

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Winograd For Congress 2010

ADDRESS (number and street) 1212 S Victory Blvd  
 Check if different than previously reported. (ACC)  
Burbank CA 91502

2. **FEC IDENTIFICATION NUMBER** C00461558  
**CITY** STATE ZIP CODE STATE DISTRICT  
IS THIS REPORT  NEW (N) OR  AMENDED (A)  
CA 36

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

(b) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [ ] [ ] [ ] in the State of [ ]  
(c) 30-Day **POST**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Kinde Durkee  
Signature of Treasurer Electronically Filed by Kinde Durkee Date 04 15 2010

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

**SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Winograd For Congress 2010

Report Covering the Period:

From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	121153.10	236425.60
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121153.10	236425.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	107432.55	172588.42
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	45.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	107432.55	172543.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	63682.18	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	10104.14	

**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  
Winograd For Congress 2010

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	57464.87	102758.25
(i) Itemized (use Schedule A).....	63561.23	132240.35
(ii) Unitemized.....	121026.10	234998.60
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	127.00	427.00
(c) Other Political Committees (such as PACS).....	0.00	1000.00
(d) The Candidate.....	121153.10	236425.60
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(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
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	0.00	45.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	121153.10	236470.60

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 02/2003)

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<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	107432.55	172588.42
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	0.00
(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)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	200.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	107432.55	172788.42

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	49961.63
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	121153.10
25. SUBTOTAL (add Line 23 and Line 24).....	171114.73
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	107432.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	63682.18

# 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 / 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Keith Adams		Date of Receipt
	Mailing Address 1538 S Westgate Av #4		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 01 / 21 / 2010
	City	State	Zip Code
	Los Angeles	CA	90025
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11ai00000000700652
Name of Employer Toberoff & Associates, P.-C.		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Haifaa Almoammar		Date of Receipt
	Mailing Address 6413 Hannum Av		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 31 / 2010
	City	State	Zip Code
	Culver City	CA	90230
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11ai00000000712342
Name of Employer N/A		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Aris Anagnos		Date of Receipt
	Mailing Address 8124 W 3rd St #200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 25 / 2010
	City	State	Zip Code
	Los Angeles	CA	90048
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11ai00000000705371
Name of Employer Aris Anagnos		Occupation Real Estate	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 2000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 6 / 130</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Sarkis T Arevian		Date of Receipt MM / DD / YYYY 03 / 10 / 2010		
	Mailing Address 4510 E Pacific Coast Hwy #120		<b>Transaction ID:</b> SA11ai00000000706995		
	City Long Beach	State CA	Zip Code 90804	Amount of Each Receipt this Period 800.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Memorial Counseling Assoc Inc		
	Occupation President		Election Cycle-to-Date 800.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Elaine M Attias		Date of Receipt MM / DD / YYYY 02 / 25 / 2010		
	Mailing Address 527 N Elm Dr		<b>Transaction ID:</b> SA11ai00000000705377		
	City Beverly Hills	State CA	Zip Code 90210	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Elaine M. Attias		
	Occupation Journalist		Election Cycle-to-Date 1000.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) William Gustav F Ayer		Date of Receipt MM / DD / YYYY 02 / 15 / 2010		
	Mailing Address 17135 Reimer St		<b>Transaction ID:</b> SA11ai00000000704080		
	City Fountain Valley	State CA	Zip Code 92708	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer Progressive Group		
	Occupation Investor		Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2050.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 7 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Shant Baboujian  
Mailing Address 2706 Graham Av #3  
City Redondo Beach State CA Zip Code 90278  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wells Fargo Occupation Banker  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 600.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000707014  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Shant Baboujian  
Mailing Address 2706 Graham Av #3  
City Redondo Beach State CA Zip Code 90278  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wells Fargo Occupation Banker  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 600.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000707015  
Amount of Each Receipt this Period 200.00

**C.** Full Name (Last, First, Middle Initial)  
Shant Baboujian  
Mailing Address 2706 Graham Av #3  
City Redondo Beach State CA Zip Code 90278  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Wells Fargo Occupation Banker  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 600.00  
Date of Receipt 03 / 26 / 2010  
**Transaction ID:** SA11ai00000000711065  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Shant Baboujian

Mailing Address 2706 Graham Av #3

City State Zip Code  
Redondo Beach CA 90278

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

Name of Employer Occupation  
Wells Fargo Banker

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

Date of Receipt  

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

**Transaction ID:** SA11ai00000000714151

Amount of Each Receipt this Period  
100.00

600.00

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

Mailing Address 191 North Los Robles

City State Zip Code  
Pasadena CA 91101

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

Name of Employer Occupation  
Westin Pasadena Sales

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	6	/	2	0	1	0

**Transaction ID:** SA11ai00000000705227

Amount of Each Receipt this Period  
500.00

500.00

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

Mailing Address 425 Pierce Ave Unit 204

City State Zip Code  
Cape Canaveral FL 32920

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

Name of Employer Occupation  
Lighting Science Group Technology

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

Date of Receipt  

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

**Transaction ID:** SA11ai00000000707499

Amount of Each Receipt this Period  
100.00

350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
David Bartine

Mailing Address 425 Pierce Ave Unit 204

City State Zip Code  
Cape Canaveral FL 32920

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

Name of Employer: Lighting Science Group   Occupation: Technology

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712513  
 Amount of Each Receipt this Period: 250.00

350.00

**B.** Full Name (Last, First, Middle Initial)  
Edward J Begley, Jr

Mailing Address 3940 Laurel Canyon Bl #981

City State Zip Code  
Studio City CA 91604

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

Name of Employer: Ed Begley Jr   Occupation: Actor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705382  
 Amount of Each Receipt this Period: 500.00

500.00

**C.** Full Name (Last, First, Middle Initial)  
Millie Ben-David

Mailing Address 1014 E Imperial Ave Apt 1

City State Zip Code  
El Segundo CA 90245

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

Name of Employer: LADWP   Occupation: Electrician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 01 / 24 / 2010  
**Transaction ID:** SA11ai00000000701102  
 Amount of Each Receipt this Period: 50.00

350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Millie Ben-David	Date of Receipt MM / DD / YYYY 02 / 21 / 2010
	Mailing Address 1014 E Imperial Ave Apt 1	<b>Transaction ID:</b> SA11ai00000000705643
	City State Zip Code El Segundo CA 90245	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LADWP Occupation Electrician Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 350.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Millie Ben-David	Date of Receipt MM / DD / YYYY 03 / 21 / 2010
	Mailing Address 1014 E Imperial Ave Apt 1	<b>Transaction ID:</b> SA11ai00000000712251
	City State Zip Code El Segundo CA 90245	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer LADWP Occupation Electrician Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 350.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Suzanne C Benning	Date of Receipt MM / DD / YYYY 01 / 21 / 2010
	Mailing Address 550 Marine Av	<b>Transaction ID:</b> SA11ai00000000700807
	City State Zip Code Manhattan Beach CA 90266	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Election Cycle-to-Date 386.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	125.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

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

Mailing Address 550 Marine Av

City State Zip Code  
Manhattan Beach CA 90266

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 386.00

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

**Transaction ID:** SA11ai00000000700809

Amount of Each Receipt this Period  
100.00

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

Mailing Address 550 Marine Av

City State Zip Code  
Manhattan Beach CA 90266

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 386.00

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

**Transaction ID:** SA11ai00000000700810

Amount of Each Receipt this Period  
100.00

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

Mailing Address 197 Elm St

City State Zip Code  
Northampton MA 01060

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

Name of Employer Smith College Occupation College Professor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 1 4 / 2 0 1 0

**Transaction ID:** SA11ai00000000690366

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 130

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	
							<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Carl E Boggs

Mailing Address 1408 Wellesley Av #1

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer Occupation  
National University Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 9 / 2 0 1 0

Transaction ID: SA11ai00000000700954

Amount of Each Receipt this Period

200.00

**B.**

Full Name (Last, First, Middle Initial)  
Carl E Boggs

Mailing Address 1408 Wellesley Av #1

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer Occupation  
National University Professor

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 9 / 2 0 1 0

Transaction ID: SA11ai00000000700960

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)  
Blase A Bonpane

Mailing Address 2016 Hill St

City State Zip Code  
Santa Monica CA 90405

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

Name of Employer Occupation  
Office Of The Americas Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 9 / 2 0 1 0

Transaction ID: SA11ai00000000700967

Amount of Each Receipt this Period

100.00

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

325.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)

Blase A Bonpane

Mailing Address 2016 Hill St

City State Zip Code  
Santa Monica CA 90405

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

Name of Employer Occupation  
Office Of The Americas Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 9 / 2 0 1 0

Transaction ID: SA11ai00000000701005

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Blase A Bonpane

Mailing Address 2016 Hill St

City State Zip Code  
Santa Monica CA 90405

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

Name of Employer Occupation  
Office Of The Americas Director

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 390.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 5 / 2 0 1 0

Transaction ID: SA11ai00000000705333

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Joan G Botwinick

Mailing Address 511 Westview Dr

City State Zip Code  
University City MO 63130

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

Name of Employer Occupation  
Forest Park Southeast Com-  
mittee Secretary

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: SA11ai00000000691275

Amount of Each Receipt this Period

500.00

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

790.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Laurel J Burik

Mailing Address 13610 Bayliss Rd

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** SA11ai00000000705316

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Laurel J Burik

Mailing Address 13610 Bayliss Rd

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer N/A Occupation Homemaker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

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

**Transaction ID:** SA11ai00000000705383

Amount of Each Receipt this Period  
400.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald S Bustany

Mailing Address 12067 Guerin #201

City State Zip Code  
Studio City CA 91604

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

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

**Transaction ID:** SA11ai00000000704065

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 130
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Annella Campbell		Date of Receipt
	Mailing Address 2214 Walnut Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 5 / 2 0 1 0
	City State Zip Code Venice CA 90291		<b>Transaction ID:</b> SA11ai00000000705330
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
	Name of Employer Annella Campbell Occupation Writer		<input type="text"/> 250.00
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 250.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Suad M Cano		Date of Receipt
	Mailing Address 3049 La Cienega Blvd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 3 / 2 6 / 2 0 1 0
	City State Zip Code Culver City CA 90232		<b>Transaction ID:</b> SA11ai00000000710985
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
	Name of Employer N/A Occupation Broker		<input type="text"/> 100.00
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Carolyn Carter		Date of Receipt
	Mailing Address 3333 South Brea Canyon Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 6 / 2 0 1 0
	City State Zip Code Diamond Bar CA 91765		<b>Transaction ID:</b> SA11ai00000000705228
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
	Name of Employer Carolyn Carter & Associates Occupation Communications Consultant		<input type="text"/> 500.00
	Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ <input type="text"/> 500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 850.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Pamela D Chandran		Date of Receipt
	Mailing Address 1824 Los Encinos Ave		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 03 / 21 / 2010
	City	State	Zip Code
	Glendale	CA	91208
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000716724
Name of Employer Pamela D Chandran		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 366.11
			In-Kind: Food & Drink

<b>B.</b>	Full Name (Last, First, Middle Initial) Marc Chomel		Date of Receipt
	Mailing Address 2925 Perkins Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 11 / 2010
	City	State	Zip Code
	Redondo Beach	CA	90278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000702368
Name of Employer LA County		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 454.60

<b>C.</b>	Full Name (Last, First, Middle Initial) Marc Chomel		Date of Receipt
	Mailing Address 2925 Perkins Lane		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 02 / 07 / 2010
	City	State	Zip Code
	Redondo Beach	CA	90278
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000716725
Name of Employer LA County		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 304.60
			In-Kind: Groceries/Printer Ink

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 820.71
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 17 / 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Liam Connell

Mailing Address 1089 Evergreen Dr

City State Zip Code  
Lake Forest IL 60045

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

Name of Employer Occupation  
Allston Trading LLC CEO

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 21 / 2010

Transaction ID: SA11ai00000000712289

Amount of Each Receipt this Period

2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Nancy Cunningham

Mailing Address 753 Marco PI

City State Zip Code  
Venice CA 90291

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 08 / 2010

Transaction ID: SA11ai00000000701993

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Nathaniel Donson

Mailing Address 898 Helen St

City State Zip Code  
Teaneck NJ 07666

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

Name of Employer Occupation  
Nathaniel Donson Physician

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: SA11ai00000000712330

Amount of Each Receipt this Period

400.00

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

3300.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Frank Dorrel

Mailing Address 3967 Shedd Ter

City State Zip Code  
Culver City CA 90232

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

Name of Employer Occupation  
Frank Dorrel Educator

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 5 / 2 0 1 0

Transaction ID: SA11ai00000000716723

Amount of Each Receipt this Period

200.00

In-Kind:Food/Drink

**B.**

Full Name (Last, First, Middle Initial)  
Kim Bodner Drobny

Mailing Address 3547 Mountainview Av

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer Occupation  
Twentieth Century Fox Accountant

