

**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
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. **IS THIS REPORT** **NEW (N)** OR **AMENDED (A)**
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 10 01 2009 through 12 31 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 01 30 2010

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

Office Use Only											FEC FORM 3 (Revised 02/2003)
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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
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	69700.00	417317.71
(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)).....	69700.00	417267.71
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	48610.92	239812.06
(b) Total Offsets to Operating Expenditures (from Line 14).....	124.72	3998.56
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	48486.20	235813.50
8. Cash on Hand at Close of Reporting Period (from Line 27).....	462263.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	122875.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name
Friends of Lois Capps

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

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	26255.00	157515.71
(i) Itemized (use Schedule A).....	14195.00	51302.00
(ii) Unitemized.....	40450.00	208817.71
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	29250.00	208500.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	69700.00	417317.71
(e) TOTAL CONTRIBUTIONS (other than loans) (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.).....	124.72	3998.56
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1202.24	5209.84
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	71026.96	426526.11

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	48610.92	239812.06
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.....	33413.00	144506.61
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	82023.92	384368.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	473259.98
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	71026.96
25. SUBTOTAL (add Line 23 and Line 24).....	544286.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	82023.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	462263.02

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 / 59
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
Friends of Lois Capps

A. Full Name (Last, First, Middle Initial)
Vicki Allen

Mailing Address 701 E. Victoria

City State Zip Code
Santa Barbara CA 93103

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

Name of Employer Self Occupation
Self Attorney

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.39739

Amount of Each Receipt this Period
300.00

525.00

B. Full Name (Last, First, Middle Initial)
Christina Allison

Mailing Address 1385 School House Rd

City State Zip Code
Montecito CA 93108-1236

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

Name of Employer Self Occupation
Self Singer/Actress

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

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.39883

Amount of Each Receipt this Period
100.00

250.00

C. Full Name (Last, First, Middle Initial)
Allyn Arnold

Mailing Address 777 North Ocean Avenue

City State Zip Code
Cayucos CA 93430

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

Transaction ID: SA11AI.39929

Amount of Each Receipt this Period
500.00

1100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	PAGE 6 / 59
	(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) Allyn Arnold		Date of Receipt
	Mailing Address 777 North Ocean Avenue		<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 1 2 / 0 6 / 2 0 0 9
	City	State	Zip Code
	Cayucos	CA	93430
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39950
Name of Employer		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/> 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"/> 2100.00	

B.	Full Name (Last, First, Middle Initial) John Ashbaugh		Date of Receipt
	Mailing Address 193 Los Cerros Drive		<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 1 0 / 3 1 / 2 0 0 9
	City	State	Zip Code
	San Luis Obispo	CA	93401
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39783
Name of Employer		Occupation	Amount of Each Receipt this Period
Allan Hancock College		Instructor	<input type="text"/> 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"/> 500.00	

C.	Full Name (Last, First, Middle Initial) Dr. Tanya Atwater		Date of Receipt
	Mailing Address 747 Knapp Drive		<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 1 2 / 0 8 / 2 0 0 9
	City	State	Zip Code
	Montecito	CA	93108
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39631
Name of Employer		Occupation	Amount of Each Receipt this Period
UCSB		Professor	<input type="text"/> 500.00
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1000.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL 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 / 59
(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)
Edward Bentley, M.D.
Mailing Address 2403 Castillo Street Ste 201

City State Zip Code
Santa Barbara CA 93105

FEC ID number of contributing federal political committee. C

Name of Employer Self-employed Occupation Physician

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

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

Transaction ID: SA11AI.39801

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Mary Jane Brinton
Mailing Address 2434 Broadway St.

