

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

Gallegly for Congress

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

Check if different than previously reported. (ACC)

Simi Valley CA 93094 0001

2. **FEC IDENTIFICATION NUMBER** C00194803

CITY **STATE** **ZIP CODE** **STATE** **DISTRICT**

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

CA 24

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

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

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

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

Election on 11 02 2010 in the State of CA

5. Covering Period 10 14 2010 through 11 22 2010

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

Type or Print Name of Treasurer Janice Gallegly

Signature of Treasurer Electronically Filed by Janice Gallegly Date 11 23 2010

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

| | | | | | | | |
|-----------------|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | |
|-----------------|--|--|--|--|--|--|--|

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

2 / 41

Write or Type Committee Name

Gallegly for Congress

Report Covering the Period: From:

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

| | |
|---|---|
| D | D |
| 1 | 4 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

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

| | |
|---|---|
| D | D |
| 2 | 2 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

| | 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))..... | 24865.00 | 757937.92 |
| (b) Total Contribution Refunds (from Line 20(d))..... | 0.00 | 0.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))..... | 24865.00 | 757937.92 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17)..... | 169022.36 | 704515.44 |
| (b) Total Offsets to Operating Expenditures (from Line 14)..... | 0.00 | 18736.55 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))..... | 169022.36 | 685778.89 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)..... | 769310.03 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)..... | 1542.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)..... | 0.00 | |

For further information contact:

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

POST-ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 07/05)

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

Gallegly for Congress

Report Covering the Period: From:

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

| | |
|---|---|
| D | D |
| 1 | 4 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

 To:

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

| | |
|---|---|
| D | D |
| 2 | 2 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 1 | 0 |

I. RECEIPTS

| COLUMN A Total this Period | COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>2</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date of general election) | M | M | 1 | 1 | D | D | 0 | 2 | Y | Y | Y | Y | 2 | 0 | 1 | 0 | COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>3</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>2</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table> (last day of reporting period) | M | M | 1 | 1 | D | D | 0 | 3 | Y | Y | Y | Y | 2 | 0 | 1 | 0 | M | M | 1 | 1 | D | D | 2 | 2 | Y | Y | Y | Y | 2 | 0 | 1 | 0 |
|--|--|-----------|------|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | D | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 0 | 1 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | D | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 0 | 1 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| M | M | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1 | 1 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| D | D | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 2 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Y | Y | Y | Y | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 | 0 | 1 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. CONTRIBUTIONS (other than loans) FROM: (a) Individuals/Persons Other than Political Committees (i) Itemized (Use Schedule A) | 2420.00 | 502084.00 | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (ii) Unitemized | 1445.00 | 103819.80 | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (iii) Total of contributions from individuals | 3865.00 | 605903.80 | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (b) Political Party Committees | 0.00 | 0.00 | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| (c) Other Political Committees | 21000.00 | 152034.12 | 0.00 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and 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) |
|---|--|--|
| (d) The Candidate | | |
| 0.00 | 0.00 | 0.00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d)) | | |
| 24865.00 | 757937.92 | 0.00 |
| 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) | | |
| 0.00 | 18736.55 | 0.00 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc) | | |
| 0.00 | 9460.25 | 0.00 |
| 16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) | | |
| 24865.00 | 786134.72 | 0.00 |

POST ELECTION DETAILED SUMMARY PAGE

Write or Type Committe Name

Gallegly for Congress

Report the covering period

From:

10

14

2010

To:

11

22

2010

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 * Through * (date after general election) (last day of reporting period) (* See page 5 for date) |
|-------------------------------|---|--|
|-------------------------------|---|--|

17. OPERATING EXPENDITURES

169022.36

704515.44

2833.81

18. TRANSFER TO OTHER AUTHORIZED COMMITTEES

0.00

0.00

0.00

19. LOAN PAYMENTS

(a) Of Loans Made or Guaranteed by the Candidate

0.00

0.00

0.00

(b) Of All Other Loans

0.00

0.00

0.00

(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))

0.00

0.00

0.00

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other Than Political Committees

0.00

0.00

0.00

(b) Political Party Committees

0.00

0.00

0.00

**POST ELECTION DETAILED
SUMMARY PAGE**

FEC Form 3 (Revised 1/01)

Report of Receipts and 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 * Through * (date after general election) (last day of reporting period) (* See page 5 for date) |
|--------------------------------------|--|---|
|--------------------------------------|--|---|

