

# 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

Friends of Lois Capps

ADDRESS (number and street) PO Box 23940

Check if different than previously reported. (ACC)

Santa Barbara CA 93121

2. **FEC IDENTIFICATION NUMBER** C00331389

**IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

CA 23

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 07 01 2009 through 09 30 2009

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

Type or Print Name of Treasurer Chris Reed

Signature of Treasurer Electronically Filed by Chris Reed Date 10 15 2009

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends of Lois Capps

Report Covering the Period:

From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	112625.00	347617.71
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	50.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	112625.00	347567.71
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	42693.54	191201.14
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3873.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	42693.54	187327.30
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>473259.98</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>123500.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**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  
Friends of Lois Capps

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	9

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

36700.00

131260.71

(ii) Unitemized.....

14925.00

37107.00

(iii) TOTAL of contributions

51625.00

168367.71

from individuals..... ▶

0.00

0.00

(b) Political Party Committees.....

61000.00

179250.00

(c) Other Political Committees  
(such as PACS).....

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

112625.00

347617.71

(add Lines 11(a)(iii), (b), (c), and (d))

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

0.00

3873.84

15. OTHER RECEIPTS  
(Dividends, Interest, etc.).....

1348.50

4007.60

16. **TOTAL RECEIPTS** (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

113973.50

355499.15

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	42693.54	191201.14
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	50.00
(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	50.00
21. OTHER DISBURSEMENTS.....	33698.00	111093.61
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	76391.54	302344.75

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	435678.02
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	113973.50
25. SUBTOTAL (add Line 23 and Line 24).....	549651.52
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	76391.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	473259.98

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input 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	PAGE 5 / 68
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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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Allyn Arnold		Date of Receipt MM / DD / YYYY 09 / 29 / 2009		
	Mailing Address 777 North Ocean Avenue		<b>Transaction ID:</b> SA11AI.39328		
	City Cayucos	State CA	Zip Code 93430	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Election Cycle-to-Date ▼ 600.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Ross Bagdasarian		Date of Receipt MM / DD / YYYY 09 / 25 / 2009		
	Mailing Address 1192 E. Mountain Drive		<b>Transaction ID:</b> SA11AI.39199		
	City Santa Barbara	State CA	Zip Code 93108	Amount of Each Receipt this Period 1000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Bagdasarian Productions Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CEO Election Cycle-to-Date ▼ 1000.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) Marshall Brachman		Date of Receipt MM / DD / YYYY 09 / 22 / 2009		
	Mailing Address 634 A Street NE		<b>Transaction ID:</b> SA11AI.39281		
	City Washington	State DC	Zip Code 20002	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Brachman and Associates Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Owner Election Cycle-to-Date ▼ 500.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<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: (check only one)	PAGE 6 / 68
	<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Charles Brain		Date of Receipt
	Mailing Address 316 Second St. SE #100		<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 09 / 22 / 2009
	City	State	Zip Code
	Washington	DC	20003
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39290
Name of Employer Capitol Hill Strategies, LLC		Occupation Legislative Consultant	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"/> 500.00

<b>B.</b>	Full Name (Last, First, Middle Initial) Mary Jane Brinton		Date of Receipt
	Mailing Address 2434 Broadway St.		<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 09 / 21 / 2009
	City	State	Zip Code
	San Francisco	CA	94115
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39170
Name of Employer Retired		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"/> 1250.00

<b>C.</b>	Full Name (Last, First, Middle Initial) Michelle Buchman		Date of Receipt
	Mailing Address 608 Del Norte 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 07 / 07 / 2009
	City	State	Zip Code
	Ojai	CA	93023
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39076
Name of Employer retired		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"/> 1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 1250.00
<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 7 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Robert Burns

Mailing Address 899 Park Lane

City State Zip Code  
Santa Barbara CA 93108

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Kinkos Founding Partner

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 2 8 / 2 0 0 9

**Transaction ID:** SA11AI.39337

Amount of Each Receipt this Period  
2400.00

2400.00

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

Mailing Address 1437 Hillcrest Road

City State Zip Code  
Santa Barbara CA 93103

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Miramonte Communications President

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 3 0 / 2 0 0 9

**Transaction ID:** SA11AI.39275

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address 5396 Calarosa Ranch Rd.

City State Zip Code  
Camarillo CA 93012

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
DeMarco Productions Manager

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

Date of Receipt  
M M / D D / Y Y Y Y  
0 8 / 0 8 / 2 0 0 9

**Transaction ID:** SA11AI.39081

Amount of Each Receipt this Period  
1000.00

1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3650.00

**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 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Judy Egenolf  
Mailing Address 130 E. Carrillo  
City Santa Barbara State CA Zip Code 93101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Egenolf Associates Occupation Attorney  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 650.00  
Date of Receipt 09 / 10 / 2009  
Transaction ID: SA11AI.39341  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mercedes Eichholz  
Mailing Address 212 Equestrian Ave.  
City Santa Barbara State CA Zip Code 93101  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 1000.00  
Date of Receipt 09 / 15 / 2009  
Transaction ID: SA11AI.39342  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Garold Faber  
Mailing Address 10053 Halifax St  
City Ventura State CA Zip Code 93004  
FEC ID number of contributing federal political committee. **C**  
Name of Employer retired Occupation retired  
Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 350.00  
Date of Receipt 07 / 03 / 2009  
Transaction ID: SA11AI.39033  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00  
**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 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Leni Fe Bland

Mailing Address 2059 Boundry Drive

City State Zip Code  
Santa Barbara CA 93108

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Self-employed Businesswoman

Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 4700.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 9 / 1 8 / 2 0 0 9

**Transaction ID:** SA11AI.39142

Amount of Each Receipt this Period  
2400.00

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

Mailing Address 6488 Crayford St.

City State Zip Code  
Burke VA 22015

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Cornerstone Govt. Affairs Vice President

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 9 / 2 2 / 2 0 0 9

**Transaction ID:** SA11AI.39287

Amount of Each Receipt this Period  
250.00

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

Mailing Address 4678 Via Huerto

City State Zip Code  
Santa Barbara CA 93110

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Innovative Micro Technology CEO

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 9 / 1 5 / 2 0 0 9

**Transaction ID:** SA11AI.39449

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... 3150.00

**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 / 68
	<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Sharon Frederick		Date of Receipt
	Mailing Address PO Box 6477		<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 07 / 01 / 2009
	City	State	Zip Code
	Los Osos	CA	93412-6477
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39084
Name of Employer Retired		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"/> 100.00
		<input type="text"/> 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Sharon Frederick		Date of Receipt
	Mailing Address PO Box 6477		<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 08 / 13 / 2009
	City	State	Zip Code
	Los Osos	CA	93412-6477
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39112
Name of Employer Retired		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"/> 100.00
		<input type="text"/> 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Jose Fulco		Date of Receipt
	Mailing Address 4071 Bithynia 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 09 / 19 / 2009
	City	State	Zip Code
	Santa Barbara	CA	93110
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39340
Name of Employer Retired		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"/> 250.00
		<input type="text"/> 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 450.00
<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 11 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
George Gaynes

Mailing Address 3344 Campanil Drive

City State Zip Code  
Santa Barbara CA 93109

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

Name of Employer Occupation  
McLerie-Gaynes, Inc. Actor

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2009

**Transaction ID:** SA11AI.39347

Amount of Each Receipt this Period  
500.00

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

Mailing Address 118 Calle Bello Rd.