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 1 / 2 0 1 0

Transaction ID: SA11ai00000000700771

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)  
Roberta Eidman

Mailing Address 9609 W Olympiuc Blvd Apt F

City State Zip Code  
Beverly Hills CA 90212

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

Name of Employer Occupation  
LA Unified School District Teacher

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 336.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 5 / 2 0 1 0

Transaction ID: SA11ai00000000691870

Amount of Each Receipt this Period

100.00

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

400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 19 / 130</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Christopher Eliot	Date of Receipt MM / DD / YYYY 01 / 15 / 2010
	Mailing Address 9215 E Nassau Ave	<b>Transaction ID:</b> SA11ai00000000691849
	City State Zip Code Denver CO 80237	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Nagrastar LLC Engineer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 245.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Deborah Engle	Date of Receipt MM / DD / YYYY 01 / 15 / 2010
	Mailing Address 610 W Belden Av	<b>Transaction ID:</b> SA11ai00000000691992
	City State Zip Code Chicago IL 60614	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Faiez Ennabe	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 401 S Western Ave	<b>Transaction ID:</b> SA11ai00000000712344
	City State Zip Code Los Angeles CA 90020	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Ennabe Car Wash Owner	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	525.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Halford Fairchild

Mailing Address 3983 Shedd Terrace

City State Zip Code  
Culver City CA 90232

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

Name of Employer Occupation  
Pitzer College Professional

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	9	/	2	0	1	0

**Transaction ID:** SA11ai00000000701178

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date ▼ 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Clairece Feagin

Mailing Address 1603 Valley Creek Dr

City State Zip Code  
Hillsborough NC 27278

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

Name of Employer Occupation  
Clairece Feagin Writer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	1	0

**Transaction ID:** SA11ai00000000692063

Amount of Each Receipt this Period  
100.00

Election Cycle-to-Date ▼ 850.00

**C.**

Full Name (Last, First, Middle Initial)  
Clairece Feagin

Mailing Address 1603 Valley Creek Dr

City State Zip Code  
Hillsborough NC 27278

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

Name of Employer Occupation  
Clairece Feagin Writer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	0

**Transaction ID:** SA11ai00000000704866

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date ▼ 850.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Clairece Feagin

Mailing Address 1603 Valley Creek Dr

City Hillsborough State NC Zip Code 27278

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

Name of Employer Clairece Feagin Occupation Writer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710700  
 Amount of Each Receipt this Period 50.00

**B.**

Full Name (Last, First, Middle Initial)  
Clairece Feagin

Mailing Address 1603 Valley Creek Dr

City Hillsborough State NC Zip Code 27278

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

Name of Employer Clairece Feagin Occupation Writer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712627  
 Amount of Each Receipt this Period 100.00

**C.**

Full Name (Last, First, Middle Initial)  
Edward E Ferrer

Mailing Address 928 California Av

City Venice State CA Zip Code 90291

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

Name of Employer Armadillo & Co Occupation Administrator

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 615.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712332  
 Amount of Each Receipt this Period 245.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **395.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 22 / 130</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Mary Fishman		Date of Receipt
	Mailing Address 117 Norwood Av		<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Asheville	NC	28804
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000701164
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="300.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Fishman		Date of Receipt
	Mailing Address 117 Norwood Av		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Asheville	NC	28804
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000705664
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="300.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mary Fishman		Date of Receipt
	Mailing Address 117 Norwood Av		<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Asheville	NC	28804
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11ai00000000712196
Name of Employer N/A		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text" value="25.00"/>
		<input type="text" value="300.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Stefanie M Fletcher

Mailing Address 2907 Stanford Ave

City Marina Del Rey State CA Zip Code 90292

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

Name of Employer Stefanie M Fletcher Occupation Nurse

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705237  
 Amount of Each Receipt this Period: 2000.00

**B.**

Full Name (Last, First, Middle Initial)  
Kim Floyd

Mailing Address 5375 Shirley J Ln

City Wrightwood State CA Zip Code 92397

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 01 / 15 / 2010  
**Transaction ID:** SA11ai00000000691981  
 Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
William F Foote

Mailing Address 11842 Braddock Dr

City Culver City State CA Zip Code 90230

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

Name of Employer Disney Occupation Engineer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712331  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Hassan Fouda

Mailing Address 84 Norwood Ave

City Kensington State CA Zip Code 94707

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 01 / 22 / 2010  
**Transaction ID:** SA11ai00000000692603  
 Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Paul Freeman

Mailing Address 12575 Crenshaw

City Hawthorne State CA Zip Code 90250

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

Name of Employer Paul Freeman Occupation Sales

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 01 / 10 / 2010  
**Transaction ID:** SA11ai00000000691366  
 Amount of Each Receipt this Period: 25.00

**C.**

Full Name (Last, First, Middle Initial)  
Paul Freeman

Mailing Address 12575 Crenshaw

City Hawthorne State CA Zip Code 90250

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

Name of Employer Paul Freeman Occupation Sales

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 02 / 15 / 2010  
**Transaction ID:** SA11ai00000000704084  
 Amount of Each Receipt this Period: 25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Paul Freeman

Mailing Address 12575 Crenshaw

City State Zip Code  
Hawthorne CA 90250

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

Name of Employer Occupation  
Paul Freeman Sales

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2010

Transaction ID: SA11ai00000000710355

Amount of Each Receipt this Period  
25.00

**B.**

Full Name (Last, First, Middle Initial)  
Harvey S Frey

Mailing Address 552 12th St

City State Zip Code  
Santa Monica CA 90402

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 308.33

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: SA11ai00000000712487

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
Chandra Friese

Mailing Address 3675 Clay St

City State Zip Code  
San Francisco CA 94118

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

Name of Employer Occupation  
Sotheby's International Realty Real Estate

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 05 / 2010

Transaction ID: SA11ai00000000701632

Amount of Each Receipt this Period  
100.00

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

175.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Eleanor D Fry

Mailing Address 2819 Stoner Av

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID:** SA11ai00000000703100

Amount of Each Receipt this Period  
10.00

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

Mailing Address 2819 Stoner Av

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
03 / 10 / 2010

**Transaction ID:** SA11ai00000000707025

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2819 Stoner Av

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 290.00

Date of Receipt  
MM / DD / YYYY  
03 / 10 / 2010

**Transaction ID:** SA11ai00000000707038

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **210.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 130

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Dorsey R Gardner

Mailing Address 1455 Ocean Drive #1204

City State Zip Code  
Miami Beach FL 33139

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 9 / 2 0 1 0

Transaction ID: SA11ai00000000691274

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
James E Garrison

Mailing Address 1022 Matilija Rd

City State Zip Code  
Glendale CA 91202

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

Name of Employer Occupation  
Pacific Federal President

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 6 / 2 0 1 0

Transaction ID: SA11ai00000000711036

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)  
Donald E Geagan

Mailing Address 945 Venezia Av

City State Zip Code  
Venice CA 90291

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

Name of Employer Occupation  
Donald Geagan Activist

Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 5 / 2 0 1 0

Transaction ID: SA11ai00000000705379

Amount of Each Receipt this Period

600.00

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

2100.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Donald E Geagan

Mailing Address 945 Venezia Av

City State Zip Code  
Venice CA 90291

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

Name of Employer Occupation  
Donald Geagan Activist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705409  
 Amount of Each Receipt this Period: 100.00

Election Cycle-to-Date: 700.00

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

Mailing Address 4827 Onyx St

City State Zip Code  
Torrance CA 90503

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

Name of Employer Occupation  
Walid H Ghurabi Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11ai00000000707546  
 Amount of Each Receipt this Period: 300.00

Election Cycle-to-Date: 300.00

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

Mailing Address 11548 Thurston Cir

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705386  
 Amount of Each Receipt this Period: 250.00

Election Cycle-to-Date: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Mary L Giesler

Mailing Address 1912 Cabrillo Avenue

City State Zip Code  
Torrance CA 90501

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710731  
 Amount of Each Receipt this Period: 100.00

Amount of Each Receipt this Period: 246.00

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

Mailing Address 15 Gray Gardens W

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Celia Gilbert Occupation Poet

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 02 / 21 / 2010  
**Transaction ID:** SA11ai00000000705649  
 Amount of Each Receipt this Period: 300.00

Amount of Each Receipt this Period: 800.00

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

Mailing Address 15 Gray Gardens W

City State Zip Code  
Cambridge MA 02138

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

Name of Employer Celia Gilbert Occupation Poet

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 21 / 2010  
**Transaction ID:** SA11ai00000000712181  
 Amount of Each Receipt this Period: 500.00

Amount of Each Receipt this Period: 800.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Armen Goenjian

Mailing Address 501 Via La Selva

City State Zip Code  
Redondo Beach CA 90277

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

Name of Employer: Memorial Psychiatric Health Services I  
Occupation: Doctor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt: 01 / 22 / 2010  
**Transaction ID:** SA11ai00000000692564  
 Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Armen Goenjian

Mailing Address 501 Via La Selva

City State Zip Code  
Redondo Beach CA 90277

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

Name of Employer: Memorial Psychiatric Health Services I  
Occupation: Doctor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt: 03 / 11 / 2010  
**Transaction ID:** SA11ai00000000707545  
 Amount of Each Receipt this Period: 300.00

**C.**

Full Name (Last, First, Middle Initial)  
Daniel Goldberg

Mailing Address 121 Washington Pl

City State Zip Code  
New York NY 10014

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

Name of Employer: Gold Village Entertainment  
Occupation: President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 01 / 06 / 2010  
**Transaction ID:** SA11ai00000000690138  
 Amount of Each Receipt this Period: 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

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

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

FOR LINE NUMBER: PAGE 31 / 130  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)

David S Gordon

Mailing Address 6227 52nd NE

City State Zip Code  
Seattle WA 98115

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

Name of Employer Occupation  
Univeristy Of Washington Software Engineer

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 249.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 5 / 2 0 1 0

Transaction ID: SA11ai00000000705240

Amount of Each Receipt this Period

249.00

**B.**

Full Name (Last, First, Middle Initial)

Ira L Gottlieb

Mailing Address 13650 Marina Pointe Dr #1403

City State Zip Code  
Pacific Palisades CA 90272

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

Name of Employer Occupation  
Bush, Gottlieb, Singer & Lopez Attorney

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1900.00

Date of Receipt

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

Transaction ID: SA11ai00000000712430

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Michael B Green

Mailing Address 1115 Meadowbrook Ave Apt 3

City State Zip Code  
Los Angeles CA 90019

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 0

Transaction ID: SA11ai00000000695926

Amount of Each Receipt this Period

200.00

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

1049.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 32 / 130</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Katherine Green	Date of Receipt MM / DD / YYYY 02 / 25 / 2010
	Mailing Address 16816 Fox Trot Lane	<b>Transaction ID:</b> SA11ai00000000705331
	City State Zip Code Moreno Valley CA 92555	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Katherine Green Writer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 325.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Michael B Green	Date of Receipt MM / DD / YYYY 03 / 10 / 2010
	Mailing Address 1115 Meadowbrook Ave Apt 3	<b>Transaction ID:</b> SA11ai00000000707135
	City State Zip Code Los Angeles CA 90019	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 230.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Russell Greene	Date of Receipt MM / DD / YYYY 02 / 25 / 2010
	Mailing Address 5011 Noeline Ave	<b>Transaction ID:</b> SA11ai00000000705311
	City State Zip Code Encino CA 91436	Amount of Each Receipt this Period 600.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Cheesecake Factory Senior Vice President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>880.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Dianne Greene		Date of Receipt MM / DD / YYYY 02 / 25 / 2010	
	Mailing Address 5011 Noeline Av		<b>Transaction ID:</b> SA11ai00000000705387	
	City Encino	State CA	Zip Code 91436	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C		Name of Employer N/A	
Occupation Retired		Election Cycle-to-Date 250.00		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