(c) Other political committees (such as PACs)

| | | |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

| | | |
|------|------|------|
| 0.00 | 0.00 | 0.00 |
|------|------|------|

21. OTHER DISBURSEMENTS

| | | |
|----------|-----------|------|
| 90250.00 | 109351.75 | 0.00 |
|----------|-----------|------|

22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

| | | |
|-----------|-----------|---------|
| 259272.36 | 813867.19 | 2833.81 |
|-----------|-----------|---------|

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))

| | | |
|----------|-----------|------|
| 24865.00 | 757937.92 | 0.00 |
|----------|-----------|------|

IV. NET OPERATING EXPENDITURES

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

| | | |
|-----------|-----------|---------|
| 169022.36 | 685778.89 | 2833.81 |
|-----------|-----------|---------|

V. CASH SUMMARY

| | |
|--|------------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD | 1003717.39 |
| 24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16)..... | 24865.00 |
| 25. SUBTOTAL(add Line 23 and Line 24) | 1028582.39 |
| 26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22)..... | 259272.36 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25)..... | 769310.03 |

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

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

Mailing Address 6256 Montalvo Drive

City State Zip Code
Ventura CA 93003

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
899.00

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

Transaction ID: SA11AI.27817

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Mr. Anthony Bevan

Mailing Address 2189 Hillcrest Drive

City State Zip Code
Ventura CA 93001

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
220.00

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

Transaction ID: SA11AI.27820

Amount of Each Receipt this Period
20.00

C. Full Name (Last, First, Middle Initial)
June Boskovich

Mailing Address 2025 Jennifer Place

City State Zip Code
Camarillo CA 93012

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

Name of Employer Farmer Occupation Boskovich Farms

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

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

Transaction ID: SA11AI.27840

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **620.00**

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

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

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

FOR LINE NUMBER: PAGE 8 / 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Mrs Mary Conant

Mailing Address 1420 Magnolia Drive

City State Zip Code
Santa Paula CA 93060

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
None Homemaker

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.27834

Amount of Each Receipt this Period
100.00

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
James H. Harrison

Mailing Address 1820 Coronado Place

City State Zip Code
Oxnard CA 93030-3119

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Harrison Rubbish Company Business Owner

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.27839

Amount of Each Receipt this Period
500.00

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Mr Theodore Lapadakis

Mailing Address 3639 Harbor Blvd.
#120

City State Zip Code
Ventura CA 93001

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
T.P.L. Enterprises Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

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

Transaction ID: SA11AI.27821

Amount of Each Receipt this Period
300.00

Amount of Each Receipt this Period
929.00

SUBTOTAL of Receipts This Page (optional) 900.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 9 / 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Andrew Manatos
Mailing Address 1100 New Hampshire Ave., NW
City Washington State DC Zip Code 20037
FEC ID number of contributing federal political committee. **C**
Name of Employer Manatos & Manatos Occupation Lobbyist
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt 11 / 02 / 2010
Transaction ID: SA11AI.27868
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr Don Putnam
Mailing Address 764 Camino Manzanaz
City Thousand Oaks State CA Zip Code 91360
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Retired
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 600.00
Date of Receipt 10 / 28 / 2010
Transaction ID: SA11AI.27859
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Georgia Wiester
Mailing Address 7760 Santa Rosa Road
City Buellton State CA Zip Code 93427
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 400.00
Date of Receipt 10 / 19 / 2010
Transaction ID: SA11AI.27828
Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 900.00
TOTAL This Period (last page this line number only) ▶ 2420.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 41
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
AMERICAN COUNCIL OF ENGINEERING COMPANIES (ACEC/PAC)

Mailing Address 1015 15th St. NW
Suite 802

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00010868

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11C.27850

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN MEDICAL ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 25 MASSACHUSETTS AVENUE NW
SUITE 600

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00000422

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.27864

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ANHEUSER-BUSCH COMPANIES INC. POLITICAL ACTION COMMITTEE

Mailing Address One Busch Place 202-7

City St. Louis State MO Zip Code 63118

FEC ID number of contributing federal political committee. **C** C00034488

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

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

Transaction ID: SA11C.27853

Amount of Each Receipt this Period
1500.00

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

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

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

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
COMCAST CORP. POLITICAL ACTION COMMITTEE

Mailing Address 1500 Market Street
35th Floor

City Philadelphia State PA Zip Code 19102

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

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

Transaction ID: SA11C.27863

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 Pennsylvania Avenue, NW
South Building, Suite 600