City State Zip Code
San Francisco CA 94115

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) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.39774

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Roland Bryan
Mailing Address 745 Las Alturas Road

City State Zip Code
Santa Barbara CA 93103

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) ▼

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.39727

Amount of Each Receipt this Period
200.00

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: (check only one)	PAGE 8 / 59
	<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

A.	Full Name (Last, First, Middle Initial) Edith Clark		Date of Receipt
	Mailing Address 3211 Beach Club Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 0 5 / 2 0 0 9
	City	State	Zip Code
	Carpinteria	CA	93013
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.39896
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text"/>
		Retired	30.00
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text"/>	205.00

B.	Full Name (Last, First, Middle Initial) Andrew Davis		Date of Receipt
	Mailing Address 1437 Hillcrest Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 2 9 / 2 0 0 9
	City	State	Zip Code
	Santa Barbara	CA	93103
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.39682
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text"/>
Miramonte Communications		President	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"/>	2250.00

C.	Full Name (Last, First, Middle Initial) G.W. Elliott		Date of Receipt
	Mailing Address 1249 Camino Meleno		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 9 / 2 0 0 9
	City	State	Zip Code
	Santa Barbara	CA	93111
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.39863
	C <input type="text"/>		Amount of Each Receipt this Period
Name of Employer		Occupation	<input type="text"/>
self		psychologist	50.00
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼		<input type="text"/>	250.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/>	1080.00
TOTAL 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 9 / 59
(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)
Don Ernst

Mailing Address 5882 Salisbury Lane

City State Zip Code
San Luis Obispo CA 93401

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

Name of Employer Ernst & Mattison Occupation Attorney

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
 1 1 / 0 1 / 2 0 0 9

Transaction ID: SA11AI.39762

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Garold Faber

Mailing Address 10053 Halifax St

City State Zip Code
Ventura CA 93004

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

Name of Employer retired Occupation retired

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
 1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.39573

Amount of Each Receipt this Period
50.00

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

Mailing Address 1415 E. Mountain Drive

City State Zip Code
Santa Barbara CA 93108

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

Name of Employer G&R Corporation Occupation CEO

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
 1 2 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.39898

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► **1300.00**

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 10 / 59
	(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

A.	Full Name (Last, First, Middle Initial) Dr. Sidney Firstman		Date of Receipt
	Mailing Address 290 Cedar Ave		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 1 1 / 2 4 / 2 0 0 9
	City	State	Zip Code
	Highland Park	IL	60035
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Alion Science and Tech.		Occupation Senior VP Corp. Development	Transaction ID: SA11AI.39613
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 250.00	<input type="text"/> 250.00

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 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Los Osos	CA	93412-6477
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: SA11AI.39765
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 575.00	<input type="text"/> 75.00

C.	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 1 0 / 1 6 / 2 0 0 9
	City	State	Zip Code
	Los Osos	CA	93412-6477
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Retired		Occupation Retired	Transaction ID: SA11AI.39766
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 600.00	<input type="text"/> 25.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 350.00
TOTAL 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 / 59
(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)
Sharon Frederick

Mailing Address PO Box 6477

City State Zip Code
Los Osos CA 93412-6477

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

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

Transaction ID: SA11AI.39947

Amount of Each Receipt this Period
100.00

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

Mailing Address 1930 Mission Ridge Road

City State Zip Code
Santa Barbara CA 93103

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

Name of Employer Duke Corp Edu Occupation Professor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.39750

Amount of Each Receipt this Period
200.00

C. 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 McLerie-Gaynes, Inc. Occupation Actor

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
1 0 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.39712

Amount of Each Receipt this Period
500.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 59
(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
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.39670

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date ▼ 1500.00

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

Mailing Address 257 San Jacinto Drive

City State Zip Code
Los Osos CA 93402

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 Y
1 1 / 2 5 / 2 0 0 9

Transaction ID: SA11AI.39939

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date ▼ 250.00

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

Mailing Address P.O. Box 50310

City State Zip Code
Santa Barbara CA 93150

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

Name of Employer Occupation
self Investor

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

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

Transaction ID: SA11AI.39821

Amount of Each Receipt this Period
1500.00

Election Cycle-to-Date ▼ 4300.00

SUBTOTAL of Receipts This Page (optional) ► **2250.00**

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

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

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

FOR LINE NUMBER: PAGE 13 / 59
(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)
Marc Goldberg

Mailing Address 1380 Live Oak Road

City Paso Robles State CA Zip Code 93446

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

Name of Employer: Woodward Vineyard Occupation: Proprietors -owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 10 / 02 / 2009
Transaction ID: SA11AI.39759
Amount of Each Receipt this Period: 250.00

B.

