

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** ▼ Example: If typing, type over the lines. 12FE4M5  
Duncan D. Hunter for Congress

ADDRESS (number and street) PO Box 1545  
 Check if different than previously reported. (ACC) El Cajon CA 92022

2. **FEC IDENTIFICATION NUMBER** ▼ C C00433524 3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)  
CITY ▲ STATE ▲ ZIP CODE ▲ STATE ▼ DISTRICT  
CA 50

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

(a) Quarterly Reports:

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

Termination Report (TER)

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

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

Election on M M / D D / Y Y Y Y in the State of  

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

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

Election on M M / D D / Y Y Y Y in the State of  

5. Covering Period M M / D D / Y Y Y Y 11 / 25 / 2014 through M M / D D / Y Y Y Y 12 / 31 / 2014

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

Type or Print Name of Treasurer Chris Marston

Signature of Treasurer Chris Marston

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y 01 / 30 / 2015

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

Office Use Only									
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**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

**Duncan D. Hunter for Congress**

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	710.00	1272436.75
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	4100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	710.00	1268336.75
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	46925.14	755887.89
(b) Total Offsets to Operating Expenditures (from Line 14).....	160.00	9529.55
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	46765.14	746358.34
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	452572.69	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Duncan D. Hunter for Congress**

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y 12 / 31 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	377190.71
(ii) Unitemized.....	210.00	36921.32
(iii) TOTAL of contributions from individuals ▶	210.00	414112.03
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	858324.72
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	710.00	1272436.75
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	160.00	9529.55
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. <b>TOTAL RECEIPTS</b> (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	870.00	1281966.30

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	46925.14	755887.89
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3600.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	4100.00
21. OTHER DISBURSEMENTS .....	0.00	66250.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	46925.14	826237.89

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	498627.83
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	870.00
25. SUBTOTAL (add Line 23 and Line 24).....	499497.83
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	46925.14
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	452572.69

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 26
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)  
**Duncan D. Hunter for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**REPUBLICAN PARTY OF RIVERSIDE COUNTY**

Mailing Address PO BOX 20091

City RIVERSIDE State CA Zip Code 92516-

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

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 08 / 2014

**Transaction ID : SA11.12974**

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

500.00

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BILL.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 3200 ASH ST		Amount of Each Disbursement this Period 382.71
City PALO ALTO	State CA	
Zip Code 94306-2239	Purpose of Disbursement ACCOUNTS PAYABLE SERVICES	Transaction ID : SB17.I6090
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BILL.COM</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 29 / 2014
Mailing Address 3200 ASH ST		Amount of Each Disbursement this Period 71.11
City PALO ALTO	State CA	
Zip Code 94306-2239	Purpose of Disbursement ACCOUNTS PAYABLE SERVICES	Transaction ID : SB17.I6091
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DARBY ALDEN</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 1284 CALLE CADELERO		Amount of Each Disbursement this Period 258.55
City CHULA VISTA	State CA	
Zip Code 91910	Purpose of Disbursement REIMBURSEMENT (SEE BELOW)	Transaction ID : SB17.I6085
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	382.71
<b>TOTAL</b> 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 7 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. RIGOBERTOS TACO SHOP</b>			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2014
Mailing Address 7094 MIRAMAR RD			Amount of Each Disbursement this Period 258.55
City SAN DIEGO	State CA	Zip Code 92121	
Purpose of Disbursement FOOD & BEVERAGES		Category/ Type	<b>Transaction ID : SB17.I6128</b>
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)		<b>[MEMO ITEM]</b> ALDEN 12/1
State: District:			