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00007880

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: SA11C.27867

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOBILE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City MCLEAN State VA Zip Code 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

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

Transaction ID: SA11C.27854

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00

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

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

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

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
HUMANE USA POLITICAL ACTION COMMITTEE
 Mailing Address PO BOX 19224
 City Washington State DC Zip Code 20036
 Date of Receipt 10 / 25 / 2010
Transaction ID: SA11C.27849
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C** C00350439
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 6750.00

B. Full Name (Last, First, Middle Initial)
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS
 Mailing Address 1750 NEW YORK NW
 City WASHINGTON State DC Zip Code 20006
 Date of Receipt 10 / 18 / 2010
Transaction ID: SA11C.27814
 Amount of Each Receipt this Period 2000.00
 FEC ID number of contributing federal political committee. **C** C70003108
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00

C. Full Name (Last, First, Middle Initial)
LIFE TECHNOLOGIES CORPORATION EMPLOYEES POLITICAL ACTION COMMITTEE
 Mailing Address 1050 K Street NW, Suite 310
 Suite #580 South
 City Washington State DC Zip Code 20001
 Date of Receipt 10 / 18 / 2010
Transaction ID: SA11C.27815
 Amount of Each Receipt this Period 1000.00
 FEC ID number of contributing federal political committee. **C** C00404442
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional) ► 4000.00
TOTAL This Period (last page this line number only) ►

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

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

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City ARLINGTON State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 28 / 2010
Transaction ID: SA11C.27857
 Amount of Each Receipt this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF BROADCASTERS TELEVISION AND RADIO POLITICAL ACTION COMMITTEE

Mailing Address 1771 N Street NW

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00009985

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 10 / 26 / 2010
Transaction ID: SA11C.27852
 Amount of Each Receipt this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
NATIONAL ASSOCIATION OF INSURANCE AND FINANCIAL ADVISORS POLITICAL ACTION COMMITTEE

Mailing Address 2901 Telestar Court

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 10 / 19 / 2010
Transaction ID: SA11C.27823
 Amount of Each Receipt this Period: 2500.00

SUBTOTAL of Receipts This Page (optional) ► 5500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 41
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
TEXAS INDUSTRIES INC POLITICAL ACTION COMM

Mailing Address 1341 W Mockingbird Lane

City State Zip Code
Dallas TX 75247

FEC ID number of contributing federal political committee. **C** C00176388

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

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

Transaction ID: SA11C.27848

Amount of Each Receipt this Period
1500.00

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1500.00 |
| TOTAL This Period (last page this line number only) | ▶ | 21000.00 |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Aaron Thomas Printing

Transaction ID: SB17.27878
Date of Disbursement

Mailing Address 9260 Owensmouth Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 7 | | 2 | 0 | 1 | 0 |

City State Zip Code
Chatsworth CA 91311

Amount of Each Disbursement this Period

| |
|----------|
| 69028.45 |
|----------|

Purpose of Disbursement
Printing

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Aaron Thomas Printing

Transaction ID: SB17.27927
Date of Disbursement

Mailing Address 9260 Owensmouth Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Chatsworth CA 91311

Amount of Each Disbursement this Period

| |
|----------|
| 55987.46 |
|----------|

Purpose of Disbursement
Campaign brochures and postage

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
American Express

Transaction ID: SB17.27881
Date of Disbursement

Mailing Address P.O. Box 0001

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Los Angeles CA 90096-0001

Amount of Each Disbursement this Period

| |
|---------|
| 1645.53 |
|---------|

Purpose of Disbursement
Credit card payment

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|-----------|
| 126661.44 |
|-----------|

TOTAL This Period (last page this line number only)

| |
|--|
| |
|--|

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Larsen's Grill

Transaction ID: SB17.27881.0
Date of Disbursement

Mailing Address 1555 Simi Town Center Way

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|--------|
| 352.25 |
|--------|

Purpose of Disbursement
Campaign staff meeting

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

[MEMO ITEM]

State: District:

B.

Full Name (Last, First, Middle Initial)
Bluefin Grill & Sushi

Transaction ID: SB17.27881.1
Date of Disbursement

Mailing Address 1390 Madera Road

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|-------|
| 56.72 |
|-------|

Purpose of Disbursement
Volunteer lunch

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

[MEMO ITEM]

State: District:

C.