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Self Physician

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2009

**Transaction ID:** SA11AI.39166

Amount of Each Receipt this Period  
250.00

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

Mailing Address 118 Calle Bello Rd.

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Self Physician

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2009

**Transaction ID:** SA11AI.39265

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: (check only one)	PAGE 12 / 68
	<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Paul Glenn	Date of Receipt MM / DD / YYYY 09 / 11 / 2009
	Mailing Address P.O. Box 50310	<b>Transaction ID:</b> SA11AI.39327
	City State Zip Code Santa Barbara CA 93150	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer self Occupation Investor Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2800.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Linda Gluck	Date of Receipt MM / DD / YYYY 09 / 21 / 2009
	Mailing Address 743 San Ysidro Road	<b>Transaction ID:</b> SA11AI.39168
	City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation 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) Anna Grotenhuis	Date of Receipt MM / DD / YYYY 09 / 23 / 2009
	Mailing Address 2125 Ten Acre Road	<b>Transaction ID:</b> SA11AI.39345
	City State Zip Code Santa Barbara CA 93108	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Grotenhuis Investments, Inc. Occupation Real Estate Investor Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<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 13 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.**

Full Name (Last, First, Middle Initial)  
John Gustave Wolschlaeger

Mailing Address P.O. Box 23541

City State Zip Code  
Santa Barbara CA 93121

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

Name of Employer Occupation  
The Farmer Boy server

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	8	/	2	0	0	9

Transaction ID: SA11AI.39146

Amount of Each Receipt this Period  
75.00

425.00

**B.**

Full Name (Last, First, Middle Initial)  
Brad Hall

Mailing Address 2811 Wilshire Blvd.  
#700

City State Zip Code  
Santa Monica CA 90403

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	0	9

Transaction ID: SA11AI.39427

Amount of Each Receipt this Period  
1000.00

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Harriman

Mailing Address 4167 Cresta Ave

City State Zip Code  
Santa Barbara CA 93110

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  

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

Transaction ID: SA11AI.39321

Amount of Each Receipt this Period  
250.00

250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1325.00**

**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 / 68
	(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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Joan Hebert	Date of Receipt MM / DD / YYYY 09 / 28 / 2009
	Mailing Address 5455 8th St. #66	<b>Transaction ID:</b> SA11AI.39264
	City State Zip Code Carpinteria CA 93013	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Julius Hobson	Date of Receipt MM / DD / YYYY 09 / 22 / 2009
	Mailing Address 3600 38th St. NW #A-271	<b>Transaction ID:</b> SA11AI.39289
	City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Bryan Cave Senior Policy Advisor	
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) Laura Holtz	Date of Receipt MM / DD / YYYY 09 / 03 / 2009
	Mailing Address PO Box 7107	<b>Transaction ID:</b> SA11AI.39247
	City State Zip Code Oxnard CA 93031	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Retired retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<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 15 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Heidi Jensen  
Mailing Address P.O. Box 50007  
City Santa Barbara State CA Zip Code 93150  
FEC ID number of contributing federal political committee. **C**  
Name of Employer 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 Y  
0 9 / 2 8 / 2 0 0 9  
Transaction ID: SA11AI.39336  
Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
Virginia Keast  
Mailing Address 12594 Spiller Lane  
City Manassas State VA Zip Code 20112  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Homemaker  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
250.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 9  
Transaction ID: SA11AI.39283  
Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Tovah Ladier  
Mailing Address 5004 Regency Place  
City Alexandria State VA Zip Code 22304  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Vice President  
Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
Election Cycle-to-Date ▼  
500.00  
Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 9  
Transaction ID: SA11AI.39442  
Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1250.00**  
**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 16 / 68
	<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Larry Layne	Date of Receipt MM / DD / YYYY 09 / 16 / 2009
	Mailing Address 14800 Rinaldi St.	<b>Transaction ID:</b> SA11AI.39239
	City State Zip Code Mission Hills CA 91345-1230	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Nova Development Co. 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>B.</b>	Full Name (Last, First, Middle Initial) Peter Leon	Date of Receipt MM / DD / YYYY 09 / 22 / 2009
	Mailing Address 2006 Columbia Rd NW #7	<b>Transaction ID:</b> SA11AI.39294
	City State Zip Code Washington DC 20009	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Dow Lohnes Lobbyist	
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) John A. Lewis	Date of Receipt MM / DD / YYYY 09 / 17 / 2009
	Mailing Address 1522 Kronborg Drive	<b>Transaction ID:</b> SA11AI.39438
	City State Zip Code Solvang CA 93463	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation 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>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	575.00
<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 17 / 68
	(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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Dr. Mark Lisagor		Date of Receipt
	Mailing Address 477 E. Calle Higuera		<input type="text" value="09"/> / <input type="text" value="21"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Camarillo	CA	93010
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39243
Name of Employer self		Occupation	Amount of Each Receipt this Period
Pediatric Dentist			<input type="text" value="250.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) Armando Lopez		Date of Receipt
	Mailing Address P.O. Box 6045		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Oxnard	CA	93031
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39054
Name of Employer Plaza Development Partners		Occupation	Amount of Each Receipt this Period
Partner			<input type="text" value="250.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="250.00"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) Julia Louis-Dreyfus		Date of Receipt
	Mailing Address 2811 Wilshire Blvd Suite 700		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Santa Monica	CA	90403
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.39339
Name of Employer Self		Occupation	Amount of Each Receipt this Period
Actress			<input type="text" value="1000.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1500.00"/>
<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 18 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Bryan MacDonald

Mailing Address 355 S. G Street

City Oxnard State CA Zip Code 93030

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

Name of Employer City of Oxnard Occupation City Councilmember

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 08 / 08 / 2009  
**Transaction ID: SA11AI.39046**  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 2661 Tallant Road Apt. 608

City Santa Barbara State CA Zip Code 93105

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

Name of Employer Occupation retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 07 / 10 / 2009  
**Transaction ID: SA11AI.39026**  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 2661 Tallant Road Apt. 608

City Santa Barbara State CA Zip Code 93105

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

Name of Employer Occupation retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 07 / 30 / 2009  
**Transaction ID: SA11AI.39085**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 19 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Pat McPherson

Mailing Address 1111 N. Montgomery St.