<b>B.</b>	Full Name (Last, First, Middle Initial) David Greene		Date of Receipt MM / DD / YYYY 02 / 25 / 2010	
	Mailing Address 969 W 25th St		<b>Transaction ID:</b> SA11ai00000000705408	
	City San Pedro	State CA	Zip Code 90731	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C		Name of Employer SBWIB	
Occupation IT Manager		Election Cycle-to-Date 685.00		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

<b>C.</b>	Full Name (Last, First, Middle Initial) David Greene		Date of Receipt MM / DD / YYYY 03 / 26 / 2010	
	Mailing Address 969 W 25th St		<b>Transaction ID:</b> SA11ai00000000711052	
	City San Pedro	State CA	Zip Code 90731	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C		Name of Employer SBWIB	
Occupation IT Manager		Election Cycle-to-Date 685.00		
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>450.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 34 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
David Greene

Mailing Address 969 W 25th St

City San Pedro State CA Zip Code 90731

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

Name of Employer SBWIB Occupation IT Manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 685.00

Date of Receipt 03 / 26 / 2010  
**Transaction ID:** SA11ai00000000711072  
Amount of Each Receipt this Period 60.00

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

Mailing Address 7428 Mulholland Dr

City Los Angeles State CA Zip Code 90046

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

Name of Employer Philip A Greider Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 03 / 04 / 2010  
**Transaction ID:** SA11ai00000000706213  
Amount of Each Receipt this Period 250.00

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

Mailing Address 1819 S Stover St

City Visalia State CA Zip Code 93292

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 01 / 21 / 2010  
**Transaction ID:** SA11ai00000000700765  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **410.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Francis Hagan  
Mailing Address 1819 S Stover St  
City Visalia State CA Zip Code 93292  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 300.00  
Date of Receipt 02 / 18 / 2010  
Transaction ID: SA11ai00000000703409  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
James Hamilton  
Mailing Address 2412 Palos Verdes Dr W #B  
City Rancho Palos Verde State CA Zip Code 90274  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt 02 / 18 / 2010  
Transaction ID: SA11ai00000000703432  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Keeldar Hamilton  
Mailing Address 29243 Pacific Coast Highway  
City Malibu State CA Zip Code 90265  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Keeldar Hamilton Occupation Stage Hand  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt 02 / 26 / 2010  
Transaction ID: SA11ai00000000705230  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 600.00  
**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

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

Mailing Address 1432 Mountain View Rd

City State Zip Code  
Santa Barbara CA 93109

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

Name of Employer Occupation  
Sansum Medical Foundation Activist  
Clinic

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

Date of Receipt  

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

**Transaction ID:** SA11ai00000000712470

Amount of Each Receipt this Period  
100.00

Election Cycle-to-Date ▼ 350.00

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

Mailing Address 46 Nicholas Ln

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	6	/	2	0	1	0

**Transaction ID:** SA11ai00000000695929

Amount of Each Receipt this Period  
150.00

Election Cycle-to-Date ▼ 250.00

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

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	0

**Transaction ID:** SA11ai00000000691368

Amount of Each Receipt this Period  
50.00

Election Cycle-to-Date ▼ 450.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **300.00**

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

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

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

FOR LINE NUMBER: PAGE 37 / 130

(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Walter Hanson

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
01 / 17 / 2010

Transaction ID: SA11ai00000000693867

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
Walter Hanson

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 15 / 2010

Transaction ID: SA11ai00000000704073

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
Walter Hanson

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 450.00

Date of Receipt

M M / D D / Y Y Y Y  
02 / 21 / 2010

Transaction ID: SA11ai00000000705646

Amount of Each Receipt this Period  
50.00

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

250.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Walter Hanson

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 14 / 2010

**Transaction ID:** SA11ai00000000710358

Amount of Each Receipt this Period  
50.00

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

Mailing Address 5415 49th Av SW

City State Zip Code  
Seattle WA 98136

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2010

**Transaction ID:** SA11ai00000000714999

Amount of Each Receipt this Period  
50.00

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

Mailing Address 11740 Wilshire Bl #809

City State Zip Code  
Los Angeles CA 90025

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 675.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 14 / 2010

**Transaction ID:** SA11ai00000000690392

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **125.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Diane L Hart  
Mailing Address 11740 Wilshire Bl #809  
City Los Angeles State CA Zip Code 90025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 675.00  
Date of Receipt 01 / 29 / 2010  
Transaction ID: SA11ai00000000701184  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Diane L Hart  
Mailing Address 11740 Wilshire Bl #809  
City Los Angeles State CA Zip Code 90025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 675.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705332  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Diane L Hart  
Mailing Address 11740 Wilshire Bl #809  
City Los Angeles State CA Zip Code 90025  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 675.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705384  
Amount of Each Receipt this Period 380.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 650.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Sissel H Hawkes

Mailing Address 12905 Short Av

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer Occupation  
Palisades High School Teacher

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 26 / 2010

**Transaction ID:** SA11ai00000000711068

Amount of Each Receipt this Period  
100.00

300.00

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

Mailing Address 28 Fairview Rd

City State Zip Code  
Narberth PA 19072

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 04 / 2010

**Transaction ID:** SA11ai00000000701386

Amount of Each Receipt this Period  
250.00

500.00

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

Mailing Address 28 Fairview Rd

City State Zip Code  
Narberth PA 19072

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** SA11ai00000000712553

Amount of Each Receipt this Period  
250.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Ann M Hiller

Mailing Address 1616 Michael Lane

City State Zip Code  
Pacific Palisades CA 90272

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	6	/	2	0	1	0

Transaction ID: SA11ai00000000703108

Amount of Each Receipt this Period  
125.00

425.00

**B.**

Full Name (Last, First, Middle Initial)  
Steven Hohensee

Mailing Address 29001 211th St

City State Zip Code  
Easton KS 66020

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	0

Transaction ID: SA11ai00000000706254

Amount of Each Receipt this Period  
250.00

265.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven Hohensee

Mailing Address 29001 211th St

City State Zip Code  
Easton KS 66020

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	0

Transaction ID: SA11ai00000000709110

Amount of Each Receipt this Period  
15.00

265.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **390.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 130  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Alfred L Howard

Mailing Address 11939 Gorham Ave #308

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Occupation  
Alfred L Howard Writer

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

Date of Receipt  
MM / DD / YYYY  
02 / 02 / 2010

**Transaction ID:** SA11ai00000000701059

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
John Hyde

Mailing Address 3101 Live Oak Street

City State Zip Code  
Round Rock TX 78681

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

Name of Employer Occupation  
Pervasive Software Engineer

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

Date of Receipt  
MM / DD / YYYY  
01 / 21 / 2010

**Transaction ID:** SA11ai00000000700660

Amount of Each Receipt this Period  
100.00

**C.**

Full Name (Last, First, Middle Initial)  
John Hyde

Mailing Address 3101 Live Oak Street

City State Zip Code  
Round Rock TX 78681

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

Name of Employer Occupation  
Pervasive Software Engineer

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

Date of Receipt  
MM / DD / YYYY  
02 / 18 / 2010

**Transaction ID:** SA11ai00000000703405

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **700.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 43 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Douglas Kahn

Mailing Address 1811 Englewood Road #324

City Englewood State FL Zip Code 34223

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

Name of Employer Douglas Kahn Occupation Psychologist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705373  
 Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Lily Karam

Mailing Address 1909 Paseo Del Sol

City Palos Verdes Estat State CA Zip Code 90274

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

Name of Employer New Dimension Occupation Real Estate Broker

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712343  
 Amount of Each Receipt this Period 300.00

**C.**

Full Name (Last, First, Middle Initial)  
Mimi Kennedy

Mailing Address 16133 Ventura Bl #545

City Encino State CA Zip Code 91436

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

Name of Employer Hollygreen Occupation Actress

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2010  
**Transaction ID:** SA11ai00000000701180  
 Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 130  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Verna R Kenvin

Mailing Address 8744 Shoshone Ave

City Northridge State CA Zip Code 91325

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt: 01 / 14 / 2010  
**Transaction ID:** SA11ai00000000690314  
Amount of Each Receipt this Period: 50.00

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

Mailing Address 8744 Shoshone Ave

City Northridge State CA Zip Code 91325

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt: 01 / 15 / 2010  
**Transaction ID:** SA11ai00000000691993  
Amount of Each Receipt this Period: 75.00

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

Mailing Address 8744 Shoshone Ave

City Northridge State CA Zip Code 91325

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt: 02 / 11 / 2010  
**Transaction ID:** SA11ai00000000702349  
Amount of Each Receipt this Period: 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **175.00**

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

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

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

FOR LINE NUMBER: PAGE 45 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Verna R Kenvin

Mailing Address 8744 Shoshone Ave

City Northridge State CA Zip Code 91325

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710721  
Amount of Each Receipt this Period 50.00

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

Mailing Address 10300 Viretta Ln

City Los Angeles State CA Zip Code 90077

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

Name of Employer Geffner & Bush Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt 03 / 26 / 2010  
**Transaction ID:** SA11ai00000000710883  
Amount of Each Receipt this Period 400.00

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

Mailing Address 2020 La France Av

City South Pasadena State CA Zip Code 91030

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 01 / 29 / 2010  
**Transaction ID:** SA11ai00000000700981  
Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 46 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Nancy J Lane

Mailing Address 2020 La France Av

City State Zip Code  
South Pasadena CA 91030

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11ai00000000705335

Amount of Each Receipt this Period  
200.00

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

Mailing Address 3145 Coolidge Av

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** SA11ai00000000700982

Amount of Each Receipt this Period  
50.00

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

Mailing Address 3145 Coolidge Av

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

**Transaction ID:** SA11ai00000000705385

Amount of Each Receipt this Period  
350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**

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

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

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

FOR LINE NUMBER: PAGE 47 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Herbert Laskin  
Mailing Address 3145 Coolidge Ave  
City Los Angeles State CA Zip Code 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2400.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000706994  
Amount of Each Receipt this Period 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Lillian Laskin  
Mailing Address 3145 Coolidge Av  
City Los Angeles State CA Zip Code 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2500.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000707002  
Amount of Each Receipt this Period 150.00

**C.** Full Name (Last, First, Middle Initial)  
Lillian Laskin  
Mailing Address 3145 Coolidge Av  
City Los Angeles State CA Zip Code 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
2500.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000707010  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2650.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Arthur Lessac

Mailing Address 826 2nd St Apt 306

City State Zip Code  
Santa Monica CA 90403

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

Name of Employer Occupation  
Arthur Lessac Trainer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010

**Transaction ID:** SA11ai00000000712328

Amount of Each Receipt this Period  
500.00

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

Mailing Address 2024 Canyon Rd

City State Zip Code  
Arcadia CA 91006

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

Name of Employer Occupation  
Geffner & Bush Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 11 / 2010

**Transaction ID:** SA11ai00000000707515

Amount of Each Receipt this Period  
100.00

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

Mailing Address 2024 Canyon Rd

City State Zip Code  
Arcadia CA 91006

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

Name of Employer Occupation  
Geffner & Bush Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 25 / 2010

**Transaction ID:** SA11ai00000000710711

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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



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

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

FOR LINE NUMBER: PAGE 49 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Rochelle Lou  
 Mailing Address 2222 5th St  
 City State Zip Code  
 Santa Monica CA 90405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rochelle Lou Writer  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 2 / 2 5 / 2 0 1 0  
**Transaction ID:** SA11ai00000000705338  
 Amount of Each Receipt this Period  
 125.00

**B.** Full Name (Last, First, Middle Initial)  
Rochelle Lou  
 Mailing Address 2222 5th St  
 City State Zip Code  
 Santa Monica CA 90405  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Rochelle Lou Writer  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 225.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 1 9 / 2 0 1 0  
**Transaction ID:** SA11ai00000000710392  
 Amount of Each Receipt this Period  
 100.00

**C.** Full Name (Last, First, Middle Initial)  
Joanne Lyman  
 Mailing Address 163 E 81st St  
 City State Zip Code  
 New York NY 10028  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Metropolitan Museum Department Manager  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 1 / 1 5 / 2 0 1 0  
**Transaction ID:** SA11ai00000000691893  
 Amount of Each Receipt this Period  
 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 50 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Genevieve Lynch

Mailing Address 270 Broadway

City State Zip Code  
New York NY 10007

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

Name of Employer Occupation  
Genevieve Lynch Non Profit Consultant

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
MM / DD / YYYY  
01 / 06 / 2010