Full Name (Last, First, Middle Initial)
Redfish

Transaction ID: SB17.27881.3
Date of Disbursement

Mailing Address 1555 Simi Town Center

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|--------|
| 199.41 |
|--------|

Purpose of Disbursement
Staff meeting

| |
|---------------|
| Category/Type |
|---------------|

Candidate Name

Office Sought: House Senate President

Disbursement For: 2010
 Primary General Other (specify) ▼

[MEMO ITEM]

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|------|
| 0.00 |
|------|

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

| |
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| |
|--|

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Costco Wholesale</p> <p>Mailing Address 5700 Lindero Canyon Road</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27881.4</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="324.60"/></p> <p>[MEMO ITEM]</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) Patch Media</p> <p>Mailing Address 584 Broadway, #808</p> <p>City New York City State NY Zip Code 10012</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27881.6</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p> <p>[MEMO ITEM]</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Marie Calender's</p> <p>Mailing Address Easy Street</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Volunteer lunch</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27881.7</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.96"/></p> <p>[MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) American Express</p> <p>Mailing Address P.O. Box 0001</p> <p>City Los Angeles State CA Zip Code 90096-0001</p> <p>Purpose of Disbursement Credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.28006</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 1474.08</p> <p>Category/Type</p> |
| <p>B. Full Name (Last, First, Middle Initial) Bluefin Grill & Sushi</p> <p>Mailing Address 1390 Madera Road</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Volunteer luncheon</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.28006.1</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 28.04</p> <p>[MEMO ITEM]</p> <p>Category/Type</p> |
| <p>C. Full Name (Last, First, Middle Initial) Four Seasons Hotel</p> <p>Mailing Address Two Dole Drive</p> <p>City Westlake Village State CA Zip Code 91362</p> <p>Purpose of Disbursement Dinner meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.28006.2</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 402.43</p> <p>[MEMO ITEM]</p> <p>Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

1474.08

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Larsen's Grill

Mailing Address 1555 Simi Town Center Way

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Volunteer lunches

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28006.3
Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

85.34

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
El Torito

Mailing Address 2498 Erringer Road

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Volunteer lunches

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28006.4
Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

63.78

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Costco Wholesale #128

Mailing Address 2660 Park Center Drive

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Office equipment and supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28006.6
Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

838.15

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 20 / 41

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|----|---|---|
| A. | Full Name (Last, First, Middle Initial) Assets Management <hr/> Mailing Address 750 Irvine Road <hr/> City Simi Valley State CA Zip Code 93065 <hr/> Purpose of Disbursement Office Space Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27923 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 800.00 |
| B. | Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address P.O. Box 79075 <hr/> City Phoeniz State AZ Zip Code 85062-9075 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27810 Date of Disbursement 10 / 18 / 2010 <hr/> Amount of Each Disbursement this Period 264.57 |
| C. | Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address P.O. Box 79075 <hr/> City Phoeniz State AZ Zip Code 85062-9075 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27920 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 222.09 |

SUBTOTAL of Disbursements This Page (optional) ▶

1286.66

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 21 / 41

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) AT&T <hr/> Mailing Address P.O. Box 79075 <hr/> City Phoenix State AZ Zip Code 85062-9075 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27986 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 291.76 |
| | Category/ Type |
| | Category/ Type |
| B. Full Name (Last, First, Middle Initial) Frank Avalon <hr/> Mailing Address 5400 Oak Park Lane <hr/> City Oak Park State CA Zip Code 91377 <hr/> Purpose of Disbursement Band for election night Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27980 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 800.00 |
| | Category/ Type |
| | Category/ Type |
| C. Full Name (Last, First, Middle Initial) Bansbach, Mary <hr/> Mailing Address 3174 Evelyn Avenue <hr/> City Simi Valley State CA Zip Code 96063 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27921 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0 |
| | Amount of Each Disbursement this Period 3200.00 |
| | Category/ Type |
| | Category/ Type |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4291.76 |
| TOTAL This Period (last page this line number only) ▶ | [] |

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

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

Mailing Address 3174 Evelyn Avenue

City State Zip Code
Simi Valley CA 96063

Purpose of Disbursement
Reimbursement of funds advanced

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28014
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 2 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

303.66

B.