Full Name (Last, First, Middle Initial)
Salvador Gonzalez

Mailing Address 2110 Bevra Ave.

City Oxnard State CA Zip Code 93036

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

Name of Employer: Retired Occupation: Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt: 11 / 26 / 2009
Transaction ID: SA11AI.39579
Amount of Each Receipt this Period: 100.00

C.

Full Name (Last, First, Middle Initial)
Anna Grotenhuis

Mailing Address 2125 Ten Acre Road

City Santa Barbara State CA Zip Code 93108

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

Name of Employer: Grotenhuis Investments, Inc. Occupation: Real Estate Investor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt: 12 / 28 / 2009
Transaction ID: SA11AI.39655
Amount of Each Receipt this Period: 500.00

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

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

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

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

FOR LINE NUMBER: PAGE 14 / 59
(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 Y
1 2 / 0 9 / 2 0 0 9

Transaction ID: SA11AI.39659

Amount of Each Receipt this Period
50.00

475.00

B. Full Name (Last, First, Middle Initial)
Mark Hamilton
Mailing Address 820 Coronel Street

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 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.39903

Amount of Each Receipt this Period
50.00

250.00

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

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

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

Transaction ID: SA11AI.39856

Amount of Each Receipt this Period
25.00

275.00

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 59
(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)
Larry Herron

Mailing Address 219 Indio Drive

City Pismo Beach State CA Zip Code 93449

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

Name of Employer retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt: 11 / 19 / 2009
Transaction ID: SA11AI.39924
Amount of Each Receipt this Period: 250.00

B. Full Name (Last, First, Middle Initial)
Anita Hirsh

Mailing Address 3300 Oakdell Road

City Studio City State CA Zip Code 91604

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

Name of Employer Mercantile Center Occupation Owner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt: 12 / 05 / 2009
Transaction ID: SA11AI.39661
Amount of Each Receipt this Period: 500.00

C. Full Name (Last, First, Middle Initial)
Laura Holtz

Mailing Address PO Box 7107

City Oxnard State CA Zip Code 93031

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

Name of Employer Retired Occupation retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 400.00

Date of Receipt: 10 / 12 / 2009
Transaction ID: SA11AI.39725
Amount of Each Receipt this Period: 100.00

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 59
	<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

A.	Full Name (Last, First, Middle Initial) Beverlye Hyman Fead	Date of Receipt MM / DD / YYYY 10 / 07 / 2009
	Mailing Address 2866 East Valley Rd	Transaction ID: SA11AI.39749
	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 self	Occupation artist	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) Charles Jefferson	Date of Receipt MM / DD / YYYY 11 / 24 / 2009
	Mailing Address 331 A Street NE	Transaction ID: SA11AI.39615
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer BGR Group	Occupation Vice President	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) Deloras Jones	Date of Receipt MM / DD / YYYY 11 / 02 / 2009
	Mailing Address 2 Sandstone Ct.	Transaction ID: SA11AI.39608
	City State Zip Code San Rafael CA 94903	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
Name of Employer CA Institute for Nursing	Occupation Exec. Director	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1050.00
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 17 / 59
(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)
Deloras Jones

Mailing Address 2 Sandstone Ct.