**Transaction ID:** SA11ai00000000690139

Amount of Each Receipt this Period  
1500.00

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

Mailing Address 845 W End Av

City State Zip Code  
New York NY 10025

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

Name of Employer Occupation  
Susan T Machenzie Inc Arbitrator/Meidator

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
02 / 04 / 2010

**Transaction ID:** SA11ai00000000701443

Amount of Each Receipt this Period  
500.00

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

Mailing Address 12207 Malone St

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer Occupation  
Northrop Grummen Engineer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
MM / DD / YYYY  
02 / 16 / 2010

**Transaction ID:** SA11ai00000000703096

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **2050.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Katherine MacQueen  
Mailing Address 12207 Malone St  
City Los Angeles State CA Zip Code 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northrop Grummen Occupation Engineer  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 350.00  
Date of Receipt 03 / 10 / 2010  
**Transaction ID:** SA11ai00000000707018  
Amount of Each Receipt this Period 200.00

**B.** Full Name (Last, First, Middle Initial)  
Gregory Marlowe  
Mailing Address 1007 Maertin Ln  
City Fullerton State CA Zip Code 92831  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Thales-Raytheon Systems Co. Occupation Systems Engineer  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt 01 / 14 / 2010  
**Transaction ID:** SA11ai00000000690416  
Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
Jay M Martin  
Mailing Address 2183 Grandeur Dr  
City San Pedro State CA Zip Code 90732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Space Time Engineering Occupation Software Engineer  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000712599  
Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 950.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Alan N McClain

Mailing Address 9911 Paramount Blvd #481

City State Zip Code  
Downey CA 90240

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

Name of Employer Alan N McClain Occupation Paralegal

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11ai00000000707513

Amount of Each Receipt this Period  
500.00

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

Mailing Address 65 N Brandywine Ave

City State Zip Code  
Schenectady NY 12307

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

Name of Employer Athena McEntyre Occupation Biologist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	0

**Transaction ID:** SA11ai00000000691317

Amount of Each Receipt this Period  
200.10

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

Mailing Address 4174 Higuera St

City State Zip Code  
Culver City CA 90232

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

Name of Employer 20th Century Fox; Family Guy Occupation Writer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	1	/	2	0	1	0

**Transaction ID:** SA11ai00000000700820

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.10**

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

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

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

FOR LINE NUMBER: PAGE 53 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Lanyce Mills

Mailing Address 1038 S Weymouth Ave

City State Zip Code  
San Pedro CA 90732

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

Name of Employer Occupation  
Williams & Ribb LLP CPA

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

Date of Receipt  
MM / DD / YYYY  
01 / 17 / 2010

**Transaction ID:** SA11ai00000000693840

Amount of Each Receipt this Period  
200.00

250.00

**B.**

Full Name (Last, First, Middle Initial)  
Lanyce Mills

Mailing Address 1038 S Weymouth Ave

City State Zip Code  
San Pedro CA 90732

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

Name of Employer Occupation  
Williams & Ribb LLP CPA

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

Date of Receipt  
MM / DD / YYYY  
03 / 28 / 2010

**Transaction ID:** SA11ai00000000714906

Amount of Each Receipt this Period  
50.00

250.00

**C.**

Full Name (Last, First, Middle Initial)  
Clark O Morgan

Mailing Address 346 NW Treglown Ct

City State Zip Code  
Hillsboro OR 97124

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

Name of Employer Occupation  
Daimier Trucks Of America Data Operations Manager

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

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2010

**Transaction ID:** SA11ai00000000701266

Amount of Each Receipt this Period  
200.00

255.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **450.00**

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

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

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

FOR LINE NUMBER: PAGE 54 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Clark O Morgan

Mailing Address 346 NW Treglown Ct

City Hillsboro State OR Zip Code 97124

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

Name of Employer Daimier Trucks Of America Occupation Data Operations Manager

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 255.00

Date of Receipt 03 / 07 / 2010  
**Transaction ID:** SA11ai00000000709089  
 Amount of Each Receipt this Period 55.00

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

Mailing Address 12240 Venice Blvd

City Los Angeles State CA Zip Code 90066

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710672  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 5204 NW 141st St

City Vancouver State WA Zip Code 98685

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 01 / 15 / 2010  
**Transaction ID:** SA11ai00000000691983  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 655.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 56 / 130</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 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)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Sheri Myers	Date of Receipt MM / DD / YYYY 03 / 28 / 2010
	Mailing Address 11411 Charnock Rd	<b>Transaction ID:</b> SA11ai00000000714873
	City State Zip Code Los Angeles CA 90066	Amount of Each Receipt this Period 60.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Sheri Myers Writer/Activist	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 565.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Hedwin Naimark	Date of Receipt MM / DD / YYYY 02 / 25 / 2010
	Mailing Address PO Box 9516	<b>Transaction ID:</b> SA11ai00000000705334
	City State Zip Code Marina Del Rey CA 90295	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation N/A Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Patricia Oblath	Date of Receipt MM / DD / YYYY 03 / 10 / 2010
	Mailing Address 3487 Wade Street	<b>Transaction ID:</b> SA11ai00000000706996
	City State Zip Code Los Angeles CA 90066	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Connections For Children Management	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>510.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

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

FOR LINE NUMBER: PAGE 57 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Marsha L Oskey  
Mailing Address 4626 Via Marina  
City Marina Del Rey State CA Zip Code 90292  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Quest Diagnostics Occupation Medical Sales  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705380  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Thomas Paris  
Mailing Address 911 Amoroso PI  
City Venice State CA Zip Code 90291  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Thomas Paris Occupation Psychotherapist  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 03 / 11 / 2010  
Transaction ID: SA11ai00000000707516  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Dolores M Press  
Mailing Address 942 7th St #1  
City Santa Monica State CA Zip Code 90403  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 350.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705399  
Amount of Each Receipt this Period 125.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1125.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 58 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Michael Ratner

Mailing Address 124 Washington Pl

City State Zip Code  
New York NY 10014

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

Name of Employer Michael Ratner Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 04 / 2010

**Transaction ID:** SA11ai00000000706226

Amount of Each Receipt this Period  
350.00

**B.**

Full Name (Last, First, Middle Initial)  
Javad Razani

Mailing Address 1325 Tigertail Rd

City State Zip Code  
Los Angeles CA 90049

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

Name of Employer Javad Razani MD Occupation Physician

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 25 / 2010

**Transaction ID:** SA11ai00000000705388

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Martha Reese

Mailing Address 407 Ashland Ave

City State Zip Code  
River Forest IL 60305

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

Name of Employer Martin Reese Design Occupation Graphic Designer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 14 / 2010

**Transaction ID:** SA11ai00000000690398

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 59 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Carol A Richards

Mailing Address 109 Esparta Way

City State Zip Code  
Santa Monica CA 90402

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11ai00000000691589

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 925 Montana Avenue

City State Zip Code  
Santa Monica CA 90403

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

Name of Employer Caffe Luxxe Occupation Manager

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

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

**Transaction ID:** SA11ai00000000705232

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4636 Berryman Ave.

City State Zip Code  
Culver City CA 90230

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 228.00

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

**Transaction ID:** SA11ai00000000700945

Amount of Each Receipt this Period  
60.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1310.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 60 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Gene Rothman  
Mailing Address 4636 Berryman Ave.  
City State Zip Code  
Culver City CA 90230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 228.00  
Date of Receipt: 03 / 10 / 2010  
Transaction ID: SA11ai00000000707140  
Amount of Each Receipt this Period: 30.00

**B.** Full Name (Last, First, Middle Initial)  
Gene Rothman  
Mailing Address 4636 Berryman Ave.  
City State Zip Code  
Culver City CA 90230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 228.00  
Date of Receipt: 03 / 10 / 2010  
Transaction ID: SA11ai00000000707141  
Amount of Each Receipt this Period: 40.00

**C.** Full Name (Last, First, Middle Initial)  
Gene Rothman  
Mailing Address 4636 Berryman Ave.  
City State Zip Code  
Culver City CA 90230  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 228.00  
Date of Receipt: 03 / 26 / 2010  
Transaction ID: SA11ai00000000711198  
Amount of Each Receipt this Period: 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 90.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 61 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Anthony F Saidy  
Mailing Address 435 S Lafayette Pk Pl  
City Los Angeles State CA Zip Code 90057  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705389  
Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
Anthony F Saidy  
Mailing Address 435 S Lafayette Pk Pl  
City Los Angeles State CA Zip Code 90057  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 2400.00  
Date of Receipt 03 / 31 / 2010  
Transaction ID: SA11ai00000000712351  
Amount of Each Receipt this Period 50.00

**C.** Full Name (Last, First, Middle Initial)  
Carrie T Scoville  
Mailing Address 415 W Elberon Av  
City San Pedro State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cal State Long Beach Foundation Occupation Program Coordinator  
Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) ▼ 920.00  
Date of Receipt 01 / 15 / 2010  
Transaction ID: SA11ai00000000690679  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 400.00  
**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER: PAGE 62 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Julia Scoville  
Mailing Address 1026 W 20th St #4  
City San Pedro State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 600.00  
Date of Receipt 01 / 15 / 2010  
**Transaction ID:** SA11ai00000000690680  
Amount of Each Receipt this Period 100.00

**B.** Full Name (Last, First, Middle Initial)  
Julia Scoville  
Mailing Address 1026 W 20th St #4  
City San Pedro State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 600.00  
Date of Receipt 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705245  
Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Carrie T Scoville  
Mailing Address 415 W Elberon Av  
City San Pedro State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Cal State Long Beach Foundation Occupation Program Coordinator  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 920.00  
Date of Receipt 02 / 25 / 2010  
**Transaction ID:** SA11ai00000000705249  
Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 300.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 130
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 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)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Carrie T Scoville	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 415 W Elberon Av	<b>Transaction ID:</b> SA11ai00000000711040
	City State Zip Code San Pedro CA 90731	Amount of Each Receipt this Period 120.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Cal State Long Beach Foundation Occupation Program Coordinator Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 920.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Carrie T Scoville	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 415 W Elberon Av	<b>Transaction ID:</b> SA11ai00000000711050
	City State Zip Code San Pedro CA 90731	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Cal State Long Beach Foundation Occupation Program Coordinator Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 920.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Julia Scoville	Date of Receipt MM / DD / YYYY 03 / 26 / 2010
	Mailing Address 1026 W 20th St #4	<b>Transaction ID:</b> SA11ai00000000711051
	City State Zip Code San Pedro CA 90731	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer N/A Occupation Retired Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	320.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 64 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Carrie T Scoville

Mailing Address 415 W Elberon Av

City State Zip Code  
San Pedro CA 90731

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

Name of Employer Occupation  
Cal State Long Beach Foundation Program Coordinator

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

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2010

**Transaction ID:** SA11ai00000000711053

Amount of Each Receipt this Period  
100.00

920.00

**B.**

Full Name (Last, First, Middle Initial)  
Marlene Share

Mailing Address 14630 Dickens St #310

City State Zip Code  
Sherman Oaks CA 91403

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID:** SA11ai00000000705390

Amount of Each Receipt this Period  
200.00

350.00

**C.**

Full Name (Last, First, Middle Initial)  
Marlene Share

Mailing Address 14630 Dickens St #310

City State Zip Code  
Sherman Oaks CA 91403

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

Name of Employer Occupation  
N/A Retired

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

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2010

**Transaction ID:** SA11ai00000000705397

Amount of Each Receipt this Period  
150.00

350.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **450.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 130
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Al Sheahan		Date of Receipt
	Mailing Address 6200 Hazeltine Av		<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Van Nuys	CA	91401
	FEC ID number of contributing federal political committee.		Transaction ID: SA11ai00000000689447
		Amount of Each Receipt this Period	
		<input type="text" value="200.00"/>	
Name of Employer N/A		Occupation Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="300.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Al Sheahan		Date of Receipt
	Mailing Address 14155 Magnolia Bl #338		<input type="text" value="01"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Sherman Oaks	CA	91423
	FEC ID number of contributing federal political committee.		Transaction ID: SA11ai00000000700950
		Amount of Each Receipt this Period	
		<input type="text" value="500.00"/>	
Name of Employer Al Sheahan		Occupation Writer	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="500.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Andrew Silber		Date of Receipt
	Mailing Address 736 Bynner Dr		<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	San Pedro	CA	90732
	FEC ID number of contributing federal political committee.		Transaction ID: SA11ai00000000710593
		Amount of Each Receipt this Period	
		<input type="text" value="2400.00"/>	
Name of Employer The Whale & Ale Inc.		Occupation Owner	In-Kind: Food/Drink/Cooking Tools
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	
		<input type="text" value="2400.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="3100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 66 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Mary Singaus  
Mailing Address 12773 Caswell Ave #201  
City State Zip Code  
Los Angeles CA 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer County Of Los Angeles Health Department Occupation Nurse  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 10 / 2010  
Transaction ID: SA11ai00000000707035  
Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
Mary Singaus  
Mailing Address 12773 Caswell Ave #201  
City State Zip Code  
Los Angeles CA 90066  
FEC ID number of contributing federal political committee. **C**  
Name of Employer County Of Los Angeles Health Department Occupation Nurse  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 31 / 2010  
Transaction ID: SA11ai00000000712413  
Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
Diana Singleton  
Mailing Address 397 Inverness Dr  
City State Zip Code  
La Canada Flintrid CA 91011  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Diana Singleton Occupation Business Owner  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2000.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
02 / 25 / 2010  
Transaction ID: SA11ai00000000704805  
Amount of Each Receipt this Period  
2000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2200.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 67 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
David Sonneborn  
 Mailing Address 1183 Navarro PI  
 City State Zip Code  
 Orange CA 92869  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 1 4 / 2 0 1 0  
**Transaction ID:** SA11ai00000000690395  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 David Sonneborn Volunteer Biology Researcher  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 1100.00