Full Name (Last, First, Middle Initial)
Staples

Mailing Address 2880 Cochran Street

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28014.0
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 2 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

47.63

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Costco Wholesale

Mailing Address 5700 Lindero Canyon Road

City State Zip Code
Westlake Village CA 91362

Purpose of Disbursement
Office supplies

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28014.1
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 2 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

120.94

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

303.66

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
El Torito

Mailing Address 2498 Erringer Road

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Volunteer lunch
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.28014.2
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 2 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|-------|
| 40.64 |
|-------|

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Marie Calender's

Mailing Address Easy Street

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Volunteer lunch
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.28014.3
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 2 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|-------|
| 25.96 |
|-------|

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Bluefin Grill & Sushi

Mailing Address 1390 Madera Road

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Election night party
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.28022
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | / | 0 | 3 | / | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|---------|
| 2300.00 |
|---------|

SUBTOTAL of Disbursements This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Chase Bank

Transaction ID: SB17.27926
Date of Disbursement

Mailing Address 660 Los Angeles Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|---------|
| 3095.50 |
|---------|

Purpose of Disbursement
Taxes

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Chase Card Service

Transaction ID: SB17.27904
Date of Disbursement

Mailing Address P.O. Box 94014

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Palatine IL 60094-4014

Amount of Each Disbursement this Period

| |
|---------|
| 2651.85 |
|---------|

Purpose of Disbursement
Credit card payment

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Simi Gas

Transaction ID: SB17.27904.0
Date of Disbursement

Mailing Address 501 E. Los Angeles Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|--------|
| 500.00 |
|--------|

Purpose of Disbursement
Gas for bus

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|---------|
| 5747.35 |
|---------|

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

| |
|--|
| |
|--|

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Grand Vista Hotel

Mailing Address 999 Enchanted Way

City State Zip Code
Simi Valley CA 93065

Purpose of Disbursement
Staff lodging
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.27904.1
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|--------|
| 192.00 |
|--------|

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address P.O. Box 66282

City State Zip Code
Chicago IL 60666-0282

Purpose of Disbursement
Travel
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.27904.3
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|--------|
| 279.40 |
|--------|

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Ventura County Star

Mailing Address 5250 Ralston Street

City State Zip Code
Ventura CA 93001

Purpose of Disbursement
Ad
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

Transaction ID: SB17.27904.4
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|--------|
| 245.82 |
|--------|

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|------|
| 0.00 |
|------|

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

| |
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| |
|--|

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Political Data

Mailing Address P.O. Box 1706

City Burbank State CA Zip Code 91507

Purpose of Disbursement
Consulting

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27904.9
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|---------|
| 1152.06 |
|---------|

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Chase Card Service

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094-4014

Purpose of Disbursement
Credit card payment

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27995
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 0 | 2 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|---------|
| 5070.98 |
|---------|

C.

Full Name (Last, First, Middle Initial)
U.S. House Gift Shop

Mailing Address B 218 Longworth HOB

City Washington State DC Zip Code 20515

Purpose of Disbursement
Ornaments for volunteers & eagles

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27995.0
Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 0 | 2 | | 2 | 0 | 1 | 0 |

Amount of Each Disbursement this Period

| |
|---------|
| 2941.54 |
|---------|

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 5070.98 |
|---------|

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)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
United Airlines

Mailing Address P.O. Box 66282

City Chicago State IL Zip Code 60666-0282

Purpose of Disbursement
Travel

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27995.4
Date of Disbursement

| | | | | | | | | | |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|
| ^M 1 | ^M 1 | / | ^D 0 | ^D 2 | / | ^Y 2 | ^Y 0 | ^Y 1 | ^Y 0 |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|

Amount of Each Disbursement this Period

| |
|------|
| 9.49 |
|------|

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Office Max

Mailing Address 394 N. Moorpark Road

City Thousand Oaks State CA Zip Code 93060

Purpose of Disbursement
Office supplies and equipment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27995.5
Date of Disbursement

| | | | | | | | | | |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|
| ^M 1 | ^M 1 | / | ^D 0 | ^D 2 | / | ^Y 2 | ^Y 0 | ^Y 1 | ^Y 0 |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|

Amount of Each Disbursement this Period

| |
|---------|
| 1529.34 |
|---------|

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Amazon.com

Mailing Address 410 Terry Avenue North

City Seattle State WA Zip Code 98109

Purpose of Disbursement
Office equipment

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27995.6
Date of Disbursement

| | | | | | | | | | |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|
| ^M 1 | ^M 1 | / | ^D 0 | ^D 2 | / | ^Y 2 | ^Y 0 | ^Y 1 | ^Y 0 |
|----------------|----------------|---|----------------|----------------|---|----------------|----------------|----------------|----------------|

