

**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 226 OF 227
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Issa for Congress

Full Name (Last, First, Middle Initial) A. REPUBLICAN PARTY OF SAN DIEGO COUNTY		Date of Disbursement M M / D D / Y Y Y Y 08 / 22 / 2012
Mailing Address 5173 WARING ROAD #447		Amount of Each Disbursement this Period 2500.00 Transaction ID : EXPB20999
City SAN DIEGO	State CA	
Zip Code 92120	Purpose of Disbursement Contribution	Category/ Type 011
Candidate Name REPUBLICAN PARTY OF SAN DIEGO COUNTY	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Maldonado for Congress		Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2012
Mailing Address PO Box 5325		Amount of Each Disbursement this Period 603.41 Transaction ID : NONB21952 [MEMO ITEM]
City Santa Maria	State CA	
Zip Code 93456	Purpose of Disbursement Air Charter Costs	Category/ Type 011
Candidate Name Abel Maldonado for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 24	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	11725.00