

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

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 ▼

C 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

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

through

M M /

D D /

Y Y Y Y

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 Janice Gallegly

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y

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

Write or Type Committee Name
Gallegly for Congress

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	0.00	249208.00
(b) Total Contribution Refunds (from Line 20(d))	5100.00	5100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-5100.00	244108.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	43566.69	286164.66
(b) Total Offsets to Operating Expenditures (from Line 14).....	4825.00	7241.89
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	38741.69	278922.77
8. Cash on Hand at Close of Reporting Period (from Line 27).....	737383.22	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	1542.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Gallegly for Congress

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

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	146904.00
(ii) Unitemized.....	0.00	66834.00
(iii) TOTAL of contributions from individuals ▶	0.00	213738.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	35470.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	249208.00
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.)	4825.00	7241.89
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	454.44	3470.15
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	5279.44	259920.04

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	43566.69	286164.66
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	5100.00	5100.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	5100.00	5100.00
21. OTHER DISBURSEMENTS	2500.00	3416.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	51166.69	294680.66

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	783270.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	5279.44
25. SUBTOTAL (add Line 23 and Line 24).....	788549.91
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	51166.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	737383.22

**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 35
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" 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)
Gallegly for Congress

A. Full Name (Last, First, Middle Initial)
Elton Gallegly

Mailing Address PO BOX 940001

City: SIMI VALLEY State: CA Zip Code: 93094

FEC ID number of contributing federal political committee: **C H6CA21028**

Name of Employer: United States Government Occupation: Congressman

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date: 4800.00

Date of Receipt: 03 / 03 / 2012

Transaction ID : SA14.30655

Amount of Each Receipt this Period: 4800.00

Purchase of 1991 Setra S215

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

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

Amount of Each Receipt this Period

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

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

4800.00

4800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 35			
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
	12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

A. Chase Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address 660 Los Angeles Avenue
 City State Zip Code
 Simi Valley CA 93065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
285.30

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : SA15.30646
 Amount of Each Receipt this Period
41.13
 Interest

B. Merrill Lynch
 Full Name (Last, First, Middle Initial)
 Mailing Address 400 Esplanade Drive
 City State Zip Code
 Oxnard CA 93030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2012
 Primary General
 Other (specify)
 Election Cycle-to-Date
3223.65

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2012
Transaction ID : SA15.30645
 Amount of Each Receipt this Period
413.31
 Interest

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).....

454.44
454.44

**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 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. A & R Maintenance Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address 3090 Waco Avenue		Amount of Each Disbursement this Period 285.00 Transaction ID : SB17.30507
City Simi Valley	State CA	
Zip Code 93063	Purpose of Disbursement Carpet cleaning	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Aaron Thomas Printing		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address 21344 Superior Street		Amount of Each Disbursement this Period 633.33 Transaction ID : SB17.30587
City Chatsworth	State CA	
Zip Code 91311	Purpose of Disbursement Printing	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Maria Aguirre		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 6452 Corbin Avenue		Amount of Each Disbursement this Period 255.00 Transaction ID : SB17.30505
City Reseda	State CA	
Zip Code 91335	Purpose of Disbursement Catering	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1173.33
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 8 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 507.79
City Los Angeles	State CA	
Zip Code 90096-0001	Purpose of Disbursement Credit card payment	Transaction ID : SB17.30510
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Costco Wholesale #128		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address 2660 Park Center Drive		Amount of Each Disbursement this Period 425.30
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Office & announcement event supplies	Transaction ID : SB17.30510.0
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Nothing Bundt Cakes		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address 1610 E. Thousand Oaks Blvd.		Amount of Each Disbursement this Period 75.00
City Thousand Oaks	State CA	
Zip Code 91362	Purpose of Disbursement Announcement event desserts	Transaction ID : SB17.30510.2
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	507.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. American Express		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address P.O. Box 0001		Amount of Each Disbursement this Period 952.07 Transaction ID : SB17.30540
City Los Angeles	State CA	
Zip Code 90096-0001	Purpose of Disbursement Credit card payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Larsen's Grill		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 1555 Simi Town Center Way		Amount of Each Disbursement this Period 702.01 Transaction ID : SB17.30540.0 [MEMO ITEM]
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Staff dinner meeting	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address 2880 Cochran Street		Amount of Each Disbursement this Period 57.24 Transaction ID : SB17.30540.2 [MEMO ITEM]
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	952.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 35			
	<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)
Gallegly for Congress