City Ojai State CA Zip Code 93023

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

Name of Employer GIGAVAC Occupation Consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 09 / 18 / 2009  
**Transaction ID: SA11AI.39141**  
 Amount of Each Receipt this Period 250.00

**B.** Full Name (Last, First, Middle Initial)  
MORANGO BAND OF MISSION INDIANS

Mailing Address P.O. Box 366

City Cabazon State CA Zip Code 92230

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

Name of Employer Occupation

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 22 / 2009  
**Transaction ID: SA11AI.39292**  
 Amount of Each Receipt this Period 1000.00

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

Mailing Address 1626 Foxhall Rd. NW

City Washington State DC Zip Code 20007

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

Name of Employer self-employed Occupation consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 09 / 28 / 2009  
**Transaction ID: SA11AI.39446**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 20 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

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

Mailing Address 3720 Manderina Court

City State Zip Code  
Santa Barbara CA 93105

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

Name of Employer self Occupation  
Engineer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 22 / 2009

**Transaction ID:** SA11AI.39252

Amount of Each Receipt this Period  
200.00

300.00

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

Mailing Address 111 Skyline Circle

City State Zip Code  
Santa Barbara CA 93109

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

Name of Employer self Occupation  
writer

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2009

**Transaction ID:** SA11AI.39334

Amount of Each Receipt this Period  
500.00

575.00

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

Mailing Address 528 Holly Ave.

City State Zip Code  
Oxnard CA 93036

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

Name of Employer CAUSE Occupation  
Attorney

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

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 08 / 2009

**Transaction ID:** SA11AI.39055

Amount of Each Receipt this Period  
250.00

350.00

**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 21 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Jill Rathbun  
Mailing Address 624 S. Highland  
City Arlington State VA Zip Code 22204  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Galileo Consulting Group, Inc. Occupation Health care consultant  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 08 / 04 / 2009  
Transaction ID: SA11AI.39092  
Amount of Each Receipt this Period 250.00  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Jane Rieffel  
Mailing Address 721-A Mas Amigas  
City Santa Barbara State CA Zip Code 93105  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 09 / 22 / 2009  
Transaction ID: SA11AI.39182  
Amount of Each Receipt this Period 200.00  
700.00

**C.** Full Name (Last, First, Middle Initial)  
David Rintels  
Mailing Address 2002 Old Ranch Rd  
City Los Angeles State CA Zip Code 90049  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Self Occupation Writer  
Receipt For: 2010 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼  
Date of Receipt 09 / 09 / 2009  
Transaction ID: SA11AI.39349  
Amount of Each Receipt this Period 1000.00  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1450.00  
**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 22 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

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

Mailing Address P.O. Box 23291

City State Zip Code  
Ventura CA 93002

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

Name of Employer Occupation  
American Lung Association Health Educator

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	8	/	2	0	0	9

**Transaction ID:** SA11AI.39048

Amount of Each Receipt this Period  
250.00

250.00

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

Mailing Address 215 E. Mission St.

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	8	/	2	0	0	9

**Transaction ID:** SA11AI.39267

Amount of Each Receipt this Period  
250.00

450.00

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

Mailing Address 225 East Valerio Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation  
Retired Retired

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

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** SA11AI.39325

Amount of Each Receipt this Period  
100.00

400.00

**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 23 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Maryan Schall

Mailing Address 432 Ennisbrook Drive

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer 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	9	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.39238

Amount of Each Receipt this Period  
350.00

350.00

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

Mailing Address 514 Las Fuentes Drive

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Retired retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	9

Transaction ID: SA11AI.39412

Amount of Each Receipt this Period  
2400.00

4800.00

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

Mailing Address 1727 Fernald Point Lane

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Specialty Merchandise Corporation President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.39335

Amount of Each Receipt this Period  
500.00

500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3250.00**

**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 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Julie Shroyer

Mailing Address 5536 32nd St. NW

City Washington State DC Zip Code 20015

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

Name of Employer Wheat Govt. Relations Occupation Senior Vice President

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 08 / 04 / 2009  
**Transaction ID:** SA11AI.39094  
 Amount of Each Receipt this Period 500.00

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

Mailing Address 5383 Hollister Ave. Suite 220

City Santa Barbara State CA Zip Code 93111

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

Name of Employer Global Power Supply Occupation Executive

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2009  
**Transaction ID:** SA11AI.39260  
 Amount of Each Receipt this Period 100.00

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

Mailing Address 5410 Cameo Road

City Carpinteria State CA Zip Code 93013

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

Name of Employer Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 275.00

Date of Receipt 09 / 14 / 2009  
**Transaction ID:** SA11AI.39377  
 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 25 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Judith Stapelmann  
Mailing Address 4161 Cresta Street  
City Santa Barbara State CA Zip Code 93110  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Retired  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00  
Date of Receipt 09 / 15 / 2009  
Transaction ID: SA11AI.39332  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra Stuart  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Government Affairs  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00  
Date of Receipt 08 / 04 / 2009  
Transaction ID: SA11AI.39091  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Eric Tober  
Mailing Address 300 Independence Ave SE  
City Washington State DC Zip Code 20003  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation Vice President  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00  
Date of Receipt 09 / 22 / 2009  
Transaction ID: SA11AI.39285  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00  
**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 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Jane Tolmach

Mailing Address 656 Douglas Avenue

City Oxnard State CA Zip Code 93030

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

Name of Employer Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt 07 / 07 / 2009  
**Transaction ID: SA11AI.39034**  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 656 Douglas Avenue

City Oxnard State CA Zip Code 93030

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

Name of Employer Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 600.00

Date of Receipt 07 / 28 / 2009  
**Transaction ID: SA11AI.39039**  
 Amount of Each Receipt this Period 250.00

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

Mailing Address 656 Douglas Avenue

City Oxnard State CA Zip Code 93030

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

Name of Employer Occupation Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt 09 / 30 / 2009  
**Transaction ID: SA11AI.39324**  
 Amount of Each Receipt this Period 100.00

**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 27 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Susan Trescher

Mailing Address 1 Mesa Lane

City State Zip Code  
Santa Barbara CA 93109

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

Name of Employer Occupation  
retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 16 / 2009