Amount of Each Disbursement this Period

| |
|--------|
| 335.30 |
|--------|

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

| |
|------|
| 0.00 |
|------|

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

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|---|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Citi Card</p> <p>Mailing Address P.O. Box 6415</p> <p>City The Lakes State NV Zip Code 88901-6415</p> <p>Purpose of Disbursement Credit card payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB17.27928</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 6331.64</p> <p>Category/Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) SS Graphics, Inc.</p> <p>Mailing Address 4176 6th Street</p> <p>City Wyandotte State MI Zip Code 48192</p> <p>Purpose of Disbursement Signs</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB17.27928.0</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 397.58</p> <p>[MEMO ITEM]</p> <p>Category/Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Fess Parker Winery</p> <p>Mailing Address 6200 Foxen Canyon Road</p> <p>City Los Olivos State CA Zip Code 93441</p> <p>Purpose of Disbursement Campaign rally luncheon</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB17.27928.1</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 652.50</p> <p>[MEMO ITEM]</p> <p>Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

6331.64

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)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) Albertson's</p> <p>Mailing Address Olson Road</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Cards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27928.2</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 4.32</p> <p>[MEMO ITEM]</p> |
| <p>B. Full Name (Last, First, Middle Initial) Postmaster</p> <p>Mailing Address 225 Simi Village Drive</p> <p>City Simi Valley State CA Zip Code 93065</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27928.3</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 17.10</p> <p>[MEMO ITEM]</p> |
| <p>C. Full Name (Last, First, Middle Initial) Acorn Newspapers</p> <p>Mailing Address 30423 Canwood Street</p> <p>City Agoura Hills State CA Zip Code 91301</p> <p>Purpose of Disbursement Ad</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27928.5</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 1631.60</p> <p>[MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|-----------|---|--|
| A. | Full Name (Last, First, Middle Initial) Ventura County Star Mailing Address 5250 Ralston Street City Ventura State CA Zip Code 93001 Purpose of Disbursement Ad Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27928.6 Date of Disbursement 10 / 28 / 2010 Amount of Each Disbursement this Period 3442.69 [MEMO ITEM] |
| B. | Full Name (Last, First, Middle Initial) Congressional Club Mailing Address 2001 New Hampshire, NW City Washington State DC Zip Code 20009-3484 Purpose of Disbursement Dues Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27968 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 150.00 |
| C. | Full Name (Last, First, Middle Initial) DMI Mailing Address 1145 W. Collins Avenue City Orange State CA Zip Code 92867 Purpose of Disbursement Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27879 Date of Disbursement 10 / 27 / 2010 Amount of Each Disbursement this Period 3750.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

3900.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) Federal Express</p> <p>Mailing Address P.O. Box 1140</p> <p>City Memphis State TN Zip Code 38101-1140</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27919</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 122.68</p> |
| <p>B. Full Name (Last, First, Middle Initial) ELTON GALLEGLY</p> <p>Mailing Address PO BOX 940001</p> <p>City SIMI VALLEY State CA Zip Code 93094</p> <p>Purpose of Disbursement Reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 24</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27976</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 115.05</p> |
| <p>C. Full Name (Last, First, Middle Initial) Frank Avalon</p> <p>Mailing Address 5400 Oak Park Lane</p> <p>City Oak Park State CA Zip Code 91377</p> <p>Purpose of Disbursement Tip for band</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB17.27976.0</p> <p>Date of Disbursement 11 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>[MEMO ITEM]</p> |

SUBTOTAL of Disbursements This Page (optional) **237.73**

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)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Janice Gallegly