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

Mailing Address P.O. Box 0001

City Los Angeles State CA Zip Code 90096-0001

Purpose of Disbursement
Credit card payment

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 28 / 2012

Amount of Each Disbursement this Period
612.43

Transaction ID : SB17.30588

Category/Type

Full Name (Last, First, Middle Initial)
B. Cafe Firenze

Mailing Address 563 W. Los Angeles Avenue

City Moorpark State CA Zip Code 93021

Purpose of Disbursement
Volunteer birthday luncheon

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 28 / 2012

Amount of Each Disbursement this Period
210.13

Transaction ID : SB17.30588.0

[MEMO ITEM]

Category/Type

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

Mailing Address 2660 Park Center Drive

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement
Office supplies

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012
 Primary General
 Other (specify)

State: District:

Date of Disbursement
M M / D D / Y Y Y Y
02 / 28 / 2012

Amount of Each Disbursement this Period
249.56

Transaction ID : SB17.30588.2

[MEMO ITEM]

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... 612.43

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Vons		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 500 Los Angeles Avenue		Amount of Each Disbursement this Period 19.91
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Cards	Transaction ID : SB17.30588.5
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Albertson's		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address Olson Road		Amount of Each Disbursement this Period 32.67
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Flowers and cards	Transaction ID : SB17.30588.6
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Nothing Bundt Cakes		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 1610 E. Thousand Oaks Blvd.		Amount of Each Disbursement this Period 31.92
City Thousand Oaks	State CA	
Zip Code 91362	Purpose of Disbursement Birthday cake for volunteers	Transaction ID : SB17.30588.7
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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 12 OF 35	
	<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)
Gallegly for Congress

A. Assets Management

Full Name (Last, First, Middle Initial)
Mailing Address 750 Irvine Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement Office space

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 03 / 2012

Amount of Each Disbursement this Period: 721.00

Transaction ID : SB17.30506

B. Assets Management

Full Name (Last, First, Middle Initial)
Mailing Address 750 Irvine Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement Office space

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 02 / 2012

Amount of Each Disbursement this Period: 721.00

Transaction ID : SB17.30562

C. Assets Management

Full Name (Last, First, Middle Initial)
Mailing Address 750 Irvine Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement Utilities

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 16 / 2012

Amount of Each Disbursement this Period: 369.93

Transaction ID : SB17.30578

SUBTOTAL of Disbursements This Page (optional) 1811.93

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 13 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial)

A. Assets Management

Mailing Address 750 Irvine Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement Office space

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 28 / 2012

Amount of Each Disbursement this Period: 721.00

Transaction ID : SB17.30602

Full Name (Last, First, Middle Initial)

B. Assets Management

Mailing Address 750 Irvine Road

City Simi Valley State CA Zip Code 93065

Purpose of Disbursement Office Space

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 03 / 30 / 2012

Amount of Each Disbursement this Period: 721.00

Transaction ID : SB17.30641

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address P. O. Box 5025

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Telephone

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 09 / 2012

Amount of Each Disbursement this Period: 251.56

Transaction ID : SB17.30530

SUBTOTAL of Disbursements This Page (optional) 1693.56

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 14 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. AT&T		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P. O. Box 5025		Amount of Each Disbursement this Period 259.58 Transaction ID : SB17.30582
City Carol Stream	State IL	
Zip Code 60197	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
Purpose of Disbursement Telephone	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2012
Mailing Address P. O. Box 5025		Amount of Each Disbursement this Period 248.85 Transaction ID : SB17.30644
City Carol Stream	State IL	
Zip Code 60197	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
Purpose of Disbursement Telephone	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name	State: District:	