Full Name (Last, First, Middle Initial) <b>B. JOE BROWNING</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 6161 EL CAJON BLVD_X000D_APT 522 # 522			Amount of Each Disbursement this Period 171.77
City SAN DIEGO	State CA	Zip Code 92115-3922	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	<b>Transaction ID : SB17.I6093</b>
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. JIM FRANKEY</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 8025 PROSPECT WAY			Amount of Each Disbursement this Period 340.00
City LA MESA	State CA	Zip Code 91941-6426	
Purpose of Disbursement MILEAGE REIMBURSEMENT		Category/ Type	<b>Transaction ID : SB17.I6107</b>
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	511.77
<b>TOTAL</b> 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 8 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. JIM FRANKEY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>8025 PROSPECT WAY</b>		Amount of Each Disbursement this Period <b>286.27</b> <b>Transaction ID : SB17.I6108</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91941-6426</b>	Purpose of Disbursement <b>MILEAGE REIMBURSEMENT</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. JIM FRANKEY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>8025 PROSPECT WAY</b>		Amount of Each Disbursement this Period <b>498.27</b> <b>Transaction ID : SB17.I6109</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91941-6426</b>	Purpose of Disbursement <b>REIMBURSEMENT (SEE BELOW)</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. JIM FRANKEY</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 01 / 2014</b>
Mailing Address <b>8025 PROSPECT WAY</b>		Amount of Each Disbursement this Period <b>185.90</b> <b>Transaction ID : SB17.I6110</b> <b>[MEMO ITEM] FRANKEY 12/1</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91941-6426</b>	Purpose of Disbursement <b>MILEAGE REIMBURSEMENT</b>	Category/ Type
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>784.54</b>
<b>TOTAL</b> 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 9 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN SHOOTING CENTER</b>		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2014
Mailing Address 5590 RUFFIN RD		Amount of Each Disbursement this Period 290.72
City SAN DIEGO	State CA	
Zip Code 92123	Purpose of Disbursement AMMO	Transaction ID : SB17.I6086
Candidate Name	Category/Type	
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)	[MEMO ITEM] FRANKEY 12/1
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JIM FRANKEY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2014
Mailing Address 8025 PROSPECT WAY		Amount of Each Disbursement this Period 881.09
City LA MESA	State CA	
Zip Code 91941-6426	Purpose of Disbursement GRASSROOTS CONSULTING; MILEAGE REIMBURSEMENT	Transaction ID : SB17.I6111
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address P.O. BOX 877		Amount of Each Disbursement this Period 3000.00
City LA MESA	State CA	
Zip Code 91944-0877	Purpose of Disbursement CAMPAIGN CONSULTING	Transaction ID : SB17.I6119
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3881.09
<b>TOTAL</b> 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 10 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MARGARET HUNTER</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2014</b>
Mailing Address <b>P.O. BOX 877</b>		Amount of Each Disbursement this Period <b>3000.00</b>
City <b>LA MESA</b>	State <b>CA</b>	
Zip Code <b>91944-0877</b>	Purpose of Disbursement <b>CAMPAIGN CONSULTING</b>	<b>Transaction ID : SB17.I6120</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. MARK PETERS</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>350 RIVERS TRAIL PL</b>		Amount of Each Disbursement this Period <b>296.15</b>
City <b>SANTEE</b>	State <b>CA</b>	
Zip Code <b>92071</b>	Purpose of Disbursement <b>REIMBURSEMENT (SEE BELOW)</b>	<b>Transaction ID : SB17.I6122</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. VIDEO GEAR</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 25 / 2014</b>
Mailing Address <b>8969 KENAMAR DR #104</b>		Amount of Each Disbursement this Period <b>296.15</b>
City <b>SAN DIEGO</b>	State <b>CA</b>	
Zip Code <b>92121</b>	Purpose of Disbursement <b>VIDEO EQUIPMENT RENTAL</b>	<b>Transaction ID : SB17.I6154</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>3296.15</b>
<b>TOTAL</b> This Period (last page this line number only).....	

