10 / 20 / 2014
Mailing Address 30151 TOMAS ST		Amount of Each Disbursement this Period 200.00 Transaction ID : EXPB112432
City RANCHO SANTA MARGARITA State CA Zip Code 92688	Purpose of Disbursement REFUND Category/Type 010	
Candidate Name OUR COUNTRY DESERVES BETTER PAC	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	200.00
TOTAL This Period (last page this line number only).....	200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 151 OF 155	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CARL DEMAIO FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2014
Mailing Address P. O. BOX 27227		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB111219
City SAN DIEGO	State CA	
Zip Code 92198	Purpose of Disbursement 011	Category/ Type
Candidate Name CARL DEMAIO	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 52	

Full Name (Last, First, Middle Initial) B. DAN LOGUE FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P. O. BOX 1186		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB111921
City WILLOWS	State CA	
Zip Code 95988	Purpose of Disbursement 011	Category/ Type
Candidate Name DAN LOGUE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 03	

Full Name (Last, First, Middle Initial) C. MITCHUM FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address P. O. BOX 4130		Amount of Each Disbursement this Period 2000.00 Transaction ID : EXPB111920
City SANTA BARBARA	State CA	
Zip Code 93140	Purpose of Disbursement 011	Category/ Type
Candidate Name CHRIS MITCHUM	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 24	

SUBTOTAL of Disbursements This Page (optional).....	6000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 155	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
MCCLINTOCK FOR CONGRESS

Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2014
Mailing Address 320 First Street, S.E.		Amount of Each Disbursement this Period 144000.00 Transaction ID : EXPB111922
City Washington State DC Zip Code 20003	Purpose of Disbursement TRANSFER UNNEEDED FUNDS Category/Type 008	
Candidate Name National Republican Congressional Committee	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	144000.00
TOTAL This Period (last page this line number only).....	150000.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
DAVID BAUER

Mailing Address 2150 RIVER PLAZA DR. #150

City State Zip Code
SACRAMENTO CA 95833

Nature of Debt (Purpose):
SUPPLIES

Outstanding Balance Beginning This Period		Transaction ID : PAYD112389	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="41.98"/>	<input type="text" value="0.00"/>	<input type="text" value="41.98"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CAPITAL DEVELOPMENT STRATEGIES

Mailing Address 1127 11TH ST. #310

City State Zip Code
SACRAMENTO CA 95814

Nature of Debt (Purpose):
FUNDRAISING COMMISSION

Outstanding Balance Beginning This Period		Transaction ID : PAYD110996	
<input type="text" value="3036.13"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="0.00"/>	<input type="text" value="3036.13"/>	<input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CAPITAL DEVELOPMENT STRATEGIES

Mailing Address 1127 11TH ST. #310

City State Zip Code
SACRAMENTO CA 95814

Nature of Debt (Purpose):
FUNDRAISING COMMISSION

Outstanding Balance Beginning This Period		Transaction ID : PAYD112422	
<input type="text" value="0.00"/>			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
<input type="text" value="407.18"/>	<input type="text" value="0.00"/>	<input type="text" value="407.18"/>	

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="449.16"/>
2) TOTALS This Period (last page this line number only)	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor CRISWELL ASSOCIATES		Nature of Debt (Purpose): MEDIA PRODUCTION
Mailing Address 21 ORINDA WAY #C 301		
City	State	Zip Code
ORINDA	CA	94563

Outstanding Balance Beginning This Period	Transaction ID : PAYD111444	
<input type="text" value="3650.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="3650.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor THE MONACO GROUP		Nature of Debt (Purpose): MASS MAIL
Mailing Address 1011 S. LINWOOD AVE.		
City	State	Zip Code
SANTA ANA	CA	92705

Outstanding Balance Beginning This Period	Transaction ID : PAYD110835	
<input type="text" value="7749.19"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="7749.19"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor TIM MACY & ASSOC.		Nature of Debt (Purpose): MASS MAIL
Mailing Address 1831 IRON POINT RD. #120		
City	State	Zip Code
FOLSOM	CA	95630

Outstanding Balance Beginning This Period	Transaction ID : PAYD111124	
<input type="text" value="564.28"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="564.28"/>	<input type="text" value="0.00"/>

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

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

NAME OF COMMITTEE (In Full)

MCCLINTOCK FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS		Nature of Debt (Purpose): SHIPPING
Mailing Address P. O. BOX 894820		
City LOS ANGELES	State CA	Zip Code 90189

Outstanding Balance Beginning This Period <input type="text" value="22.40"/>	Transaction ID : PAYD110832	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="22.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor VOTE RITE SYSTEMS, INC.		Nature of Debt (Purpose): DATA PROCESSING
Mailing Address 3440 VIKING DR. #105		
City SACRAMENTO	State CA	Zip Code 95827

Outstanding Balance Beginning This Period <input type="text" value="2002.60"/>	Transaction ID : PAYD110827	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2002.60"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State	Zip Code

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)	<input type="text" value="449.16"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="449.16"/>