Full Name (Last, First, Middle Initial) c. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 293.93 Transaction ID : SB17.30537
City Carol Stream	State IL	
Zip Code 60197-6463	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Category/ Type
Purpose of Disbursement Telephone	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Candidate Name	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	802.36
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 15 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 02 / 17 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 290.93 Transaction ID : SB17.30583
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T Mobility		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2012
Mailing Address P.O. Box 6463		Amount of Each Disbursement this Period 264.59 Transaction ID : SB17.30635
City Carol Stream	State IL	
Zip Code 60197-6463	Purpose of Disbursement Telephone	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Bansbach, Mary		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 3174 Evelyn Avenue		Amount of Each Disbursement this Period 1950.00 Transaction ID : SB17.30560
City Simi Valley	State CA	
Zip Code 96063	Purpose of Disbursement Wages	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2505.52
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 35		
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Bansbach, Mary		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address 3174 Evelyn Avenue		Amount of Each Disbursement this Period 1950.00 Transaction ID : SB17.30600
City Simi Valley	State CA	
Zip Code 96063	Purpose of Disbursement Wages	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Bansbach, Mary		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 3174 Evelyn Avenue		Amount of Each Disbursement this Period 59.47 Transaction ID : SB17.30614
City Simi Valley	State CA	
Zip Code 96063	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Costco Wholesale #128		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 2660 Park Center Drive		Amount of Each Disbursement this Period 32.38 Transaction ID : SB17.30614.0 [MEMO ITEM]
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2009.47
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 225 Simi Village Drive		Amount of Each Disbursement this Period 12.09
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Postage	Transaction ID : SB17.30614.1
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Bansbach, Mary		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address 3174 Evelyn Avenue		Amount of Each Disbursement this Period 1950.00
City Simi Valley	State CA	
Zip Code 96063	Purpose of Disbursement Wages	Transaction ID : SB17.30638
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Chase Bank		Date of Disbursement M M / D D / Y Y Y Y 02 / 24 / 2012
Mailing Address 660 Los Angeles Avenue		Amount of Each Disbursement this Period 15.00
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Bank fee	Transaction ID : SB17.30586
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1965.00
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 18 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 625.63 Transaction ID : SB17.30534
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit card payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address P.O. Box 66282		Amount of Each Disbursement this Period 391.40 Transaction ID : SB17.30534.0 [MEMO ITEM]
City Chicago	State IL	
Zip Code 60666-0282	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Ventura County Star		Date of Disbursement M M / D D / Y Y Y Y 01 / 26 / 2012
Mailing Address 5250 Ralston Street		Amount of Each Disbursement this Period 234.23 Transaction ID : SB17.30534.1 [MEMO ITEM]
City Ventura	State CA	
Zip Code 93001	Purpose of Disbursement Subscription	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	625.63
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 19 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 312.05 Transaction ID : SB17.30550
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit card payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T Data		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address P. O. Box 60017		Amount of Each Disbursement this Period 29.98 Transaction ID : SB17.30550.2 [MEMO ITEM]
City Los Angeles	State CA	
Zip Code 90060	Purpose of Disbursement Wireless service	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2012
Mailing Address P.O. Box 66282		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.30550.3 [MEMO ITEM]
City Chicago	State IL	
Zip Code 60666-0282	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	312.05
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 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Chase Card Service		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address P.O. Box 94014		Amount of Each Disbursement this Period 436.03 Transaction ID : SB17.30609
City Palatine	State IL	
Zip Code 60094-4014	Purpose of Disbursement Credit card payment	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. AT&T Data		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address P. O. Box 60017		Amount of Each Disbursement this Period 14.99 Transaction ID : SB17.30609.1 [MEMO ITEM]
City Los Angeles	State CA	
Zip Code 90060	Purpose of Disbursement Wireless data	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. United Airlines		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address P.O. Box 66282		Amount of Each Disbursement this Period 317.60 Transaction ID : SB17.30609.2 [MEMO ITEM]
City Chicago	State IL	
Zip Code 60666-0282	Purpose of Disbursement Travel	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	436.03
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 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Citi Cards		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address P. O. Box 6000		Amount of Each Disbursement this Period 62.11
City The Lakes	State NV	
Zip Code 89163-6000	Purpose of Disbursement Credit card payment	Transaction ID : SB17.30597
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cochran Properties		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address P. O. Box 4867		Amount of Each Disbursement this Period 300.00
City Chatsworth	State CA	
Zip Code 91313	Purpose of Disbursement Storage	Transaction ID : SB17.30563
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Congressional Institute		Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2012
Mailing Address 1700 Diagonal Road		Amount of Each Disbursement this Period 1601.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement House Members Retreat	Transaction ID : SB17.30566
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1963.11
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 22 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Costco Membership		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2012
Mailing Address P. O. Box 34783		Amount of Each Disbursement this Period 110.00
City Seattle	State WA	
Zip Code 98124	Purpose of Disbursement Membership	Transaction ID : SB17.30539
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2671.00
City Ogden	State TN	
Zip Code 84201-0038	Purpose of Disbursement Taxes	Transaction ID : SB17.30504
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2012
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2671.00
City Ogden	State TN	
Zip Code 84201-0038	Purpose of Disbursement Taxes	Transaction ID : SB17.30565
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5452.00
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 23 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2012
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 299.00 Transaction ID : SB17.30607
City Ogden	State TN Zip Code 84201-0038	
Purpose of Disbursement Taxes	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Department of the Treasury		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2012
Mailing Address Internal Revenue Service		Amount of Each Disbursement this Period 2671.00 Transaction ID : SB17.30603
City Ogden	State TN Zip Code 84201-0038	
Purpose of Disbursement Taxes	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DMV		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2012
Mailing Address P. O. Box 942894		Amount of Each Disbursement this Period 80.00 Transaction ID : SB17.30559
City Sacramento	State CA Zip Code 94294-0894	
Purpose of Disbursement Firetruck license renewal	Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3050.00
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 24 OF 35	
	<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)
Gallegly for Congress