<b>3296.15</b>

**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 11 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. A-1 SELF STORAGE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 1370 N MAGNOLIA AVE		Amount of Each Disbursement this Period 249.00 <b>Transaction ID : SB17.I6080</b>
City EL CAJON State CA Zip Code 92020-1620	Purpose of Disbursement RENT	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2014
Mailing Address 182 HOWARD ST., SUITE 8		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : SB17.I6081</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement TRANSPORTATION	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 182 HOWARD ST., SUITE 8		Amount of Each Disbursement this Period 32.00 <b>Transaction ID : SB17.I6082</b>
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement TRANSPORTATION	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	298.00
<b>TOTAL</b> 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 12 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 15 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>19.00</b> <b>Transaction ID : SB17.I6083</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ADY UBER TECHNOLOGIES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 15 / 2014</b>
Mailing Address <b>182 HOWARD ST., SUITE 8</b>		Amount of Each Disbursement this Period <b>22.00</b> <b>Transaction ID : SB17.I6084</b>
City <b>SAN FRANCISCO</b> State <b>CA</b> Zip Code <b>94105</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 09 / 2014</b>
Mailing Address <b>208 S AKARD ST</b>		Amount of Each Disbursement this Period <b>510.85</b> <b>Transaction ID : SB17.I6087</b>
City <b>DALLAS</b> State <b>TX</b> Zip Code <b>75202-4295</b>	Purpose of Disbursement <b>PHONE SERVICES</b>	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>551.85</b>
<b>TOTAL</b> 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 13 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. BEARNAISE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 315 PENNSYLVANIA AVE SE		Amount of Each Disbursement this Period 275.53 <b>Transaction ID : SB17.I6088</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CAPITOL HILL CLUB</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address 300 FIRST ST SE		Amount of Each Disbursement this Period 1795.61 <b>Transaction ID : SB17.I6094</b>
City WASHINGTON	State DC	
Zip Code 20003	Purpose of Disbursement FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 03 / 2014
Mailing Address 7704 LEESBURG PIKE		Amount of Each Disbursement this Period 3.40 <b>Transaction ID : SB17.I6096</b>
City FALLS CHURCH	State VA	
Zip Code 22043	Purpose of Disbursement CC PROCESSING	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2074.54
<b>TOTAL</b> 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 14 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 15 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>0.74</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>CC PROCESSING</b>	<b>Transaction ID : SB17.I6097</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 17 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>99.00</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>EMAIL SERVICES</b>	<b>Transaction ID : SB17.I6098</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2014</b>
Mailing Address <b>7704 LEESBURG PIKE</b>		Amount of Each Disbursement this Period <b>798.00</b>
City <b>FALLS CHURCH</b>	State <b>VA</b>	
Zip Code <b>22043</b>	Purpose of Disbursement <b>DATABASE SERVICES</b>	<b>Transaction ID : SB17.I6099</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>897.74</b>
<b>TOTAL</b> 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 15 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. CONGRESSIONAL INSTITUTE, THE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 04 / 2014</b>
Mailing Address <b>1700 DIAGONAL RD._X000D_SUITE 730</b>		Amount of Each Disbursement this Period <b>1780.00</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	Purpose of Disbursement <b>HOUSE MEMBER RETREAT</b>	<b>Transaction ID : SB17.I6101</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ELECTION CFO, LLC</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2014</b>
Mailing Address <b>P.O. BOX 26141</b>		Amount of Each Disbursement this Period <b>2277.20</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22313-6141</b>	Purpose of Disbursement <b>COMPLIANCE CONSULTING; CONSULTANT EXPENSES</b>	<b>Transaction ID : SB17.I6102</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. EXPEDIA</b>		Date of Disbursement M M / D D / Y Y Y Y <b>11 / 28 / 2014</b>
Mailing Address <b>333 108TH AVE NE</b>		Amount of Each Disbursement this Period <b>128.82</b>
City <b>BELLVUE</b>	State <b>WA</b>	
Zip Code <b>98004</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	<b>Transaction ID : SB17.I6104</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>4186.02</b>
<b>TOTAL</b> 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 16 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. FEDERAL EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 22 / 2014
Mailing Address 942 S SHADY GROVE RD		Amount of Each Disbursement this Period 93.43 <b>Transaction ID : SB17.I6106</b>
City MEMPHIS State TN Zip Code 38120-4117	Purpose of Disbursement SHIPPING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GRASSHOPPER GROUP LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 08 / 2014
Mailing Address 197 1ST AVE #200 STE 200		Amount of Each Disbursement this Period 28.53 <b>Transaction ID : SB17.I6115</b>
City NEEDHAM State MA Zip Code 02494-2873	Purpose of Disbursement PHONE SERVICES	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. HILL COUNTRY</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 04 / 2014
Mailing Address 410 7TH ST NW		Amount of Each Disbursement this Period 518.00 <b>Transaction ID : SB17.I6116</b>
City WASHINGTON State DC Zip Code 20004	Purpose of Disbursement ACCOMMODATIONS	
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	639.96
<b>TOTAL</b> 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 17 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. HOOLEYS IRISH PUB AND GRILL</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2014
Mailing Address 2955 JAMACHA RD		Amount of Each Disbursement this Period 64.91
City EL CAJON State CA Zip Code 92019	Purpose of Disbursement FOOD & BEVERAGES	
Candidate Name		Transaction ID : SB17.I6117
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>B. HOTEL DEL CORONADO</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 1500 ORANGE AVE		Amount of Each Disbursement this Period 28.00
City CORONADO State CA Zip Code 92118-2918	Purpose of Disbursement PARKING	
Candidate Name		Transaction ID : SB17.I6118
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:	Category/Type	