City San Rafael State CA Zip Code 94903

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

Name of Employer CA Institute for Nursing Occupation Exec. Director

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 12 / 02 / 2009
Transaction ID: SA11AI.39656
 Amount of Each Receipt this Period 50.00

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

Mailing Address 2920 Ventura Drive

City Santa Barbara State CA Zip Code 93105

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

Name of Employer self Occupation attorney

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 225.00

Date of Receipt 12 / 05 / 2009
Transaction ID: SA11AI.39899
 Amount of Each Receipt this Period 25.00

C. Full Name (Last, First, Middle Initial)
Frank Kelton

Mailing Address 1710 Condado Vista Court

City Arroyo Grande State CA Zip Code 93420

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

Name of Employer San Luis Ambulance Occupation President

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt 10 / 02 / 2009
Transaction ID: SA11AI.39764
 Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) ► **325.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 59
	<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

A.	Full Name (Last, First, Middle Initial) John A. Lewis		Date of Receipt
	Mailing Address 1522 Kronborg Drive		<input type="text" value="10"/> / <input type="text" value="07"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Solvang	CA	93463
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39717
Name of Employer		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text" value="75.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="305.00"/>	
<input type="checkbox"/> Other (specify) ▼			

B.	Full Name (Last, First, Middle Initial) Dr. Mark Lisagor		Date of Receipt
	Mailing Address 477 E. Calle Higuera		<input type="text" value="12"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Camarillo	CA	93010
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39645
Name of Employer self		Occupation	Amount of Each Receipt this Period
		Pediatric Dentist	<input type="text" value="50.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="300.00"/>	
<input type="checkbox"/> Other (specify) ▼			

C.	Full Name (Last, First, Middle Initial) Lillian Lovelace		Date of Receipt
	Mailing Address 780 El Bosque Road		<input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Montecito	CA	93108
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39688
Name of Employer		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text" value="1400.00"/>
Receipt For: 2010		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text" value="2400.00"/>	
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1525.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one) <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	PAGE 19 / 59
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NAME OF COMMITTEE (In Full)
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Raymond Mattison	Date of Receipt MM / DD / YYYY 11 / 04 / 2009
	Mailing Address 350 Clover Street	Transaction ID: SA11AI.39597
	City State Zip Code San Luis Obispo CA 93405	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Ernst & Mattison Occupation Attorney 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) Daniel Ovardia M.D	Date of Receipt MM / DD / YYYY 12 / 05 / 2009
	Mailing Address 857 Veronica Springs Road	Transaction ID: SA11AI.39894
	City State Zip Code Santa Barbara CA 93105	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self-employed Occupation Orthopaedic surgeon Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 700.00	

C.	Full Name (Last, First, Middle Initial) Pragna Jay Patel	Date of Receipt MM / DD / YYYY 10 / 30 / 2009
	Mailing Address 604 Henderson Suite 200	Transaction ID: SA11AI.39782
	City State Zip Code San Luis Obispo CA 93401	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Days Inn SLO Occupation Manager Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 694.25	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
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 / 59
(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)
James Patterson

Mailing Address 9312 N. Santa Margarita Road

City State Zip Code
Atascadero CA 93422

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

Name of Employer San Luis Obispo County Occupation Supervisor

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

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

Transaction ID: SA11AI.39559

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Lewis Pennington

Mailing Address 148 S. Ash St.

City State Zip Code
Ventura CA 93001

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

Name of Employer Amgen, Inc. Occupation Scientist

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
1 1 / 2 1 / 2 0 0 9

Transaction ID: SA11AI.39569

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Charles Plemons, Jr.

Mailing Address 146 The Bluffs Drive

City State Zip Code
Shell Beach CA 93449

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

Name of Employer CAR Occupation Automotive Safety Consultant

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 3 / 2 0 0 9

Transaction ID: SA11AI.39935

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 59
(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 Proctor
Mailing Address 465 Las Palmas Drive
City Santa Barbara State CA Zip Code 93110
FEC ID number of contributing federal political committee. **C**
Name of Employer Alta Orthopaedics Occupation physician
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 750.00
Date of Receipt 10 / 22 / 2009
Transaction ID: SA11AI.39734
Amount of Each Receipt this Period 600.00