**B.** Full Name (Last, First, Middle Initial)  
Raymond Soto  
 Mailing Address 433 Elberon Ave  
 City State Zip Code  
 San Pedro CA 90731  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 1 0  
**Transaction ID:** SA11ai00000000711037  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 775.00

**C.** Full Name (Last, First, Middle Initial)  
Raymond Soto  
 Mailing Address 433 Elberon Ave  
 City State Zip Code  
 San Pedro CA 90731  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 0 3 / 2 6 / 2 0 1 0  
**Transaction ID:** SA11ai00000000711038  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A Retired  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Election Cycle-to-Date ▼  
 775.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **600.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 68 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Beatrice Steelman  
Mailing Address 3340 Shelby Dr  
City Los Angeles State CA Zip Code 90034  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 281.00  
Date of Receipt 01 / 29 / 2010  
Transaction ID: SA11ai00000000701076  
Amount of Each Receipt this Period 20.00

**B.** Full Name (Last, First, Middle Initial)  
Beatrice Steelman  
Mailing Address 3340 Shelby Dr  
City Los Angeles State CA Zip Code 90034  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation Retired  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 281.00  
Date of Receipt 02 / 25 / 2010  
Transaction ID: SA11ai00000000705403  
Amount of Each Receipt this Period 125.00

**C.** Full Name (Last, First, Middle Initial)  
Joel Swadesh  
Mailing Address 4104 Constance Pl., NE  
City Albuquerque State NM Zip Code 87109  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Seraf Therapeutics Inc Occupation Scientist  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼ 300.00  
Date of Receipt 03 / 08 / 2010  
Transaction ID: SA11ai00000000706786  
Amount of Each Receipt this Period 150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 295.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 69 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Joe Szott

Mailing Address 1435 N 11th St

City State Zip Code  
Lafayette CO 80026

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

Name of Employer Joe Szott Occupation Writer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	5	/	2	0	1	0

**Transaction ID:** SA11ai00000000704800

Amount of Each Receipt this Period  
500.00

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

Mailing Address 418 Rose Av #4

City State Zip Code  
Venice CA 90291

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

Name of Employer LAUSD Occupation Teacher

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	4	/	2	0	1	0

**Transaction ID:** SA11ai00000000687534

Amount of Each Receipt this Period  
250.00

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

Mailing Address 21779 Congress Springs Ln

City State Zip Code  
Saratoga CA 95070

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

Name of Employer Randy Taylor Occupation Investor

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	1	0

**Transaction ID:** SA11ai00000000690329

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Vern Taylor

Mailing Address 11818 Victoria Av

City State Zip Code  
Los Angeles CA 90066

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

Name of Employer N/A Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2010

**Transaction ID:** SA11ai00000000707052

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4735 La Villa Marina #D

City State Zip Code  
Marina Del Rey CA 90292

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 01 / 15 / 2010

**Transaction ID:** SA11ai00000000692006

Amount of Each Receipt this Period  
50.00

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

Mailing Address 4735 La Villa Marina #D

City State Zip Code  
Marina Del Rey CA 90292

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

Name of Employer N/A Occupation Unemployed

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2010

**Transaction ID:** SA11ai00000000712555

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **200.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 71 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Daniel J Turner

Mailing Address 1490 Via Isola

City Monterey State CA Zip Code 93940

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

Name of Employer Sutton Law Firm Occupation Clerk

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 22 / 2010  
**Transaction ID:** SA11ai00000000709933  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 580 Silver Spur Rd

City Rancho Palos Verde State CA Zip Code 90275

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

Name of Employer Pacific Sales Occupation Retailer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 03 / 31 / 2010  
**Transaction ID:** SA11ai00000000714150  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 945 Doris Dr

City Encinitas State CA Zip Code 92024

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

Name of Employer Sandia Labs Occupation Physicist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 02 / 18 / 2010  
**Transaction ID:** SA11ai00000000703391  
 Amount of Each Receipt this Period 100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1100.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 72 / 130  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Jonathan Watkins

Mailing Address 945 Doris Dr

City State Zip Code  
Encinitas CA 92024

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

Name of Employer Occupation  
Sandia Labs Physicist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

**Transaction ID:** SA11ai00000000712429

Amount of Each Receipt this Period  
500.00

Election Cycle-to-Date ▼ 600.00

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

Mailing Address 551 Via De La Paz

City State Zip Code  
Pacific Palisades CA 90272

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	9	/	2	0	1	0

**Transaction ID:** SA11ai00000000700973

Amount of Each Receipt this Period  
100.00

Election Cycle-to-Date ▼ 320.00

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

Mailing Address 2416 Pacific Ave

City State Zip Code  
Venice CA 90291

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

Name of Employer Occupation  
Glenn Williams Architect

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	4	/	2	0	1	0

**Transaction ID:** SA11ai00000000706247

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

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



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

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

FOR LINE NUMBER: PAGE 73 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Marcy A Winograd

Mailing Address 13650 Marina Pointe Drive, #1403

City Marina Del Rey State CA Zip Code 90292

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

Name of Employer LAUSD Occupation Teacher

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1160.00

Date of Receipt 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710692  
Amount of Each Receipt this Period 25.00

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

Mailing Address 13650 Marina Pointe Drive, #1403

City Marina Del Rey State CA Zip Code 90292

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

Name of Employer LAUSD Occupation Teacher

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1160.00

Date of Receipt 03 / 25 / 2010  
**Transaction ID:** SA11ai00000000710693  
Amount of Each Receipt this Period 10.00

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

Mailing Address 812 N Foothill Rd

City Beverly Hills State CA Zip Code 90210

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

Name of Employer Jamie R. Wolf Writer Occupation Writer

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 01 / 14 / 2010  
**Transaction ID:** SA11ai00000000690339  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 285.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 74 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Gayle Wood

Mailing Address 500 S Sepulveda Suite 306

City State Zip Code  
Manhattan Beach CA 90266

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

Name of Employer Occupation  
Gayle Wood Dentist

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	1	0

Transaction ID: SA11ai00000000702365

Amount of Each Receipt this Period  
250.00

Election Cycle-to-Date Amount: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	0	/	2	0	1	0

Transaction ID: SA11ai00000000691295

Amount of Each Receipt this Period  
50.01

Election Cycle-to-Date Amount: 684.11

**C.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11ai00000000701382

Amount of Each Receipt this Period  
25.01

Election Cycle-to-Date Amount: 684.11

**SUBTOTAL** of Receipts This Page (optional) ..... ► **325.02**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 684.11

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

**Transaction ID:** SA11ai00000000702406

Amount of Each Receipt this Period  
10.00

**B.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 684.11

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

**Transaction ID:** SA11ai00000000704075

Amount of Each Receipt this Period  
50.01

**C.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 684.11

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

**Transaction ID:** SA11ai00000000704077

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **80.01**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	0

Transaction ID: SA11ai00000000709090

Amount of Each Receipt this Period  
10.01

684.11

**B.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	1	0

Transaction ID: SA11ai00000000709099

Amount of Each Receipt this Period  
10.00

684.11

**C.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	1	0

Transaction ID: SA11ai00000000710367

Amount of Each Receipt this Period  
40.01

684.11

**SUBTOTAL** of Receipts This Page (optional) ..... ► **60.02**

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

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

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

FOR LINE NUMBER: PAGE 77 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.**

Full Name (Last, First, Middle Initial)  
Evan Wulf

Mailing Address 315 Berry St #4S

City State Zip Code  
Brooklyn NY 11211

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

Name of Employer Occupation  
Columbia University Graduate Student

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
684.11

Date of Receipt  
MM / DD / YYYY  
03 / 14 / 2010

**Transaction ID:** SA11ai00000000710377

Amount of Each Receipt this Period  
10.01

**B.**

Full Name (Last, First, Middle Initial)  
Rae D Wyman

Mailing Address 3069 Crest Rd

City State Zip Code  
Rancho Palos Verde CA 90275

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

Name of Employer Occupation  
N/A Retired

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
03 / 26 / 2010

**Transaction ID:** SA11ai00000000711035

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>510.01</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>57464.87</b>

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

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

FOR LINE NUMBER: PAGE 78 / 130  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

**A.** Full Name (Last, First, Middle Initial)  
Peace Action West Voter Fund

Mailing Address 2201 Broadway Suite 321

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing federal political committee. **C** C00293894

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 127.00

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

**Transaction ID:** SA11c00000000716704

Amount of Each Receipt this Period  
22.00

In-Kind: Press Coordinati-on

**B.** Full Name (Last, First, Middle Initial)  
Peace Action West Voter Fund

Mailing Address 2201 Broadway Suite 321

City State Zip Code  
Oakland CA 94612

FEC ID number of contributing federal political committee. **C** C00293894

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 127.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 3 / 2 5 / 2 0 1 0

**Transaction ID:** SA11c00000000716705

Amount of Each Receipt this Period  
105.00

In-Kind: Press Coordinati-on

**SUBTOTAL** of Receipts This Page (optional) ..... ► **127.00**

**TOTAL** This Period (last page this line number only) ..... ► **127.00**

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) A1A Computing Mailing Address 12437 Wilshire Blvd City Los Angeles State CA Zip Code 90025 Purpose of Disbursement Computer Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716748 Date of Disbursement MM / DD / YYYY 03 / 03 / 2010
	Amount of Each Disbursement this Period 658.49
	Category/Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address 14 Arrow St City Cambridge State MA Zip Code 02138 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000691385 Date of Disbursement MM / DD / YYYY 01 / 10 / 2010
	Amount of Each Disbursement this Period 109.69
	Category/Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address 14 Arrow St City Cambridge State MA Zip Code 02138 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000694197 Date of Disbursement MM / DD / YYYY 01 / 17 / 2010
	Amount of Each Disbursement this Period 78.95
	Category/Type 001
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

847.13

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	<b>Transaction ID:</b> SB17000000000701270 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="60.18"/>
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	<b>Transaction ID:</b> SB17000000000701385 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="9.40"/>
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	<b>Transaction ID:</b> SB17000000000702409 <b>Date of Disbursement</b> <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/>
	Amount of Each Disbursement this Period <input type="text" value="3.18"/>
	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**72.76**

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000704088 Date of Disbursement MM / DD / YYYY 02 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 19.02		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000706308 Date of Disbursement MM / DD / YYYY 02 / 28 / 2010 <hr/> Amount of Each Disbursement this Period 15.44		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000709121 Date of Disbursement MM / DD / YYYY 03 / 07 / 2010 <hr/> Amount of Each Disbursement this Period 36.70		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

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

71.16

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000710391 Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2010
	Amount of Each Disbursement this Period 26.56
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000712327 Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2010
	Amount of Each Disbursement this Period 170.59
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000714939 Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2010
	Amount of Each Disbursement this Period 42.73
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