Full Name (Last, First, Middle Initial) <b>C. KIWANIS CLUB OF ALPINE</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address C/O GREG FOX1730 ALPINE BLVD STE		Amount of Each Disbursement this Period 70.00
City ALPINE State CA Zip Code 91901-0306	Purpose of Disbursement MEMBERSHIP	
Candidate Name		Transaction ID : SB17.I6121
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:	Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	162.91
<b>TOTAL</b> 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 18 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. MONACO GROUP</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 31 / 2014</b>
Mailing Address <b>1011 S LINWOOD AVE</b>		Amount of Each Disbursement this Period <b>5379.82</b>
City <b>SANTA ANA</b>	State <b>CA</b>	
Zip Code <b>92705</b>	Purpose of Disbursement <b>PRINTING AND POSTAGE</b>	<b>Transaction ID : SB17.I6123</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. NIEDERS, RALPH</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 23 / 2014</b>
Mailing Address <b>81 E SAN MIGUEL DR</b>		Amount of Each Disbursement this Period <b>490.00</b>
City <b>CHULA VISTA</b>	State <b>CA</b>	
Zip Code <b>91911</b>	Purpose of Disbursement <b>GRASSROOTS CONSULTING</b>	<b>Transaction ID : SB17.I6125</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SAN MARCOS CHAMBER OF COMMERCE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>904 W SAN MARCOS BLVD_X000D_STE 1 STE 10</b>		Amount of Each Disbursement this Period <b>249.00</b>
City <b>SAN MARCOS</b>	State <b>CA</b>	
Zip Code <b>92078-1118</b>	Purpose of Disbursement <b>MEMBERSHIP</b>	<b>Transaction ID : SB17.I6131</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>6118.82</b>
<b>TOTAL</b> 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 19 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. SCHNEIDER'S OF CAPITOL HILL</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 11 / 2014</b>
Mailing Address <b>300 MASSACHUSETTS AVE NE</b>		Amount of Each Disbursement this Period <b>266.72</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20002</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I6132</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SMOKER LAND 2</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 17 / 2014</b>
Mailing Address <b>28120 JEFFERSON AVE. # B 202</b>		Amount of Each Disbursement this Period <b>96.94</b>
City <b>TEMECULA</b>	State <b>CA</b>	
Zip Code <b>92590</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I6135</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. SYCUAN GOLF &amp; TENNIS RESORT</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 29 / 2014</b>
Mailing Address <b>3007 DEHESA RD</b>		Amount of Each Disbursement this Period <b>67.00</b>
City <b>EL CAJON</b>	State <b>CA</b>	
Zip Code <b>92019</b>	Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>	<b>Transaction ID : SB17.I6136</b>
Candidate Name	Category/Type	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>430.66</b>
<b>TOTAL</b> 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 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial)  
**A. SYCUAN GOLF & TENNIS RESORT**

Mailing Address 3007 DEHESA RD

City EL CAJON State CA Zip Code 92019

Purpose of Disbursement  
FOOD & BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 29 / 2014

Amount of Each Disbursement this Period: 39.50

Transaction ID : SB17.I6137

Full Name (Last, First, Middle Initial)  
**B. THE GULA GRAHAM GROUP**

Mailing Address 499 S CAPITOL ST SW STE 420 STE 420

City WASHINGTON State DC Zip Code 20003-4027

Purpose of Disbursement  
FUNDRAISING CONSULTANT EXPENSES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 23 / 2014