**Transaction ID:** SA11AI.39333

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Sandra Tripp-Jones

Mailing Address 1061 Garcia Road

City State Zip Code  
Santa Barbara CA 93103

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

Name of Employer Occupation  
Sentient Systems, Inc. consultant

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2009

**Transaction ID:** SA11AI.39257

Amount of Each Receipt this Period  
300.00

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

Mailing Address 588 Freehaven Dr

City State Zip Code  
Santa Barbara CA 93108

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 27 / 2009

**Transaction ID:** SA11AI.39254

Amount of Each Receipt this Period  
1000.00

**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 28 / 68  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Corinne Underwood

Mailing Address 1553 Oramas Road

City State Zip Code  
Santa Barbara CA 93103

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

Name of Employer 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	9	/	1	4	/	2	0	0	9

Transaction ID: SA11AI.39395

Amount of Each Receipt this Period  
250.00

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
Dr. Thomas Van Meter

Mailing Address 1010 Monte Drive

City State Zip Code  
Santa Barbara CA 93110

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

Name of Employer Occupation  
Self-Employed Physician

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	9

Transaction ID: SA11AI.39346

Amount of Each Receipt this Period  
1000.00

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
Sally Warner-Arnett

Mailing Address 2250 Santiago Road

City State Zip Code  
Santa Barbara CA 93103

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

Name of Employer Occupation  
retired retired

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

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

Transaction ID: SA11AI.39163

Amount of Each Receipt this Period  
100.00

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1350.00**

**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 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

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

Mailing Address 6774 Surreywood Lane

City State Zip Code  
Bethesda MD 20817

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

Name of Employer Occupation  
President Wheat Government Relations

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 04 / 2009

**Transaction ID:** SA11AI.39096

Amount of Each Receipt this Period  
500.00

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

Mailing Address P.O. Box 6045

City State Zip Code  
Oxnard CA 93031

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

Name of Employer Occupation  
Plaza Development Partners Partner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 08 / 2009

**Transaction ID:** SA11AI.39056

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1624 Las Canoas Road

City State Zip Code  
Santa Barbara CA 93105

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

Name of Employer Occupation  
Retired 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 Y  
 09 / 28 / 2009

**Transaction ID:** SA11AI.39259

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: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 30 / 68
	(check only one) <input checked="" 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)  
Friends of Lois Capps

**A.**

Full Name (Last, First, Middle Initial) Marianne Williamson		Date of Receipt MM / DD / YYYY 09 / 30 / 2009
Mailing Address P.O. Box 2428		<b>Transaction ID:</b> SA11AI.39329
City Nipomo	State CA	Zip Code 93444
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Self-employed	Occupation Writer/Author	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

**B.**

Full Name (Last, First, Middle Initial) Raul Zavala		Date of Receipt MM / DD / YYYY 09 / 16 / 2009
Mailing Address 1435 South F Street		<b>Transaction ID:</b> SA11AI.39218
City Oxnard	State CA	Zip Code 93033
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 250.00	
Name of Employer Pacific Maritime Assn.	Occupation Longshoreman	
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) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	36700.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address 1932 WYNNTON ROAD

City State Zip Code  
COLUMBUS GA 31999

FEC ID number of contributing federal political committee. **C** C00034157

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.39126

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE

Mailing Address 2021 Massachusetts Ave. NW

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00411553

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.39130

Amount of Each Receipt this Period  
1500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF BIOANALYSTS POLITICAL ACTION COMMITTEE (AAB\*PAC)

Mailing Address 906 OLIVE SUITE 1200

City State Zip Code  
SAINT LOUIS MO 63101

FEC ID number of contributing federal political committee. **C** C00249581

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 1 / 2 0 0 9

**Transaction ID:** SA11C.39015

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4000.00**

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

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

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

FOR LINE NUMBER: PAGE 32 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF NEUROLOGICAL SURGEONS POLITICAL ACTION COMMITTEE (NEUROLOGICAL SURGEONS)  
 Mailing Address 725 Fifteenth St. NW Suite 500  
 City Washington State DC Zip Code 20005  
 Date of Receipt M M / D D / Y Y Y Y Y  
 07 / 20 / 2009  
 Transaction ID: SA11C.39005  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. C C00413955  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE  
 Mailing Address 9700 West Bryn Mawr Ave.  
 City Rosemont State IL Zip Code 60018  
 Date of Receipt M M / D D / Y Y Y Y Y  
 09 / 23 / 2009  
 Transaction ID: SA11C.39123  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C C00005660  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 5000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN ASSOCIATION OF ORAL AND MAXILLOFACIAL SURGEONS POLITICAL ACTION COMMITTEE  
 Mailing Address 9700 West Bryn Mawr Ave.  
 City Rosemont State IL Zip Code 60018  
 Date of Receipt M M / D D / Y Y Y Y Y  
 09 / 23 / 2009  
 Transaction ID: SA11C.39124  
 Amount of Each Receipt this Period 5000.00  
 FEC ID number of contributing federal political committee. C C00005660  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 10000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00  
**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 33 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION  
 Mailing Address 1120 Connecticut Avenue NW  
 City State Zip Code  
 Washington DC 20036  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 08 / 2009  
**Transaction ID:** SA11C.38986  
 Amount of Each Receipt this Period  
 2500.00  
 FEC ID number of contributing federal political committee. **C** C00004275  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
 3500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN BANKERS ASSOCIATION  
 Mailing Address 1120 Connecticut Avenue NW  
 City State Zip Code  
 Washington DC 20036  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 23 / 2009  
**Transaction ID:** SA11C.39119  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00004275  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
 4500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN CHIROPRACTIC ASSOCIATION PAC  
 Mailing Address 1701 Clarendon Blvd  
 City State Zip Code  
 Arlington VA 22209  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 04 / 2009  
**Transaction ID:** SA11C.38996  
 Amount of Each Receipt this Period  
 1000.00  
 FEC ID number of contributing federal political committee. **C** C00102764  
 Name of Employer Occupation  
 Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Election Cycle-to-Date ▼  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4500.00**  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN CLINICAL LABORATORY ASSOCIATION PAC (ACLA PAC)

Mailing Address 1100 New York Avenue, NW  
Suite 725 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00410084

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt MM / DD / YYYY  
07 / 21 / 2009

Transaction ID: SA11C.39009

Amount of Each Receipt this Period 1500.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN COLLEGE OF RADIOLOGY ASSOCIATION

Mailing Address 1891 Preston White Drive

City Reston State VA Zip Code 20191

FEC ID number of contributing federal political committee. **C** C00343459

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt MM / DD / YYYY  
08 / 04 / 2009

Transaction ID: SA11C.38999

Amount of Each Receipt this Period 1500.00

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

Mailing Address 1111-14th Street NW Suite 100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt MM / DD / YYYY  
08 / 04 / 2009