239.88

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000715023 Date of Disbursement MM / DD / YYYY 03 / 31 / 2010 <hr/> Amount of Each Disbursement this Period 22.75		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>B.</b> Full Name (Last, First, Middle Initial) ActBlue Technical Services <hr/> Mailing Address 14 Arrow St <hr/> City Cambridge State MA Zip Code 02138 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000716849 Date of Disbursement MM / DD / YYYY 02 / 21 / 2010 <hr/> Amount of Each Disbursement this Period 31.81		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>C.</b> Full Name (Last, First, Middle Initial) Automatic Printing <hr/> Mailing Address 1621 Cabrillo Av <hr/> City Torrance State CA Zip Code 90501 <hr/> Purpose of Disbursement Printing Candidate Name	Transaction ID: SB17000000000687616 Date of Disbursement MM / DD / YYYY 01 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 1676.98		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 003	
		Disbursement For:	

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

1731.54

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Automatic Printing Mailing Address 1621 Cabrillo Av City Torrance State CA Zip Code 90501 Purpose of Disbursement Printing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706410 Date of Disbursement MM / DD / YYYY 02 / 04 / 2010
	Amount of Each Disbursement this Period 274.38 Category/Type: 003
<b>B.</b> Full Name (Last, First, Middle Initial) Automatic Printing Mailing Address 1621 Cabrillo Av City Torrance State CA Zip Code 90501 Purpose of Disbursement Flyer Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706421 Date of Disbursement MM / DD / YYYY 01 / 19 / 2010
	Amount of Each Disbursement this Period 274.38 Category/Type: 003
<b>C.</b> Full Name (Last, First, Middle Initial) Automatic Printing Mailing Address 1621 Cabrillo Av City Torrance State CA Zip Code 90501 Purpose of Disbursement Bumper Stickers Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706811 Date of Disbursement MM / DD / YYYY 02 / 25 / 2010
	Amount of Each Disbursement this Period 530.09 Category/Type: 006

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

1078.85

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Automatic Printing <hr/> Mailing Address 1621 Cabrillo Av <hr/> City Torrance State CA Zip Code 90501 <hr/> Purpose of Disbursement Printing Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716740 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 598.14
	Category/Type 003
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Julian Burger <hr/> Mailing Address 1404 W. Cruces St <hr/> City Wilmington State CA Zip Code 90744 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716687 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Julian Burger <hr/> Mailing Address 1404 W. Cruces St <hr/> City Wilmington State CA Zip Code 90744 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716689 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1598.14

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Julian Burger <hr/> Mailing Address 1404 W. Cruces St <hr/> City Wilmington State CA Zip Code 90744 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716742 Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/Type 001
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Pamela Chandran <hr/> Mailing Address 1824 Los Encinos Ave <hr/> City Glendale State CA Zip Code 91208 <hr/> Purpose of Disbursement In-Kind:Food & Drink Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716724 Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2010
	Amount of Each Disbursement this Period 366.11
	Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Marc Chomel <hr/> Mailing Address 2925 Perkins Lane <hr/> City Redondo Beach State CA Zip Code 90278 <hr/> Purpose of Disbursement In-Kind:Groceries/Printer Ink Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716725 Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2010
	Amount of Each Disbursement this Period 304.60
	Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1170.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) Classic Party Rentals</p> <p>Mailing Address 8476 Steller Dr</p> <p>City Culver City State CA Zip Code 90232</p> <p>Purpose of Disbursement Equipment Rental for Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000716693</p> <p>Date of Disbursement 03 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 398.00</p> <p>003 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Colby Poster Printing</p> <p>Mailing Address 1332 W 12th Place</p> <p>City Los Angeles State CA Zip Code 90015</p> <p>Purpose of Disbursement Door Hangers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000706422</p> <p>Date of Disbursement 01 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 2714.67</p> <p>003 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Colby Poster Printing</p> <p>Mailing Address 1332 W 12th Place</p> <p>City Los Angeles State CA Zip Code 90015</p> <p>Purpose of Disbursement Door Hangers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000706425</p> <p>Date of Disbursement 01 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 2714.66</p> <p>003 Category/ Type</p>

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

5827.33

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Custom Quick Sign <hr/> Mailing Address 1453 14th St #D <hr/> City Santa Monica State CA Zip Code 90404 <hr/> Purpose of Disbursement Production and Installation of sign Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716717 Date of Disbursement MM / DD / YYYY 03 / 08 / 2010
	Amount of Each Disbursement this Period 708.73
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Custom Quick Sign <hr/> Mailing Address 1453 14th St #D <hr/> City Santa Monica State CA Zip Code 90404 <hr/> Purpose of Disbursement Production and Installation of sign Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716751 Date of Disbursement MM / DD / YYYY 03 / 01 / 2010
	Amount of Each Disbursement this Period 600.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Todd Darling <hr/> Mailing Address 2206 Louella Ave <hr/> City Venice State CA Zip Code 90291 <hr/> Purpose of Disbursement Turf Cutting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716745 Date of Disbursement MM / DD / YYYY 02 / 09 / 2010
	Amount of Each Disbursement this Period 250.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1558.73

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Fred Deni	Transaction ID: SB17000000000716694 Date of Disbursement 03 / 04 / 2010
	Mailing Address 2024 Broadway	Amount of Each Disbursement this Period 2334.20
	City Santa Monica State CA Zip Code 90409	
	Purpose of Disbursement Catered Food Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>B.</b>	Full Name (Last, First, Middle Initial) Frank Dorrel	Transaction ID: SB17000000000706419 Date of Disbursement 01 / 26 / 2010
	Mailing Address PO Box 3261	Amount of Each Disbursement this Period 250.00
	City Culver City State CA Zip Code 90231	
	Purpose of Disbursement Food/Drink Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
<b>C.</b>	Full Name (Last, First, Middle Initial) Pavillions	Transaction ID: SB17000000000027605 Date of Disbursement 01 / 26 / 2010
	Mailing Address 8969 Santa Monica Bl	Amount of Each Disbursement this Period 250.00
	City Los Angeles State CA Zip Code 90069	
	Purpose of Disbursement Food/Drink Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2584.20
<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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Frank Dorrel <hr/> Mailing Address 3967 Shedd Ter <hr/> City Culver City State CA Zip Code 90232 <hr/> Purpose of Disbursement In-Kind: Food/Drink Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716723 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Durkee & Associates <hr/> Mailing Address 1212 S Victory Bl <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Accounting/Report Preperation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706411 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) Durkee & Associates <hr/> Mailing Address 1212 S Victory Bl <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Accounting/Report Preperation Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706416 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 6 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

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

2200.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Durkee & Associates <hr/> Mailing Address 1212 S Victory Bl <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Accounting/Report Preperation Candidate Name	Transaction ID: SB17000000000716691 Date of Disbursement MM / DD / YYYY 03 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 1000.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>B.</b> Full Name (Last, First, Middle Initial) John Finley <hr/> Mailing Address 950 W 5th St <hr/> City San Pedro State CA Zip Code 90731 <hr/> Purpose of Disbursement Salary Candidate Name	Transaction ID: SB17000000000716666 Date of Disbursement MM / DD / YYYY 03 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 500.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>C.</b> Full Name (Last, First, Middle Initial) John Finley <hr/> Mailing Address 950 W 5th St <hr/> City San Pedro State CA Zip Code 90731 <hr/> Purpose of Disbursement Salary Candidate Name	Transaction ID: SB17000000000716683 Date of Disbursement MM / DD / YYYY 02 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 500.00		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

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

2000.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) John Finley <hr/> Mailing Address 950 W 5th St <hr/> City San Pedro State CA Zip Code 90731 <hr/> Purpose of Disbursement Cell Phone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716733 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2010
	Amount of Each Disbursement this Period 104.97
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Sprint <hr/> Mailing Address PO Box 650270 <hr/> City Dallas State TX Zip Code 75265 <hr/> Purpose of Disbursement Cell Phone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028154 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2010
	Amount of Each Disbursement this Period 104.97
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 8875 Washington Blvd <hr/> City Roseville State CA Zip Code 95678 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716836 Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2010
	Amount of Each Disbursement this Period 458.74
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

563.71

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 8875 Washington Blvd <hr/> City Roseville State CA Zip Code 95678 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716837 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 426.49
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 8875 Washington Blvd <hr/> City Roseville State CA Zip Code 95678 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716838 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 175.50
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services <hr/> Mailing Address 8875 Washington Blvd <hr/> City Roseville State CA Zip Code 95678 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716839 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 529.62
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1131.61

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services Mailing Address 8875 Washington Blvd City Roseville State CA Zip Code 95678 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716840 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 54.20
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services Mailing Address 8875 Washington Blvd City Roseville State CA Zip Code 95678 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716841 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 501.20
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) First Data Merchant Services Mailing Address 8875 Washington Blvd City Roseville State CA Zip Code 95678 Purpose of Disbursement Credit Card Processing Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716842 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 156.65
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

712.05

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) Caitlin Frazier</p> <p>Mailing Address 1804 Westmoreland Blvd</p> <p>City Los Angeles State CA Zip Code 90006</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000706813</p> <p>Date of Disbursement 02 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 184.72</p> <p>Category/Type 002</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Caitlin Frazier</p> <p>Mailing Address 1804 Westmoreland Blvd</p> <p>City Los Angeles State CA Zip Code 90006</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000716690</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 531.79</p> <p>Category/Type 001</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Beverly Hills Greater Association Of Realtors</p> <p>Mailing Address 8501 Wilshire Boulevard Suite 340</p> <p>City Beverly Hills State CA Zip Code 90211</p> <p>Purpose of Disbursement One Sided Sign</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028135</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 37.86</p> <p>Category/Type 001</p> <p><b>[MEMO ITEM]</b></p>

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

716.51

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Caitlin Frazier <hr/> Mailing Address 1804 Westmoreland Blvd <hr/> City Los Angeles State CA Zip Code 90006 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028134 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 400.00
	[MEMO ITEM]
	Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) One Aco Oil <hr/> Mailing Address 1401 S Garfield Ave <hr/> City Alhambra State CA Zip Code 91356 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028136 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 24.37
	[MEMO ITEM]
	Category/Type 002
<b>C.</b> Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address 10971 Chapman Av <hr/> City Garden Grove State CA Zip Code 92840 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000027611 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010
	Amount of Each Disbursement this Period 166.36
	[MEMO ITEM]
	Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Shell Oil <hr/> Mailing Address 10971 Chapman Av <hr/> City Garden Grove State CA Zip Code 92840 <hr/> Purpose of Disbursement Gas Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028137 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 40.23
	[MEMO ITEM]
	Category/Type 002
<b>B.</b> Full Name (Last, First, Middle Initial) Graphic Touch <hr/> Mailing Address 1300 S Pacific Av <hr/> City San Pedro State CA Zip Code 90733 <hr/> Purpose of Disbursement Artwork for Business Cards, Banners, Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000706412 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 307.31
	Category/Type 006
	Category/Type 006
<b>C.</b> Full Name (Last, First, Middle Initial) Edward Grysiwicz <hr/> Mailing Address 11 Bay Cove Lane <hr/> City Newport Beach State CA Zip Code 92660 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000705973 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	Category/Type 001
	Category/Type 001

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

807.31

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Edward Grysiwicz <hr/> Mailing Address 11 Bay Cove Lane <hr/> City Newport Beach State CA Zip Code 92660 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706417 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type: 001
<b>B.</b> Full Name (Last, First, Middle Initial) Edward Grysiwicz <hr/> Mailing Address 11 Bay Cove Lane <hr/> City Newport Beach State CA Zip Code 92660 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716695 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00 Category/Type: 001
<b>C.</b> Full Name (Last, First, Middle Initial) Hang-M-Hi <hr/> Mailing Address 10822 Woodward Av <hr/> City Sunland State CA Zip Code 91040 <hr/> Purpose of Disbursement Signs Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000705975 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 3900.00 Category/Type: 003

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

4900.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Mel Harker <hr/> Mailing Address 3712 Kelton Ave <hr/> City Los Angeles State CA Zip Code 90034 <hr/> Purpose of Disbursement Sound Setup for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716721 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">350.00</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0	350.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	3		0	5		2	0	1	0															
350.00																								
001																								
<b>B.</b>	Full Name (Last, First, Middle Initial) Impact Politics <hr/> Mailing Address 16740 Waters Edge Dr <hr/> City Weston State FL Zip Code 33326 <hr/> Purpose of Disbursement Campaign Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000705903 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">13305.00</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	1	0	13305.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	2		1	1		2	0	1	0															
13305.00																								
001																								
<b>C.</b>	Full Name (Last, First, Middle Initial) NGP Software Inc <hr/> Mailing Address 1225 Eye St NW #1225 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Campaign Web Package Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000027595 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">2850.00</td> </tr> </table> <hr/> Category/Type <table border="1"> <tr> <td style="text-align: center;">001</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	1		2	0	1	0	2850.00	001
M	M	/	D	D	/	Y	Y	Y	Y															
0	2		1	1		2	0	1	0															
2850.00																								
001																								