B. Full Name (Last, First, Middle Initial)
Fia Richmond
Mailing Address 1726 Franceschi Road
City Santa Barbara State CA Zip Code 93103
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Occupation Foundation President
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 10 / 06 / 2009
Transaction ID: SA11AI.39713
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Victoria Riskin
Mailing Address 680 Randall Road
City Santa Barbara State CA Zip Code 93108
FEC ID number of contributing federal political committee. **C**
Name of Employer Self-employed Occupation Writer/producer
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1400.00
Date of Receipt 12 / 27 / 2009
Transaction ID: SA11AI.39703
Amount of Each Receipt this Period 1400.00

SUBTOTAL of Receipts This Page (optional) ► 2500.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 22 / 59
	(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

A.	Full Name (Last, First, Middle Initial) Shelly S. Ruston		Date of Receipt
	Mailing Address 225 East Valerio Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 3 0 / 2 0 0 9
	City	State	Zip Code
	Santa Barbara	CA	93101
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39891
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"/> 450.00

B.	Full Name (Last, First, Middle Initial) Maryan Schall		Date of Receipt
	Mailing Address 432 Ennisbrook Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 1 9 / 2 0 0 9
	City	State	Zip Code
	Santa Barbara	CA	93108
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39866
Name of Employer		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"/> 500.00

C.	Full Name (Last, First, Middle Initial) Anne Schowe		Date of Receipt
	Mailing Address 930 Monte Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 0 / 2 0 / 2 0 0 9
	City	State	Zip Code
	Santa Barbara	CA	93110
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.39757
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"/> 2400.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 2600.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 59
(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

A.

Full Name (Last, First, Middle Initial)
Anne Schowe

Mailing Address 930 Monte Drive

City State Zip Code
Santa Barbara CA 93110

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) ▼

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

Transaction ID: SA11AI.39758

Amount of Each Receipt this Period
2400.00

4800.00

B.

Full Name (Last, First, Middle Initial)
Stanley Sheinbaum

Mailing Address 345 North Rockingham Street

City State Zip Code
Los Angeles CA 90049

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

Name of Employer Self-employed Occupation Economist

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

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

Transaction ID: SA11AI.39730

Amount of Each Receipt this Period
500.00

500.00

C.

Full Name (Last, First, Middle Initial)
Anne Sprecher

Mailing Address 669 Cowles Road

City State Zip Code
Santa Barbara CA 93108

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

Name of Employer Self Occupation Chef

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

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

Transaction ID: SA11AI.39675

Amount of Each Receipt this Period
100.00

300.00

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 24 / 59
(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

A.

Full Name (Last, First, Middle Initial)
Jack Theimer

Mailing Address 109 E. De La Guerra

City State Zip Code
Santa Barbara CA 93101

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

Name of Employer Self-employed Occupation Developer

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
1 1 / 0 5 / 2 0 0 9

Transaction ID: SA11AI.39591

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Jane Tolmach

Mailing Address 656 Douglas Avenue

City State Zip Code
Oxnard CA 93030

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11AI.39576

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Jane Tolmach

Mailing Address 656 Douglas Avenue

City State Zip Code
Oxnard CA 93030

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

Name of Employer Retired Occupation Retired

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 850.00

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

Transaction ID: SA11AI.39644

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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 / 59
(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)
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 Self-Employed Occupation
Physician

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

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: SA11AI.39687

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date 2000.00

B. Full Name (Last, First, Middle Initial)
Syd Whalley, R.N.

Mailing Address 2740 Club Drive

City State Zip Code
Los Angeles CA 90064

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

Name of Employer UCLA Occupation
law student

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

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 01 / 2009

Transaction ID: SA11AI.39965

Amount of Each Receipt this Period
250.00

Election Cycle-to-Date 350.00

C. Full Name (Last, First, Middle Initial)
Michael Witherell

Mailing Address 914 California

City State Zip Code
Santa Barbara CA 93103

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

Name of Employer UCSB Occupation
University Administrator

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

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 11 / 2009

Transaction ID: SA11AI.39658

Amount of Each Receipt this Period
500.00

Election Cycle-to-Date 500.00

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

TOTAL This Period (last page this line number only) ► **26255.00**

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

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

FOR LINE NUMBER: PAGE 26 / 59
(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 FOR JUSTICE POLITICAL ACTION COMMITTEE (AAJ PAC)
Mailing Address 1050 31st Street N.W.