Transaction ID: SA11C.39000

Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4000.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN DENTAL PAC

Mailing Address 1111-14th Street NW Suite 100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 25 / 2009  
**Transaction ID:** SA11C.39447  
 Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN FEDERATION OF STATE COUNTY MUNICIPAL EMPL

Mailing Address 1625 L Street N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00011114

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 09 / 29 / 2009  
**Transaction ID:** SA11C.39295  
 Amount of Each Receipt this Period: 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1201 L Street NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00006080

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt: 08 / 17 / 2009  
**Transaction ID:** SA11C.39100  
 Amount of Each Receipt this Period: 2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 4500.00

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s)  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN MEDICAL GROUP ASSOCIATION PAC

Mailing Address 3901 Hoyt Avenue

City State Zip Code  
Everett WA 98290

FEC ID number of contributing federal political committee. **C** C00408120

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 4 / 2 0 0 9

**Transaction ID:** SA11C.39021

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN NURSES ASSOCIATION PAC

Mailing Address 8515 Georgia Avenue  
Suite 400

City State Zip Code  
Silver Spring MD 20910

FEC ID number of contributing federal political committee. **C** C00017525

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 3 0 / 2 0 0 9

**Transaction ID:** SA11C.38981

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN OCCUPATIONAL THERAPY ASSOCIATION, INC. POLITICAL ACTION COMMITTEE (ACTPAC)

Mailing Address 4720 Montgomery Lane  
PO Box 31220

City State Zip Code  
Bethesda MD 20824

FEC ID number of contributing federal political committee. **C** C00089086

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 4 / 2 0 0 9

**Transaction ID:** SA11C.39002

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

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

**SCHEDULE A (FEC Form 3 )  
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(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
AMERICAN OPTOMETRIC ASSOCIATION PAC  
 Mailing Address 1505 Prince St. Ste. 300  
 City State Zip Code  
 Alexandria VA 22314  
 FEC ID number of contributing federal political committee. **C** C00024968  
 Name of Employer Occupation  
 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  
 09 30 2009  
**Transaction ID:** SA11C.39440  
 Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY FOR CLINICAL LABORATORY SCIENCE POLITICAL ACTION COMMITTEE (FKA DEMTOPP)  
 Mailing Address 6701 DEMOCRACY BLVD SUITE 300  
 City State Zip Code  
 BETHESDA MD 20817  
 FEC ID number of contributing federal political committee. **C** C00034645  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1500.00  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 21 2009  
**Transaction ID:** SA11C.39013  
 Amount of Each Receipt this Period  
 1500.00

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN SOCIETY FOR THERAPEUTIC RADIOLOGY AND ONCOLOGY INC PAC AKA ASTRO PAC  
 Mailing Address 12500 FAIR LAKES CIRCLE SUITE 375  
 City State Zip Code  
 FAIRFAX VA 22033  
 FEC ID number of contributing federal political committee. **C** C00384602  
 Name of Employer Occupation  
 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  
 08 04 2009  
**Transaction ID:** SA11C.38998  
 Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**  
**TOTAL** This Period (last page this line number only) ..... ►

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

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 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
BLUE SHIELD OF CALIFORNIA POLITICAL ACTION COMMITTEE

Mailing Address 50 Beale Street  
18-105

City State Zip Code  
SAN FRANCISCO CA 94105

FEC ID number of contributing federal political committee. **C** C00340364

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 28 / 2009

**Transaction ID:** SA11C.38990

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
BRYAN CAVE LLP POLITICAL ACTION COMMITTEE

Mailing Address 1155 F Street NW  
Suite 700

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00332643

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 04 / 2009

**Transaction ID:** SA11C.39023

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
CA ASSOCIATION OF PHYSICIAN GROUPS FEDERAL POLITICAL ACTION COMMITTEE (CAPG FEDERAL)

Mailing Address 915 WILSHIRE BLVD SUITE 1620

City State Zip Code  
LOS ANGELES CA 90017

FEC ID number of contributing federal political committee. **C** C00461756

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 17 / 2009

**Transaction ID:** SA11C.39098

Amount of Each Receipt this Period  
 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3000.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
CLINICAL LABORATORY MANAGEMENT ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 989 OLD EAGLE SCHOOL ROAD  
SUITE 815

City State Zip Code  
WAYNE PA 19087

FEC ID number of contributing federal political committee. **C** C00381152

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 21 / 2009

**Transaction ID:** SA11C.39011

Amount of Each Receipt this Period  
1500.00

**B.** Full Name (Last, First, Middle Initial)  
COMCAST CORP. POLITICAL ACTION COMMITTEE- FEDERAL

Mailing Address 1701 JFK Boulevard, 49th Floor  
35th Floor

City State Zip Code  
Philadelphia PA 19103

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 29 / 2009

**Transaction ID:** SA11C.39444

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
CVS/CAREMARK CORPORATION EMPLOYEES PAC

Mailing Address 1300 Eye Street, NW  
Suitw 525W

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00384818

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 11 / 2009

**Transaction ID:** SA11C.38994

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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FOR LINE NUMBER: PAGE 40 / 68  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
DRINKER BIDDLE POLITICAL ACTION COMMITTEE

Mailing Address 1500 K Street NW  
Suite 1100

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00370759

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 4 / 2 0 0 9

**Transaction ID:** SA11C.39019

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BUD CRAMER

Mailing Address P.O. Box 2621

City Huntsville State AL Zip Code 35804

FEC ID number of contributing federal political committee. **C** C00239038

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.39454

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
GENWORTH FINANCIAL INC POLITICAL ACTION COMMITTEE

Mailing Address 6620 W. Broad Street

City Richmond State VA Zip Code 23230

FEC ID number of contributing federal political committee. **C** C00404194

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

**Transaction ID:** SA11C.39299

Amount of Each Receipt this Period  
1000.00

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

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL ASSOCIATION OF FIRE FIGHTERS

Mailing Address 1750 NEW YORK NW

City State Zip Code  
WASHINGTON DC 20006

FEC ID number of contributing federal political committee. **C** C70003108

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

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

**Transaction ID:** SA11C.39441

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS

Mailing Address 900 Seventh St. N.W.