Transaction ID: SB17.27922
Date of Disbursement

Mailing Address P.O. Box 940001

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93094-0001

Amount of Each Disbursement this Period

| |
|---------|
| 2200.00 |
|---------|

Purpose of Disbursement
Salary

| |
|--|
| |
|--|

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Janice Gallegly

Transaction ID: SB17.27939
Date of Disbursement

Mailing Address P.O. Box 940001

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93094-0001

Amount of Each Disbursement this Period

| |
|--------|
| 681.42 |
|--------|

Purpose of Disbursement
Reimbursement for expenses advanced

| |
|--|
| |
|--|

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Office Depot

Transaction ID: SB17.27939.2
Date of Disbursement

Mailing Address P.O. Box 9020

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Des Moines IA 50368-9020

Amount of Each Disbursement this Period

| |
|-------|
| 50.30 |
|-------|

Purpose of Disbursement
Office supplies

| |
|--|
| |
|--|

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

| |
|---------|
| 2881.42 |
|---------|

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Marie Calender's

Transaction ID: SB17.27939.6
Date of Disbursement

Mailing Address Easy Street

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|------|
| 7.79 |
|------|

Purpose of Disbursement
Volunteer lunch

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Costco Wholesale #128

Transaction ID: SB17.27939.8
Date of Disbursement

Mailing Address 2660 Park Center Drive

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|-------|
| 39.61 |
|-------|

Purpose of Disbursement
Office supplies

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
U.S. House Members Dining Room

Transaction ID: SB17.27939.12
Date of Disbursement

Mailing Address U. S. Capitol

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Washington DC 20515

Amount of Each Disbursement this Period

| |
|-------|
| 28.85 |
|-------|

Purpose of Disbursement
Constituent luncheon

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

| |
|------|
| 0.00 |
|------|

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

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Simi Valley Days Foundation

Transaction ID: SB17.27939.13
Date of Disbursement

Mailing Address P. O. Box 164

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93062

Amount of Each Disbursement this Period

| |
|-------|
| 35.00 |
|-------|

Purpose of Disbursement
Extra passes
Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
Simi Valley Republican Women

Transaction ID: SB17.27939.14
Date of Disbursement

Mailing Address P. O. Box 630061

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93063

Amount of Each Disbursement this Period

| |
|-------|
| 25.00 |
|-------|

Purpose of Disbursement
Luncheon
Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
LH Mobile Auto Detailing

Transaction ID: SB17.27939.16
Date of Disbursement

Mailing Address 1281 Hartley Avenue

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 2 | 8 | | 2 | 0 | 1 | 0 |

City State Zip Code
Simi Valley CA 93065

Amount of Each Disbursement this Period

| |
|--------|
| 125.00 |
|--------|

Purpose of Disbursement
Bus detailing
Candidate Name

Category/
Type

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|------|
| 0.00 |
|------|

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Janice Gallegly Mailing Address P.O. Box 940001 City Simi Valley State CA Zip Code 93094-0001 Purpose of Disbursement Reimbursement campaign mileage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27985 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 2099.07 |
| B. | Full Name (Last, First, Middle Initial) Home Depot Mailing Address 575 Cochran Street City Simi Valley State VT Zip Code 93065 Purpose of Disbursement Sign supplies Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27877 Date of Disbursement 10 / 27 / 2010 Amount of Each Disbursement this Period 222.89 |
| C. | Full Name (Last, First, Middle Initial) Netguy LLC Mailing Address 2470 Stearns Street City Simi Valley State CA Zip Code 93063 Purpose of Disbursement On site support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.28026 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 125.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

2446.96

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 36 / 41

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
Mr. Tom Pfeifer

Mailing Address 8209 Smithfield Avenue

City Springfield State VA Zip Code 22152

Purpose of Disbursement
Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.28025
Date of Disbursement

11 / 02 / 2010

Amount of Each Disbursement this Period

1610.00

B.

Full Name (Last, First, Middle Initial)
Political Data

Mailing Address P.O. Box 1706

City Burbank State CA Zip Code 91507

Purpose of Disbursement
Mail file

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27808
Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

204.08

C.

Full Name (Last, First, Middle Initial)
Political Data

Mailing Address P.O. Box 1706

City Burbank State CA Zip Code 91507

Purpose of Disbursement
Mail lists

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.27969
Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

2680.93

SUBTOTAL of Disbursements This Page (optional) ▶

4495.01

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)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Gabriel Rodriguez <hr/> Mailing Address 971 W. Harding <hr/> City Santa Maria State CA Zip Code 93455 <hr/> Purpose of Disbursement Sign removal Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27988 Date of Disbursement 11 / 05 / 2010 <hr/> Amount of Each Disbursement this Period 240.00 |
| B. | Full Name (Last, First, Middle Initial) Roy's Towing <hr/> Mailing Address 1344 1/2 Thousand Oaks Blvd. <hr/> City Thousand Oaks State CA Zip Code 91360 <hr/> Purpose of Disbursement Bus batteries Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27875 Date of Disbursement 10 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 319.90 |
| C. | Full Name (Last, First, Middle Initial) Simi Stow it <hr/> Mailing Address 75 W. Easy Street <hr/> City Simi Valley State CA Zip Code 93065 <hr/> Purpose of Disbursement Storage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27924 Date of Disbursement 10 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 86.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