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

13655.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Impact Politics Mailing Address 16740 Waters Edge Dr City Weston State FL Zip Code 33326 Purpose of Disbursement Campaign Consulting/Rental Car Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706413 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1984.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Hertz Mailing Address 675 El Camino Real City Palo Alto State CA Zip Code 94301 Purpose of Disbursement Rental Car Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000027601 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 148.00
	Category/Type 002
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Impact Politics Mailing Address 16740 Waters Edge Dr City Weston State FL Zip Code 33326 Purpose of Disbursement Campaign Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706414 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 3236.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

5220.00

**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 101 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Impact Politics Mailing Address 16740 Waters Edge Dr City Weston State FL Zip Code 33326 Purpose of Disbursement Campaign Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716673 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 4789.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Facebook Mailing Address 156 University Av City Palo Alto State CA Zip Code 94301 Purpose of Disbursement Internet Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028126 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 302.00
	Category/Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Google Adwords Mailing Address 1600 Amphitheatre Pkwy City Mountain View State CA Zip Code 94043 Purpose of Disbursement Internet Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028125 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1887.00
	Category/Type 004
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

[MEMO ITEM]

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

4789.00

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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Jay <hr/> Mailing Address 898 Helen St <hr/> City Teaneck State NJ Zip Code 07666 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000687614 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 0
	Amount of Each Disbursement this Period 1125.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Michael Jay <hr/> Mailing Address 2411 Third St #E <hr/> City Santa Monica State CA Zip Code 90405 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716677 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Jay <hr/> Mailing Address 2411 Third St #E <hr/> City Santa Monica State CA Zip Code 90405 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716678 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 277.56
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4402.56

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) CVS Pharmacy</p> <p>Mailing Address 13171 Mindanao Way</p> <p>City Marina Del Rey State CA Zip Code 90292</p> <p>Purpose of Disbursement Electrical Cords</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028127</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 93.14</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Pavilions</p> <p>Mailing Address 11750 Wilshire Blvd</p> <p>City Los Angeles State CA Zip Code 90025</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028129</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 40.70</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) West L.A. Music</p> <p>Mailing Address 11345 Santa Monica Blvd</p> <p>City Los Angeles State CA Zip Code 90025</p> <p>Purpose of Disbursement Sound Cables</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028128</p> <p>Date of Disbursement 03 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 113.03</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Michael Jay <hr/> Mailing Address 2411 Third St #E <hr/> City Santa Monica State CA Zip Code 90405 <hr/> Purpose of Disbursement Salary/Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716681 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 4156.30
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address 1501 Lincoln Bl <hr/> City Venice State CA Zip Code 90291 <hr/> Purpose of Disbursement Computer/Printer Ink/Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028131 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1044.56
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Michael Jay <hr/> Mailing Address 2411 Third St #E <hr/> City Santa Monica State CA Zip Code 90405 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716749 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 2980.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

7136.30

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 105 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) Michael Jay</p> <p>Mailing Address 2411 Third St #E</p> <p>City Santa Monica State CA Zip Code 90405</p> <p>Purpose of Disbursement Sounds Equipment/Vehicle Rental/Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000716753</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1058.35"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Bravo Pizzeria</p> <p>Mailing Address 2400 Main Street</p> <p>City Santa Monica State CA Zip Code 90405</p> <p>Purpose of Disbursement Food</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028166</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="21.40"/></p> <p>Category/Type: <input type="text" value="001"/></p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Carpinteria Car Care</p> <p>Mailing Address 4401 North Via</p> <p>City Carpinteria State CA Zip Code 93013</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028162</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="44.14"/></p> <p>Category/Type: <input type="text" value="002"/></p> <p><b>[MEMO ITEM]</b></p>

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

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) Chevron</p> <p>Mailing Address 1732 Lincoln Blvd</p> <p>City Santa Monica State CA Zip Code 90405</p> <p>Purpose of Disbursement Gas</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028163</p> <p>Date of Disbursement 03 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 48.43</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Guitar Center</p> <p>Mailing Address 10831 West Pico Blvd</p> <p>City Los Angeles State CA Zip Code 90064</p> <p>Purpose of Disbursement Mic Stands, Sound Mixer</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028164</p> <p>Date of Disbursement 03 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 464.12</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 250 Sepulveda Bl</p> <p>City Carson State CA Zip Code 90745</p> <p>Purpose of Disbursement Paper/Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028165</p> <p>Date of Disbursement 03 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 58.00</p> <p><b>[MEMO ITEM]</b></p>

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) The Novel Cafe  Mailing Address 2507 Main St  City Santa Monica State CA Zip Code 90405  Purpose of Disbursement Food Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028167 Date of Disbursement 03 / 03 / 2010  Amount of Each Disbursement this Period 33.47  [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) Uhaul  Mailing Address 10321 National Blvd  City Los Angeles State CA Zip Code 90034  Purpose of Disbursement Vehicle Rental Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028161 Date of Disbursement 03 / 03 / 2010  Amount of Each Disbursement this Period 212.39  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) Yossi' Unocal 76  Mailing Address 300 Lincoln  City Santa Monica State CA Zip Code 90405  Purpose of Disbursement Gas Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028168 Date of Disbursement 03 / 03 / 2010  Amount of Each Disbursement this Period 100.26  [MEMO ITEM]

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Joyce Kirby  Mailing Address 2007 Perry Ave #2  City Redondo Beach State CA Zip Code 90278  Purpose of Disbursement Yard Sign Posts Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706423 Date of Disbursement 01 / 20 / 2010  Amount of Each Disbursement this Period 39.44  001 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) Joyce Kirby  Mailing Address 2007 Perry Ave #2  City Redondo Beach State CA Zip Code 90278  Purpose of Disbursement Office Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706424 Date of Disbursement 01 / 13 / 2010  Amount of Each Disbursement this Period 160.66  001 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) Staples  Mailing Address 1501 Lincoln Bl  City Venice State CA Zip Code 90291  Purpose of Disbursement Office Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000027606 Date of Disbursement 01 / 13 / 2010  Amount of Each Disbursement this Period 160.66  001 Category/ Type  <b>[MEMO ITEM]</b>

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

200.10

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Bill Lachemacher <hr/> Mailing Address 24 Riverpebble Court <hr/> City Sacramento State CA Zip Code 95833 <hr/> Purpose of Disbursement Salary Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716696 Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2010
	Amount of Each Disbursement this Period 3000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Map The Vote LLC <hr/> Mailing Address 1749 Marin Ave <hr/> City Berkeley State CA Zip Code 94707 <hr/> Purpose of Disbursement Field Plan and Strategic Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000705972 Date of Disbursement M M / D D / Y Y Y Y 02 / 01 / 2010
	Amount of Each Disbursement this Period 125.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Map The Vote LLC <hr/> Mailing Address 1749 Marin Ave <hr/> City Berkeley State CA Zip Code 94707 <hr/> Purpose of Disbursement Field Plan and Strategic Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706415 Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2010
	Amount of Each Disbursement this Period 750.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**3875.00**

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Sheri Meyers <hr/> Mailing Address 11411 Charnock Rd <hr/> City Los Angeles State CA Zip Code 90066 <hr/> Purpose of Disbursement Fundraising Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716668 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 1474.39 <hr/> Category/Type 003
<b>B.</b>	Full Name (Last, First, Middle Initial) FedEx <hr/> Mailing Address 4170 Del Rey Av <hr/> City Marina Del Rey State CA Zip Code 90292 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028120 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 14.03 <hr/> Category/Type 001 [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) Pavilions <hr/> Mailing Address 11750 Wilshire Blvd <hr/> City Los Angeles State CA Zip Code 90025 <hr/> Purpose of Disbursement Food/Drink for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028116 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period 260.92 <hr/> Category/Type 003 [MEMO ITEM]

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

1474.39

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Smart & Final <hr/> Mailing Address 9535 E Alondra <hr/> City Bellflower State CA Zip Code 90706 <hr/> Purpose of Disbursement Food/Drink for Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028117 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 133.86
	[MEMO ITEM]
	Category/Type 003
<b>B.</b> Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address 5407 Wilshire Bl <hr/> City Los Angeles State CA Zip Code 90038 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028118 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 61.44
	[MEMO ITEM]
	Category/Type 001
<b>C.</b> Full Name (Last, First, Middle Initial) Subway <hr/> Mailing Address 11819 Wilshire Blvd <hr/> City Los Angeles State CA Zip Code 90025 <hr/> Purpose of Disbursement Food/Drink Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028121 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 31.65
	[MEMO ITEM]
	Category/Type 001

**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 112 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) US Post Office  Mailing Address 11000 Wilshire Blvd  City Los Angeles State CA Zip Code 90024  Purpose of Disbursement Postage Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028119 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 123.71  <b>[MEMO ITEM]</b>
<b>B.</b>	Full Name (Last, First, Middle Initial) Sheri Meyers  Mailing Address 11411 Charnock Rd  City Los Angeles State CA Zip Code 90066  Purpose of Disbursement Fundraising Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000716688 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period 1173.00  <b>[MEMO ITEM]</b>
<b>C.</b>	Full Name (Last, First, Middle Initial) Staples  Mailing Address 11341 National Blvd  City Los Angeles State CA Zip Code 90064  Purpose of Disbursement Office Supplies Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000028132 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0	Amount of Each Disbursement this Period 137.99  <b>[MEMO ITEM]</b>

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

1173.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Sheri Meyers <hr/> Mailing Address 11411 Charnock Rd <hr/> City Los Angeles State CA Zip Code 90066 <hr/> Purpose of Disbursement Fundraising Fee/Office Supplies/Drinks Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716697 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2249.02
	Category/Type 001
	[MEMO ITEM]
<b>B.</b> Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address 11341 National Blvd <hr/> City Los Angeles State CA Zip Code 90064 <hr/> Purpose of Disbursement Printer Ink/Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028140 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 243.34
	Category/Type 001
	[MEMO ITEM]
<b>C.</b> Full Name (Last, First, Middle Initial) Trader Joe's <hr/> Mailing Address 3456 S Sepulveda Blvd <hr/> City Los Angeles State CA Zip Code 90034 <hr/> Purpose of Disbursement Drinks Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028142 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 168.77
	Category/Type 003
	[MEMO ITEM]

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

2249.02

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) Sheri Meyers <hr/> Mailing Address 11411 Charnock Rd <hr/> City Los Angeles State CA Zip Code 90066 <hr/> Purpose of Disbursement Fundraising Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716727 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2010
	Amount of Each Disbursement this Period 1437.68
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) FedEx <hr/> Mailing Address 4170 Del Rey Av <hr/> City Marina Del Rey State CA Zip Code 90292 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028153 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2010
	Amount of Each Disbursement this Period 13.90
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address P.O. Box 82-0000795280 <hr/> City Omaha State NE Zip Code 68103 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028151 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2010
	Amount of Each Disbursement this Period 97.82
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

[MEMO ITEM]

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

1437.68

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) US Post Office</p> <p>Mailing Address 1701 S Central Av</p> <p>City Los Angeles State CA Zip Code 90001</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028152</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">47.96</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	1	/	2	0	1	0	47.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	3	/	1	1	/	2	0	1	0													
47.96																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sheri Meyers</p> <p>Mailing Address 11411 Charnock Rd</p> <p>City Los Angeles State CA Zip Code 90066</p> <p>Purpose of Disbursement Fundraising Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB170000000000716744</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">434.96</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	1	/	2	0	1	0	434.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	1	/	2	0	1	0													
434.96																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx</p> <p>Mailing Address 4170 Del Rey Av</p> <p>City Marina Del Rey State CA Zip Code 90292</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028157</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">13.96</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	1	/	2	0	1	0	13.96
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	1	/	2	0	1	0													
13.96																						