City State Zip Code  
Washington DC 20001

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 2 / 2 0 0 9

**Transaction ID:** SA11C.38984

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
LABORATORY CORPORATION OF AMERICA HOLDINGS POLITICAL PARTICIPATION COMMITTEE

Mailing Address 231 MAPLE AVENUE

City State Zip Code  
BURLINGTON NC 27215

FEC ID number of contributing federal political committee. **C** C00314997

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 2 1 / 2 0 0 9

**Transaction ID:** SA11C.39017

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3500.00**

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
LABORERS' POLITICAL LEAGUE-LABORERS' INTERNATIONAL UNION OF N.A.  
 Mailing Address 905 16th St. N.W.  
Second Floor  
 City Washington State DC Zip Code 20006  
 Date of Receipt 07 / 20 / 2009  
**Transaction ID:** SA11C.39007  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00007922  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 1000.00

**B.** Full Name (Last, First, Middle Initial)  
MEDTRONIC INC. MEDICAL TECHNOLOGY FUND  
 Mailing Address 950 F Street NW Suite 500  
 City Washington State DC Zip Code 20004  
 Date of Receipt 08 / 11 / 2009  
**Transaction ID:** SA11C.38992  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00311878  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 4000.00

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)  
 Mailing Address 1771 N Street NW  
 City Washington State DC Zip Code 20036  
 Date of Receipt 09 / 23 / 2009  
**Transaction ID:** SA11C.39128  
 Amount of Each Receipt this Period 1000.00  
 FEC ID number of contributing federal political committee. **C** C00009985  
 Name of Employer Occupation  
 Receipt For: 2010 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 Executive Circle

City Irving State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C** C00140061

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 0 9

**Transaction ID:** SA11C.39445

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
OCEAN CHAMPIONS POLITICAL ACTION COMMITTEE

Mailing Address 202 SAN JOSE AVENUE

City CAPITOLA State CA Zip Code 95010

FEC ID number of contributing federal political committee. **C** C00393769

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 3 0 / 2 0 0 9

**Transaction ID:** SA11C.39297

Amount of Each Receipt this Period  
 500.00

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

Mailing Address 1111 North Fairfax Street

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00012880

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 4 / 2 0 0 9

**Transaction ID:** SA11C.38985

Amount of Each Receipt this Period  
 1000.00

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

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

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

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
PHYSICIAN HOSPITALS OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 2600 S. Minnesota  
Suite 202

City State Zip Code  
Sioux Falls SD 57105

FEC ID number of contributing federal political committee. **C** C00394163

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	0	3	/	2	0	0	9

**Transaction ID:** SA11C.38983

Amount of Each Receipt this Period  

1000.00
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**B.** Full Name (Last, First, Middle Initial)  
QUEST DIAGNOSTICS INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address 815 Connecticut Avenue, NW  
Suite 330

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00329185

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	9

**Transaction ID:** SA11C.38988

Amount of Each Receipt this Period  

1000.00
---------

**C.** Full Name (Last, First, Middle Initial)  
RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 Wilson Boulevard  
Suite 1500

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00097568

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	3	/	2	0	0	9

**Transaction ID:** SA11C.39134

Amount of Each Receipt this Period  

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

3000.00
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**TOTAL** This Period (last page this line number only) ..... ► 

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**SCHEDULE A (FEC Form 3 )  
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 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
SKIN PAC

Mailing Address 1350 I Street, NW Ste. 880

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 28 / 2009  
**Transaction ID:** SA11C.39301  
 Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
TEXTRON INC. POLITICAL ACTION COMMITTEE

Mailing Address 40 WESTMINSTER STREET

City PROVIDENCE State RI Zip Code 02903

FEC ID number of contributing federal political committee. **C** C00123612

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 09 / 30 / 2009  
**Transaction ID:** SA11C.39452  
 Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
THRIVENT FINANCIAL FOR LUTHERANS - EMPLOYEE POLITICAL ACTION COMMITTEE

Mailing Address Post Office Box 1892

City Appleton State WI Zip Code 54912

FEC ID number of contributing federal political committee. **C** C00121319

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 09 / 23 / 2009  
**Transaction ID:** SA11C.39121  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3000.00

**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 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Mailing Address 8000 EAST JEFFERSON

City State Zip Code  
DETROIT MI 48214

FEC ID number of contributing federal political committee. **C** C00002840

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 6 / 2 0 0 9

**Transaction ID:** SA11C.39118

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
US ONCOLOGY GOOD GOVNT COMMITTEE

Mailing Address 16825 Northchase Dr. Suite 1300

City State Zip Code  
Houston TX 77060

FEC ID number of contributing federal political committee. **C** C00339655

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 6000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 0 4 / 2 0 0 9

**Transaction ID:** SA11C.39003

Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
VISION COUNCIL OF AMERICA POLITICAL ACTION COMMITTEE

Mailing Address 1700 Diagonal Road  
Suite 500

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C** C00372441

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 3 / 2 0 0 9

**Transaction ID:** SA11C.39331

Amount of Each Receipt this Period  
500.00

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

**TOTAL** This Period (last page this line number only) ..... ► 61000.00

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

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

FOR LINE NUMBER: PAGE 47 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1635.09

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2009

**Transaction ID:** SA15.38966

Amount of Each Receipt this Period  
175.99

interest

**B.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1645.30

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 / 31 / 2009

**Transaction ID:** SA15.38967

Amount of Each Receipt this Period  
10.21

interest

**C.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1822.34

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 / 31 / 2009

**Transaction ID:** SA15.38964

Amount of Each Receipt this Period  
177.04

interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► **363.24**

**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 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1829.12

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	3	1	/	2	0	0	9

**Transaction ID:** SA15.38965

Amount of Each Receipt this Period  
6.78

interest

**B.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2001.17

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** SA15.39460

Amount of Each Receipt this Period  
172.05

interest

**C.** Full Name (Last, First, Middle Initial)  
Santa Barbara Bank and Trust

Mailing Address 20 E. Carrillo Street

City State Zip Code  
Santa Barbara CA 93101

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2007.60

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	9

**Transaction ID:** SA15.39461

Amount of Each Receipt this Period  
6.43

interest

**SUBTOTAL** of Receipts This Page (optional) ..... ► **185.26**

**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 / 68  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

**A.** Full Name (Last, First, Middle Initial)  
Jennifer Severance

Mailing Address 1718 N. Harrison

City State Zip Code  
Boise ID 83702

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 2 3 / 2 0 0 9

**Transaction ID:** SA15.38968

Amount of Each Receipt this Period  
400.00

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

Mailing Address 1718 N. Harrison

City State Zip Code  
Boise ID 83702

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

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 1 8 / 2 0 0 9

**Transaction ID:** SA15.38974

Amount of Each Receipt this Period  
400.00

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

**TOTAL** This Period (last page this line number only) ..... ► **1348.50**

# 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)  
Friends of Lois Capps

<p><b>A.</b> Full Name (Last, First, Middle Initial) American Direct Mail</p> <p>Mailing Address 908 N. Hollywood Way</p> <p>City Burbank State CA Zip Code 91505</p> <p>Purpose of Disbursement mailing expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38944</p> <p>Date of Disbursement MM / DD / YYYY 09 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 3254.76</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Avenet Solutions</p> <p>Mailing Address 400 Sibley Street #560</p> <p>City St. Paul State MN Zip Code 55101</p> <p>Purpose of Disbursement internet services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38939</p> <p>Date of Disbursement MM / DD / YYYY 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 95.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Avenet Solutions</p> <p>Mailing Address 400 Sibley Street #560</p> <p>City St. Paul State MN Zip Code 55101</p> <p>Purpose of Disbursement internet services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38960</p> <p>Date of Disbursement MM / DD / YYYY 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 225.00</p>