A. Employment Dev. Dept.

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 826276

City Sacramento State CA Zip Code 94280-0001

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 01 / 12 / 2012

Amount of Each Disbursement this Period: 1873.50

Transaction ID : SB17.30516

B. Franchise Tax Board

Full Name (Last, First, Middle Initial)
Mailing Address P.O. Box 942857

City Sacramento State CA Zip Code 94257-0501

Purpose of Disbursement Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: District:

Date of Disbursement: 02 / 29 / 2012

Amount of Each Disbursement this Period: 249.00

Transaction ID : SB17.30604

c. Elton Gallegly

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 940001

City SIMI VALLEY State CA Zip Code 93094

Purpose of Disbursement Mileage & parking reimbursement - retreat

Candidate Name

Office Sought: House Senate President

Disbursement For: 2012 Primary General Other (specify)

State: CA District: 24

Date of Disbursement: 01 / 24 / 2012

Amount of Each Disbursement this Period: 157.85

Transaction ID : SB17.30558

SUBTOTAL of Disbursements This Page (optional) 2280.35

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)		PAGE 25 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 39.77 Transaction ID : SB17.30509
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Reimbursement - Albertson's soft drinks	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 2290.00 Transaction ID : SB17.30561
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Wages	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 207.60 Transaction ID : SB17.30576
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Reimbursement HOSupply - flags	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2537.37
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 26 OF 35		
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 2290.00 Transaction ID : SB17.30601
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Wages	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 332.79 Transaction ID : SB17.30620
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Reimbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Costco Wholesale #128		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 2660 Park Center Drive		Amount of Each Disbursement this Period 76.37 Transaction ID : SB17.30620.4 [MEMO ITEM]
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Office supplies	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	2622.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Vons		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 500 Los Angeles Avenue		Amount of Each Disbursement this Period 36.75
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Cards	Transaction ID : SB17.30620.6
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Janice Gallegly		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 2290.00
City Simi Valley	State CA	
Zip Code 93094-0001	Purpose of Disbursement Wages	Transaction ID : SB17.30639
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Harris Teeter		Date of Disbursement M M / D D / Y Y Y Y 02 / 21 / 2012
Mailing Address 900 Army Navy Drive		Amount of Each Disbursement this Period 166.32
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Dinner meeting	Transaction ID : SB17.30585
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2456.32
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 28 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. I-Constituent		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2012
Mailing Address 600 Pennsylvania Avenue SE		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.30640
City Washington State DC Zip Code 20003	Purpose of Disbursement CMS support service	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Netguy LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 15 / 2012
Mailing Address 2470 Stearns Street		Amount of Each Disbursement this Period 271.65 Transaction ID : SB17.30577
City Simi Valley State CA Zip Code 93063	Purpose of Disbursement Technical support	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Tom Pfeifer		Date of Disbursement M M / D D / Y Y Y Y 02 / 02 / 2012
Mailing Address 8209 Smithfield Avenue		Amount of Each Disbursement this Period 150.00 Transaction ID : SB17.30564
City Springfield State VA Zip Code 22152	Purpose of Disbursement Consulting	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1021.65
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 29 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 225 Simi Village Drive		Amount of Each Disbursement this Period 880.00 Transaction ID : SB17.30515
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Postage	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Postmaster		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2012
Mailing Address 225 Simi Village Drive		Amount of Each Disbursement this Period 58.00 Transaction ID : SB17.30613
City Simi Valley	State CA	
Zip Code 93065	Purpose of Disbursement Post Office Box fee	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Premire Valet Service		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 3349 Cahuenga Blvd.		Amount of Each Disbursement this Period 528.00 Transaction ID : SB17.30533
City Los Angeles	State CA	
Zip Code 90068	Purpose of Disbursement Event Parking	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
<input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1466.00
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 30 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Simi Valley Chamber			Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address 40 W. Cochran Street #100			Amount of Each Disbursement this Period 191.00 Transaction ID : SB17.30571
City Simi Valley	State CA	Zip Code 93065-6244	
Purpose of Disbursement Membership renewal		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) B. Time Warner			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012
Mailing Address P. O. Box 60074			Amount of Each Disbursement this Period 119.99 Transaction ID : SB17.30529
City City of Industry	State CA	Zip Code 91716	
Purpose of Disbursement Cable/internet/phone		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