Amount of Each Disbursement this Period: 524.11

Transaction ID : SB17.I6139

Full Name (Last, First, Middle Initial)  
**C. THE GULA GRAHAM GROUP**

Mailing Address 499 S CAPITOL ST SW STE 420 STE 420

City WASHINGTON State DC Zip Code 20003-4027

Purpose of Disbursement  
FUNDRAISING CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 04 / 2014

Amount of Each Disbursement this Period: 3535.00

Transaction ID : SB17.I6140

**SUBTOTAL** of Disbursements This Page (optional)..... 4098.61

**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 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. THE GULA GRAHAM GROUP</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 23 / 2014
Mailing Address 499 S CAPITOL ST SW STE 420 STE 420			Amount of Each Disbursement this Period 13950.00 <b>Transaction ID : SB17.I6141</b>
City WASHINGTON	State DC	Zip Code 20003-4027	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 77 W WACKER DR			Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.I6142</b>
City CHICAGO	State IL	Zip Code 60601-1604	
Purpose of Disbursement TRANSPORTATION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 01 / 2014
Mailing Address 77 W WACKER DR			Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17.I6143</b>
City CHICAGO	State IL	Zip Code 60601-1604	
Purpose of Disbursement TRANSPORTATION		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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14350.00
<b>TOTAL</b> 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 22 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>200.00</b> <b>Transaction ID : SB17.I6144</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>37.00</b> <b>Transaction ID : SB17.I6145</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>37.00</b> <b>Transaction ID : SB17.I6146</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>274.00</b>
<b>TOTAL</b> 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 23 OF 26			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>37.00</b> Transaction ID : <b>SB17.I6147</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>37.00</b> Transaction ID : <b>SB17.I6148</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y <b>12 / 01 / 2014</b>
Mailing Address <b>77 W WACKER DR</b>		Amount of Each Disbursement this Period <b>200.00</b> Transaction ID : <b>SB17.I6149</b>
City <b>CHICAGO</b>	State <b>IL</b>	
Zip Code <b>60601-1604</b>	Purpose of Disbursement <b>TRANSPORTATION</b>	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>274.00</b>
<b>TOTAL</b> 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 24 OF 26			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 5.60
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.I6150
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 5.60
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.I6151
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. UNITED AIRLINES</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 15 / 2014
Mailing Address 77 W WACKER DR		Amount of Each Disbursement this Period 1054.70
City CHICAGO State IL Zip Code 60601-1604	Purpose of Disbursement TRANSPORTATION	
Candidate Name	Category/Type	Transaction ID : SB17.I6152
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1065.90
<b>TOTAL</b> 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 25 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. US CAPITOL GIFT SHOP</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2014
Mailing Address FIRST ST SE		Amount of Each Disbursement this Period 170.85 <b>Transaction ID : SB17.I6153</b>
City WASHINGTON	State DC	
Zip Code 20004	Purpose of Disbursement DONOR ACKNOWLEDGEMENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. VONS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 618 MICHILLINDA AVE		Amount of Each Disbursement this Period 398.25 <b>Transaction ID : SB17.I6155</b>
City ARCADIA	State CA	
Zip Code 91007	Purpose of Disbursement FOOD & BEVERAGES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. VONS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2014
Mailing Address 618 MICHILLINDA AVE		Amount of Each Disbursement this Period 12.94 <b>Transaction ID : SB17.I6156</b>
City ARCADIA	State CA	
Zip Code 91007	Purpose of Disbursement FOOD & BEVERAGES	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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	582.04
<b>TOTAL</b> 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 26 OF 26	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Duncan D. Hunter for Congress**

Full Name (Last, First, Middle Initial) <b>A. WILSON CREEK WINERY</b>			Date of Disbursement M M / D D / Y Y Y Y <b>11 / 26 / 2014</b>	
Mailing Address <b>35960 RANCHO CALIFORNIA RD.</b>			Amount of Each Disbursement this Period <b>215.88</b>	
City <b>TEMECULA</b>	State <b>CA</b>	Zip Code <b>92591</b>	Transaction ID : <b>SB17.I6158</b>	
Purpose of Disbursement <b>FOOD &amp; BEVERAGES</b>		Category/Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>215.88</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>45077.19</b>