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

3574.76

**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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Lois Capps Mailing Address 1724 Santa Barbara St. City Santa Barbara State CA Zip Code 93101 Purpose of Disbursement travel reimbursement 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: SB17.38920 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 33.95
B.	Full Name (Last, First, Middle Initial) Lois Capps Mailing Address 1724 Santa Barbara St. City Santa Barbara State CA Zip Code 93101 Purpose of Disbursement travel reimbursement 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: SB17.38921 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 8.00
C.	Full Name (Last, First, Middle Initial) Jennifer Cooper Mailing Address 222 W Anapamu #1 City Santa Barbara State CA Zip Code 93101 Purpose of Disbursement reimbursements 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: SB17.38904 Date of Disbursement 07 / 01 / 2009 Amount of Each Disbursement this Period 399.66

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

**441.61**

**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)  
Friends of Lois Capps

<b>A.</b> Full Name (Last, First, Middle Initial) Constant Contact <hr/> Mailing Address 1601 Trapelo Road #329 <hr/> City Waltham State MA Zip Code 02451 <hr/> Purpose of Disbursement internet services Candidate Name <hr/> 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: SB17.38904.0 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 306.00
	[MEMO ITEM]
	Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) US Postmaster <hr/> Mailing Address 800 Anacapa Street <hr/> City Santa Barbara State CA Zip Code 93101 <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: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.38904.1 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 88.00
	[MEMO ITEM]
	Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Kinkos <hr/> Mailing Address PO Box 530257 <hr/> City Atlanta State GA Zip Code 30353 <hr/> Purpose of Disbursement copies Candidate Name <hr/> 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: SB17.38904.2 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5.66
	[MEMO ITEM]
	Category/Type

<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)

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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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Jennifer Cooper  Mailing Address 222 W Anapamu #1  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement management consulting 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: SB17.38910 Date of Disbursement 07 / 01 / 2009  Amount of Each Disbursement this Period 5500.00
B.	Full Name (Last, First, Middle Initial) Jennifer Cooper  Mailing Address 222 W Anapamu #1  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement management consulting 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: SB17.38922 Date of Disbursement 08 / 01 / 2009  Amount of Each Disbursement this Period 5500.00
C.	Full Name (Last, First, Middle Initial) Jennifer Cooper  Mailing Address 222 W Anapamu #1  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement reimbursements 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: SB17.38926 Date of Disbursement 08 / 21 / 2009  Amount of Each Disbursement this Period 943.63

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

11943.63

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Kinkos  Mailing Address PO Box 530257  City Atlanta State GA Zip Code 30353  Purpose of Disbursement copies 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: SB17.38926.0 Date of Disbursement 08 / 21 / 2009  Amount of Each Disbursement this Period 1.41  [MEMO ITEM]
<b>B.</b>	Full Name (Last, First, Middle Initial) Boone Printing  Mailing Address 70 S. Kellogg Ave  City Goleta State CA Zip Code 93117  Purpose of Disbursement printing expenses 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: SB17.38926.1 Date of Disbursement 08 / 21 / 2009  Amount of Each Disbursement this Period 722.22  [MEMO ITEM]
<b>C.</b>	Full Name (Last, First, Middle Initial) US Postmaster  Mailing Address 800 Anacapa Street  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement postage 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: SB17.38926.2 Date of Disbursement 08 / 21 / 2009  Amount of Each Disbursement this Period 220.00  [MEMO ITEM]

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

0.00

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

# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 55 / 68

<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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Jennifer Cooper  Mailing Address 222 W Anapamu #1  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement reimbursements 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: SB17.38940 Date of Disbursement 09 / 01 / 2009  Amount of Each Disbursement this Period 52.19  Category/Type
B.	Full Name (Last, First, Middle Initial) Kinkos  Mailing Address PO Box 530257  City Atlanta State GA Zip Code 30353  Purpose of Disbursement copies and event expense 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: SB17.38940.0 Date of Disbursement 09 / 01 / 2009  Amount of Each Disbursement this Period 46.98  [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Staples  Mailing Address PO Box 9020  City Des Moines State IA Zip Code 50368  Purpose of Disbursement event supplies 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: SB17.38940.1 Date of Disbursement 09 / 01 / 2009  Amount of Each Disbursement this Period 5.21  [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	52.19
<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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Jennifer Cooper  Mailing Address 222 W Anapamu #1  City Santa Barbara State CA Zip Code 93101  Purpose of Disbursement management consulting 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: SB17.38943 Date of Disbursement 09 / 01 / 2009  Amount of Each Disbursement this Period 5500.00
B.	Full Name (Last, First, Middle Initial) Erickson and Company  Mailing Address 38 Ivy Street SE  City Washington State DC Zip Code 20003  Purpose of Disbursement fundraising consulting 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: SB17.38902 Date of Disbursement 07 / 01 / 2009  Amount of Each Disbursement this Period 3927.29
C.	Full Name (Last, First, Middle Initial) Erickson and Company  Mailing Address 38 Ivy Street SE  City Washington State DC Zip Code 20003  Purpose of Disbursement fundraising consulting 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: SB17.38911 Date of Disbursement 07 / 27 / 2009  Amount of Each Disbursement this Period 4218.27

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

13645.56

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)

<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)  
Friends of Lois Capps

<b>A.</b>	Full Name (Last, First, Middle Initial) Erickson and Company  Mailing Address 38 Ivy Street SE  City Washington State DC Zip Code 20003  Purpose of Disbursement fundraising consulting 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: SB17.38933 Date of Disbursement 08 / 31 / 2009  Amount of Each Disbursement this Period 3991.92
<b>B.</b>	Full Name (Last, First, Middle Initial) McGowan Gunterman  Mailing Address 509 E. Montecito St. 2nd Floor  City Santa Barbara State CA Zip Code 93103  Purpose of Disbursement accounting 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: SB17.38945 Date of Disbursement 09 / 10 / 2009  Amount of Each Disbursement this Period 405.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Precision Printing  Mailing Address 14544 Keswick Street  City Van Nuys State CA Zip Code 91405  Purpose of Disbursement printing expenses 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: SB17.38959 Date of Disbursement 09 / 28 / 2009  Amount of Each Disbursement this Period 4357.08