Full Name (Last, First, Middle Initial) c. Time Warner			Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P. O. Box 60074			Amount of Each Disbursement this Period 121.99 Transaction ID : SB17.30579
City City of Industry	State CA	Zip Code 91716	
Purpose of Disbursement Cable, internet, fax phone		Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		State: District:	

SUBTOTAL of Disbursements This Page (optional).....	432.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 35		
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Time Warner		Date of Disbursement M M / D D / Y Y Y Y 03 / 09 / 2012
Mailing Address P. O. Box 60074		Amount of Each Disbursement this Period 121.99
City City of Industry	State CA	
Purpose of Disbursement Cable/internet/fax phone	Category/ Type	
Candidate Name	Transaction ID : SB17.30633	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Tuscany Ristorante		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2012
Mailing Address 968 S. Westlake Blvd.		Amount of Each Disbursement this Period 3620.76
City Westlake Village	State CA	
Purpose of Disbursement Catering	Category/ Type	
Candidate Name	Transaction ID : SB17.30526	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. U.S. Assn. of Former Members of Congress		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2012
Mailing Address 1401 K Street, NW, #503		Amount of Each Disbursement this Period 250.00
City Washington	State DC	
Purpose of Disbursement 25th Class Reunion of 100th Class	Category/ Type	
Candidate Name	Transaction ID : SB17.30556	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3992.75
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 32 OF 35			
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Victors Window Cleaning		Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2012
Mailing Address P. O. Box 2145		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.30532
City Simi Valley	State CA	
Zip Code 93062	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Victors Window Cleaning		Date of Disbursement M M / D D / Y Y Y Y 02 / 16 / 2012
Mailing Address P. O. Box 2145		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.30581
City Simi Valley	State CA	
Zip Code 93062	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Victors Window Cleaning		Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2012
Mailing Address P. O. Box 2145		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.30606
City Simi Valley	State CA	
Zip Code 93062	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: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	42742.49

**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 33 OF 35			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. Mr. Jerry Epstein		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address 4201 Via Marina		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.30574
City Marina Del Rey	State CA Zip Code 90291-5236	
Purpose of Disbursement Refund of General Election contribution		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Mrs. Pat Epstein		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2012
Mailing Address 4201 Via Marina		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.30575
City Maina Del Rey	State CA Zip Code 90291-5236	
Purpose of Disbursement Refund of General Election Contribution		Category/Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

SUBTOTAL of Disbursements This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	5000.00

**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 34 OF 35	
	<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)
Gallegly for Congress

Full Name (Last, First, Middle Initial) A. GARY MILLER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 14 / 2012
Mailing Address 721 S. BREA CANYON ROAD, SUITE 7		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB21.30569
City DIAMOND BAR	State CA	
Zip Code 91789	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: CA District: 42	

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

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
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).....	2500.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Gallegly for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
James Rowan dba DeAnza Comunication

Mailing Address 65 Washington Street, #310

City State Zip Code
Santa Clara CA 95050

Nature of Debt (Purpose):
Slate mailer refund owed

Outstanding Balance Beginning This Period **Transaction ID : SD9.6280**
1310.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 1310.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
KADY / TV

Mailing Address 633 Maulhardt Avenue

City State Zip Code
Oxnard CA 93030

Nature of Debt (Purpose):
Media but still owed

Outstanding Balance Beginning This Period **Transaction ID : SD9.6281**
232.00

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period
0.00 0.00 232.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period

Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period

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