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

<b>434.96</b>
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**TOTAL** This Period (last page this line number only) ..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address 11341 National Blvd</p> <p>City Los Angeles State CA Zip Code 90064</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028156</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">54.62</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	1	/	2	0	1	0	54.62
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	1	/	2	0	1	0													
54.62																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) US Post Office</p> <p>Mailing Address 1701 S Central Av</p> <p>City Los Angeles State CA Zip Code 90001</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000028158</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>2</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">49.00</td> </tr> </table> <p><b>[MEMO ITEM]</b></p>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	1	1	/	2	0	1	0	49.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	2	/	1	1	/	2	0	1	0													
49.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sheri Meyers</p> <p>Mailing Address 11411 Charnock Rd</p> <p>City Los Angeles State CA Zip Code 90066</p> <p>Purpose of Disbursement Fundraising Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB170000000000716747</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">472.92</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	2	0	/	2	0	1	0	472.92
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	2	0	/	2	0	1	0													
472.92																						

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

<b>472.92</b>
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) US Post Office <hr/> Mailing Address 1701 S Central Av <hr/> City Los Angeles State CA Zip Code 90001 <hr/> Purpose of Disbursement Postage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000028160 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 0 / 2 0 1 0
	Amount of Each Disbursement this Period 222.92
	[MEMO ITEM]
	Category/Type 001
<b>B.</b> Full Name (Last, First, Middle Initial) Trevor Montgomery <hr/> Mailing Address 1454 W Walton <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement Website Design Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000716750 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 1250.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) James Parris <hr/> Mailing Address 11507 Missouri Ave #10 <hr/> City Los Angeles State CA Zip Code 90025 <hr/> Purpose of Disbursement Production of Internet PSA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB170000000000716684 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 750.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2000.00

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) James Parris  Mailing Address 11507 Missouri Ave #10  City Los Angeles State CA Zip Code 90025  Purpose of Disbursement Production of Internet PSA Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716707 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 1 0  Amount of Each Disbursement this Period 750.00  Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Pollmans Insurance Agency  Mailing Address 4582 Katella Av  City Los Alamitos State CA Zip Code 90720  Purpose of Disbursement Insurance Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000705971 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0  Amount of Each Disbursement this Period 1264.25  Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) Harold Quan  Mailing Address 1939 Benecia Ave  City Los Angeles State CA Zip Code 90025  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716665 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 1 0  Amount of Each Disbursement this Period 1523.89  Category/Type 001

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

**3538.14**

**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 119 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Harold Quan  Mailing Address 1939 Benecia Ave  City Los Angeles State CA Zip Code 90025  Purpose of Disbursement Salary Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716680 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010  Amount of Each Disbursement this Period 1523.89  Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Random Lengths  Mailing Address 1300 S. Pacific Ave  City San Pedro State CA Zip Code 90733  Purpose of Disbursement Graphic Design Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716675 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2010  Amount of Each Disbursement this Period 1035.00  Category/Type 004
<b>C.</b>	Full Name (Last, First, Middle Initial) RAR2-Villa Marina Center  Mailing Address 13432 Maxella Ave C-16  City Marina Del Rey State CA Zip Code 90292  Purpose of Disbursement Rent Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716685 Date of Disbursement M M / D D / Y Y Y Y 02 / 18 / 2010  Amount of Each Disbursement this Period 892.80  Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3451.69
<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 120 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) RAR2-Villa Marina Center <hr/> Mailing Address 13432 Maxella Ave C-16 <hr/> City Marina Del Rey State CA Zip Code 90292 <hr/> Purpose of Disbursement Security Deposit Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716686 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) RAR2-Villa Marina Center <hr/> Mailing Address 13432 Maxella Ave C-16 <hr/> City Marina Del Rey State CA Zip Code 90292 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716726 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) RAR2-Villa Marina Center <hr/> Mailing Address 13432 Maxella Ave C-16 <hr/> City Marina Del Rey State CA Zip Code 90292 <hr/> Purpose of Disbursement Rent Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716737 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00
	Category/Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

6000.00

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

A.	Full Name (Last, First, Middle Initial) S&S Printers	Transaction ID: SB17000000000705974
	Mailing Address 2100 W Lincoln Ave	Date of Disbursement MM / DD / YYYY 02 / 04 / 2010
	City Anaheim State CA Zip Code 92801	Amount of Each Disbursement this Period 1443.21
	Purpose of Disbursement Banner/Buttons	006 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) S&S Printers	Transaction ID: SB17000000000706420
	Mailing Address 2100 W Lincoln Ave	Date of Disbursement MM / DD / YYYY 01 / 26 / 2010
	City Anaheim State CA Zip Code 92801	Amount of Each Disbursement this Period 5158.25
	Purpose of Disbursement Yard Signs	006 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Secretary Of State	Transaction ID: SB17000000000716752
	Mailing Address 1500 11th St #495	Date of Disbursement MM / DD / YYYY 02 / 17 / 2010
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period 1146.66
	Purpose of Disbursement Filing Fee	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

7748.12

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 122 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Andrew Silber  Mailing Address 736 Bynner Dr  City San Pedro State CA Zip Code 90732  Purpose of Disbursement In-Kind: Food/Drink/Cooking Tools Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000710593 Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2010  Amount of Each Disbursement this Period 2400.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Sharona Smith  Mailing Address 1445 Reeves St #106  City Los Angeles State CA Zip Code 90035  Purpose of Disbursement Administrative Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000687622 Date of Disbursement M M / D D / Y Y Y Y 01 / 04 / 2010  Amount of Each Disbursement this Period 300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Sharona Smith  Mailing Address 1445 Reeves St #106  City Los Angeles State CA Zip Code 90035  Purpose of Disbursement Administrative Consulting Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706418 Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2010  Amount of Each Disbursement this Period 396.95

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

3096.95

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharona Smith <hr/> Mailing Address 1445 Reeves St #106 <hr/> City Los Angeles State CA Zip Code 90035 <hr/> Purpose of Disbursement Administrative Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716671 Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 500.00 <hr/> Category/Type 001
<b>B.</b>	Full Name (Last, First, Middle Initial) Sharona Smith <hr/> Mailing Address 1445 Reeves St #106 <hr/> City Los Angeles State CA Zip Code 90035 <hr/> Purpose of Disbursement Administrative Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716719 Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 300.00 <hr/> Category/Type 001
<b>C.</b>	Full Name (Last, First, Middle Initial) The Valettes Ltd. <hr/> Mailing Address PO Box 1306 <hr/> City Hermosa Beach State CA Zip Code 90254 <hr/> Purpose of Disbursement Dinner Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716692 Date of Disbursement M M / D D / Y Y Y Y 03 / 04 / 2010 <hr/> Amount of Each Disbursement this Period 417.60 <hr/> Category/Type 003

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

1217.60

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<p><b>A.</b> Full Name (Last, First, Middle Initial) The Whale &amp; Ale</p> <p>Mailing Address 327 W 7th St</p> <p>City San Pedro State CA Zip Code 90731</p> <p>Purpose of Disbursement Dinner Event</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000716667</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="720.00"/></p> <p>Category/Type: <input type="text" value="003"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&amp;A</p> <p>Mailing Address 750 Fairmont Ave #201</p> <p>City Glendale State CA Zip Code 91203</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000689946</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2.60"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&amp;A</p> <p>Mailing Address 750 Fairmont Ave #201</p> <p>City Glendale State CA Zip Code 91203</p> <p>Purpose of Disbursement Credit Card Processing Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17000000000701200</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="35.90"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 125 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000703116 Date of Disbursement MM / DD / YYYY 02 / 16 / 2010 <hr/> Amount of Each Disbursement this Period 6.35		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000705320 Date of Disbursement MM / DD / YYYY 02 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 35.20		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	
<b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name	Transaction ID: SB17000000000705339 Date of Disbursement MM / DD / YYYY 02 / 25 / 2010 <hr/> Amount of Each Disbursement this Period 90.90		
		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Category/Type: 001	
		Disbursement For:	

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

132.45

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 126 / 130

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000707156 Date of Disbursement MM / DD / YYYY 03 / 10 / 2010
	Amount of Each Disbursement this Period 2.60
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000707891 Date of Disbursement MM / DD / YYYY 03 / 12 / 2010
	Amount of Each Disbursement this Period 1.35
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000710393 Date of Disbursement MM / DD / YYYY 03 / 19 / 2010
	Amount of Each Disbursement this Period 5.10
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

9.05

**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)

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

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NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) United Merchant Services/D&A <hr/> Mailing Address 750 Fairmont Ave #201 <hr/> City Glendale State CA Zip Code 91203 <hr/> Purpose of Disbursement Credit Card Processing Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000710887 Date of Disbursement MM / DD / YYYY 03 / 26 / 2010
	Amount of Each Disbursement this Period 33.15
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon SRC <hr/> Mailing Address 821 First Av No <hr/> City Saint Petersburg State FL Zip Code 33701 <hr/> Purpose of Disbursement Phone & Internet Set-Up Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000706812 Date of Disbursement MM / DD / YYYY 02 / 26 / 2010
	Amount of Each Disbursement this Period 350.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Watch Street Consulting Inc <hr/> Mailing Address 2041 W Division <hr/> City Chicago State IL Zip Code 60622 <hr/> Purpose of Disbursement Website Design Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17000000000716670 Date of Disbursement MM / DD / YYYY 03 / 29 / 2010
	Amount of Each Disbursement this Period 1250.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

1633.15

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

106975.55

**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)  
Winograd For Congress 2010

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Automatic Printing	Nature of Debt (Purpose): Printing
Mailing Address 1621 Cabrillo Av	
City State ZIP Code Torrance CA 90501	

Outstanding Balance Beginning This Period 1881.12	<b>Transaction ID:</b> SD10000000000008635	
Amount Incurred This Period 0.00	Payment This Period 1676.98	Outstanding Balance at Close of This Period 204.14

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Grysiewicz, Edward	Nature of Debt (Purpose): Website Technical Support
Mailing Address 11 Bay Cove Lane	
City State ZIP Code Newport Beach CA 92660	

Outstanding Balance Beginning This Period 500.00	<b>Transaction ID:</b> SD10000000000008783	
Amount Incurred This Period 0.00	Payment This Period 500.00	Outstanding Balance at Close of This Period 0.00

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Impact Politics	Nature of Debt (Purpose): Campaign Consulting
Mailing Address 16740 Waters Edge Dr	
City State ZIP Code Weston FL 33326	

Outstanding Balance Beginning This Period 1984.00	<b>Transaction ID:</b> SD10000000000008777	
Amount Incurred This Period 0.00	Payment This Period 1984.00	Outstanding Balance at Close of This Period 0.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	204.14
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	



**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)  
Winograd For Congress 2010

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Jay, Michael			Nature of Debt (Purpose): Salary
Mailing Address 898 Helen St			
City Teaneck	State NJ	ZIP Code 07666	

Outstanding Balance Beginning This Period <input type="text" value="1125.00"/>		<b>Transaction ID:</b> SD10000000000008775	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="1125.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Smith, Sharona			Nature of Debt (Purpose): Salary
Mailing Address 1445 Reeves St #106			
City Los Angeles	State CA	ZIP Code 90035	

Outstanding Balance Beginning This Period <input type="text" value="300.00"/>		<b>Transaction ID:</b> SD10000000000008776	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="300.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Winograd, Marcy A.			Nature of Debt (Purpose): Los Angeles County Registrar Filing Fee
Mailing Address 14006 Palawan Way #212			
City Marina Del Rey	State CA	ZIP Code 90292	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		<b>Transaction ID:</b> SD10000000000008996	
Amount Incurred This Period <input type="text" value="7400.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="7400.00"/>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<input type="text" value="7400.00"/>
<b>2) TOTALS</b> This Period (last page this line number only).....	<input type="text"/>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 130 / 130
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Winograd For Congress 2010

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Winograd, Marcy A.	Nature of Debt (Purpose): Web Site Launch					
Mailing Address 14006 Palawan Way #212						
<table border="0"> <tr> <td>City</td> <td>State</td> <td>ZIP Code</td> </tr> <tr> <td>Marina Del Rey</td> <td>CA</td> <td>90292</td> </tr> </table>		City	State	ZIP Code	Marina Del Rey	CA
City	State	ZIP Code				
Marina Del Rey	CA	90292				

Outstanding Balance Beginning This Period		<b>Transaction ID: SD100000000000008188</b>	
2500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2500.00	

1) <b>SUBTOTALS</b> This Period This Page (optional).....	2500.00
2) <b>TOTALS</b> This Period (last page this line number only).....	10104.14
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	10104.14