645.90

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|-----------|---|---|
| A. | Full Name (Last, First, Middle Initial) Sparkletts Mailing Address P.O. Box 515326 City Los Angeles State CA Zip Code 90051-6626 Purpose of Disbursement Water Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27987 Date of Disbursement 11 / 02 / 2010 Amount of Each Disbursement this Period 12.96 |
| B. | Full Name (Last, First, Middle Initial) Time Warner Mailing Address 485 East Street City Simi Valley State CA Zip Code 93065 Purpose of Disbursement Cable/internet/phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27971 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 119.95 |
| C. | Full Name (Last, First, Middle Initial) United Airlines Mailing Address P.O. Box 66282 City Chicago State IL Zip Code 60666-0282 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB17.27809 Date of Disbursement 10 / 18 / 2010 Amount of Each Disbursement this Period 219.34 |

SUBTOTAL of Disbursements This Page (optional) ▶

352.25

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Gallegly for Congress

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) Victors Window Cleaning | Transaction ID: SB17.27791 |
| | Mailing Address P. O. Box 2145 | Date of Disbursement 10 / 14 / 2010 |
| | City Simi Valley State CA Zip Code 93062 | Amount of Each Disbursement this Period 20.00 |
| | Purpose of Disbursement Office maintenance | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |
| B. | Full Name (Last, First, Middle Initial) Victors Window Cleaning | Transaction ID: SB17.27972 |
| | Mailing Address P. O. Box 2145 | Date of Disbursement 11 / 01 / 2010 |
| | City Simi Valley State CA Zip Code 93062 | Amount of Each Disbursement this Period 20.00 |
| | Purpose of Disbursement Maintenance | Category/ Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | State: District: | |

| | |
|---|-----------|
| SUBTOTAL of Disbursements This Page (optional) | 40.00 |
| TOTAL This Period (last page this line number only) | 168466.84 |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 40 / 41

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

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A.

Full Name (Last, First, Middle Initial)
NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Transaction ID: SB21.27967

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 1 | 8 | | 2 | 0 | 1 | 0 |

Mailing Address 320 FIRST STREET SE

Amount of Each Disbursement this Period

| |
|----------|
| 90000.00 |
|----------|

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Donation

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
VCRWF

Transaction ID: SB21.27975

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 0 | 1 | | 2 | 0 | 1 | 0 |

Mailing Address 3310 W. Sierra Drive

Amount of Each Disbursement this Period

| |
|--------|
| 250.00 |
|--------|

City Westlake Village State CA Zip Code 91361

Purpose of Disbursement
Donation

| |
|-------------------|
| Category/ Type |
|-------------------|

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

90250.00

TOTAL This Period (last page this line number only)

90250.00

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

| | |
|---|---|
| (Use separate schedule(s) for each numbered line) | PAGE 41 / 41 |
| | FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10 |

NAME OF COMMITTEE (In Full)
 Gallegly for Congress

| | |
|---|---|
| A. Full Name (Last, First, Middle Initial) of Debtor or Creditor James Rowan dba DeAnza Communication | Nature of Debt (Purpose): Slate mailer refund owed |
| Mailing Address 65 Washington Street, #310 | |
| City State ZIP Code Santa Clara CA 95050 | |

| | | |
|--|---------------------------------|--|
| Outstanding Balance Beginning This Period 1310.00 | Transaction ID: SD9.6280 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 1310.00 |

| | |
|--|---|
| B. Full Name (Last, First, Middle Initial) of Debtor or Creditor KADY / TV | Nature of Debt (Purpose): Media but still owed |
| Mailing Address 633 Maulhardt Avenue | |
| City State ZIP Code Oxnard CA 93030 | |

| | | |
|---|---------------------------------|---|
| Outstanding Balance Beginning This Period 232.00 | Transaction ID: SD9.6281 | |
| Amount Incurred This Period 0.00 | Payment This Period 0.00 | Outstanding Balance at Close of This Period 232.00 |

| | |
|--|---------|
| 1) SUBTOTALS This Period This Page (optional)..... | 1542.00 |
| 2) TOTALS This Period (last page this line number only)..... | 1542.00 |
| 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... | 0.00 |
| 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) | 1542.00 |