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

8754.00

**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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Public Storage Mailing Address 5425 Overpass Road City Goleta State CA Zip Code 93111 Purpose of Disbursement storage 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: SB17.38915 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 2220.15 Category/Type
B.	Full Name (Last, First, Middle Initial) Santa Barbara Bank and Trust Mailing Address 20 E. Carrillo Street City Santa Barbara State CA Zip Code 93101 Purpose of Disbursement credit card fee 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: SB17.38963 Date of Disbursement 07 / 03 / 2009 Amount of Each Disbursement this Period 15.00 Category/Type
C.	Full Name (Last, First, Middle Initial) Santa Barbara Bank and Trust Mailing Address 20 E. Carrillo Street City Santa Barbara State CA Zip Code 93101 Purpose of Disbursement credit card fee 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: SB17.38962 Date of Disbursement 08 / 03 / 2009 Amount of Each Disbursement this Period 18.48 Category/Type

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

2253.63

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



# SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)  
Friends of Lois Capps

A.

Full Name (Last, First, Middle Initial)  
UPS

Transaction ID: SB17.38916  
Date of Disbursement

Mailing Address PO Box 505820

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	9	

City State Zip Code  
The Lakes NV 88905

Amount of Each Disbursement this Period

24.49
-------

Purpose of Disbursement  
mailing expenses

--

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
UPS

Transaction ID: SB17.38931  
Date of Disbursement

Mailing Address PO Box 505820

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	1		2	0	9	

City State Zip Code  
The Lakes NV 88905

Amount of Each Disbursement this Period

49.72
-------

Purpose of Disbursement  
mailing expenses

--

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
UPS

Transaction ID: SB17.38937  
Date of Disbursement

Mailing Address PO Box 505820

M	M	/	D	D	/	Y	Y	Y	Y
0	8		3	1		2	0	9	

City State Zip Code  
The Lakes NV 88905

Amount of Each Disbursement this Period

51.21
-------

Purpose of Disbursement  
mailing expenses

--

Candidate Name

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

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

125.42
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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)  
Friends of Lois Capps

A.

Full Name (Last, First, Middle Initial)  
Verizon CA

Transaction ID: SB17.38901  
Date of Disbursement

Mailing Address PO Box 30001

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	0	9

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement  
utilities

39.08
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Verizon CA

Transaction ID: SB17.38917  
Date of Disbursement

Mailing Address PO Box 30001

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	9

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement  
utilities

39.24
-------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Verizon CA

Transaction ID: SB17.38918  
Date of Disbursement

Mailing Address PO Box 30001

M	M	/	D	D	/	Y	Y	Y	Y
0	7		2	7		2	0	0	9

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement  
utilities

108.55
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: District:

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

186.87
--------

**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)  
Friends of Lois Capps

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon CA</p> <p>Mailing Address PO Box 30001</p> <p>City Inglewood State CA Zip Code 90313</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38935</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 110.29</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon CA</p> <p>Mailing Address PO Box 30001</p> <p>City Inglewood State CA Zip Code 90313</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38936</p> <p>Date of Disbursement 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 39.24</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Verizon CA</p> <p>Mailing Address PO Box 30001</p> <p>City Inglewood State CA Zip Code 90313</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38961</p> <p>Date of Disbursement 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 109.44</p>

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

258.97

**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)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 4001 City Inglewood State CA Zip Code 90313 Purpose of Disbursement utilities 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: SB17.38899 Date of Disbursement 07 / 01 / 2009 Amount of Each Disbursement this Period 98.57
B.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 4001 City Inglewood State CA Zip Code 90313 Purpose of Disbursement utilities 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: SB17.38923 Date of Disbursement 07 / 27 / 2009 Amount of Each Disbursement this Period 91.57
C.	Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 4001 City Inglewood State CA Zip Code 90313 Purpose of Disbursement utilities 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: SB17.38934 Date of Disbursement 08 / 31 / 2009 Amount of Each Disbursement this Period 92.63

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

282.77

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)  
Friends of Lois Capps

<p><b>A.</b> Full Name (Last, First, Middle Initial) Victor the Florist</p> <p>Mailing Address 135 E Anapamu Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38900</p> <p>Date of Disbursement MM / DD / YYYY 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 98.85</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Victor the Florist</p> <p>Mailing Address 135 E Anapamu Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38938</p> <p>Date of Disbursement MM / DD / YYYY 08 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 186.83</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Victor the Florist</p> <p>Mailing Address 135 E Anapamu Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement flowers</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB17.38958</p> <p>Date of Disbursement MM / DD / YYYY 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 370.56</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>656.24</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>42269.15</b>







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

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 68

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

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NAME OF COMMITTEE (In Full)  
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) MARTIN HEINRICH	Transaction ID: SB21.38948 Date of Disbursement 09 / 28 / 2009
	Mailing Address 2118 CENTRAL AVENUE SE #71	Amount of Each Disbursement this Period 1000.00
	City ALBUQUERQUE State NM Zip Code 87106	
	Purpose of Disbursement contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SCHAUER FOR CONGRESS	Transaction ID: SB21.38951 Date of Disbursement 09 / 28 / 2009
	Mailing Address PO BOX 100	Amount of Each Disbursement this Period 1000.00
	City BATTLE CREEK State MI Zip Code 49016	
	Purpose of Disbursement contribution Candidate Name	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Disbursement For: 2010 <input checked="" 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) .....

33273.00

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

(Use separate schedule(s) for each numbered line)	PAGE 68 / 68
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of Lois Capps

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> Jennifer Severance	Nature of Debt (Purpose): Restitution for Unauth. Expenditures					
Mailing Address 1718 N. Harrison						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">ZIP Code</td> </tr> <tr> <td>Boise</td> <td>ID</td> <td>83702</td> </tr> </table>		City	State	ZIP Code	Boise	ID
City	State	ZIP Code				
Boise	ID	83702				

Outstanding Balance Beginning This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">124300.00</div>	<b>Transaction ID: SD9.22725</b>
Amount Incurred This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	Payment This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">800.00</div>
Outstanding Balance at Close of This Period <div style="border: 1px solid black; padding: 2px; text-align: center;">123500.00</div>	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	<div style="border: 1px solid black; padding: 2px;">123500.00</div>
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	<div style="border: 1px solid black; padding: 2px;">123500.00</div>
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	<div style="border: 1px solid black; padding: 2px;">0.00</div>
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	<div style="border: 1px solid black; padding: 2px;">123500.00</div>