City State Zip Code
Washington DC 20007

FEC ID number of contributing federal political committee. **C** C00024521

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
 1 1 / 2 4 / 2 0 0 9
Transaction ID: SA11C.39841
 Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION
Mailing Address 1120 Conneticut Avenue NW

City State Zip Code
Washington DC 20036

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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 9
Transaction ID: SA11C.39707
 Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION
Mailing Address 1120 Conneticut Avenue NW

City State Zip Code
Washington DC 20036

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 ▼ 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 1 / 2 0 0 9
Transaction ID: SA11C.39708
 Amount of Each Receipt this Period
 500.00

SUBTOTAL of Receipts This Page (optional) ► 2000.00

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 / 59
(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 FEDERATION OF GOVERNMENT EMPLOYEES

Mailing Address 80 F STREET, N.W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70000104

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 12 / 09 / 2009
Transaction ID: SA11C.39626
 Amount of Each Receipt this Period 1000.00

B. Full Name (Last, First, Middle Initial)
AMERICAN FEDERATION OF TEACHERS AFL-CIO

Mailing Address 555 NEW JERSEY AVE., NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C70002472

Name of Employer Occupation

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt 12 / 22 / 2009
Transaction ID: SA11C.39617
 Amount of Each Receipt this Period 2500.00

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 ▼ 3500.00

Date of Receipt 11 / 25 / 2009
Transaction ID: SA11C.39833
 Amount of Each Receipt this Period 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 28 / 59
(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 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 ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 3 / 2 0 0 9

Transaction ID: SA11C.39621

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BUILD PAC NATIONAL ASSOCIATION OF HOME BUILDERS

Mailing Address 1201 15th Street NW

City State Zip Code
Washington DC 20005-2800

FEC ID number of contributing federal political committee. **C** C00000901

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
 1 1 / 2 0 / 2 0 0 9

Transaction ID: SA11C.39834

Amount of Each Receipt this Period
2000.00

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

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 ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11C.39843

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 59

(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)
DGA-PAC THE POLITICAL ACTION COMMITTEE OF THE DIRECTORS GUILD OF AMERICA INC.

Mailing Address 7920 SUNSET BOULEVARD

City State Zip Code
LOS ANGELES CA 90046

FEC ID number of contributing federal political committee. **C** C00311944

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
1 2 / 2 3 / 2 0 0 9

Transaction ID: SA11C.39954

Amount of Each Receipt this Period

1000.00

B. Full Name (Last, First, Middle Initial)
GREATER OXNARD ORGANIZATION OF DEMOCRATS

Mailing Address PO BOX 5673

City State Zip Code
OXNARD CA 93031

FEC ID number of contributing federal political committee. **C** C00428375

Name of Employer Occupation

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
1 2 / 1 2 / 2 0 0 9

Transaction ID: SA11C.39654

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)
HUMAN RIGHTS CAMPAIGN PAC

Mailing Address 1640 Rhode Island Avenue NW

City State Zip Code
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00235853

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
1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11C.39837

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 59
(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)
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 ▼ 5000.00

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

Transaction ID: SA11C.39706

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
K&L GATES LLP POLITICAL ACTION COMMITTEE (DC)

Mailing Address 1601 K Street, NW
Suite 500

City State Zip Code
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00213173

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
 1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11C.39845

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN PAC

Mailing Address 1725 Jefferson Davis Hwy.
Cyrstal Square Two Suite 300

City State Zip Code
Arlington VA 22202

FEC ID number of contributing federal political committee. **C** C00303024

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
 1 2 / 1 7 / 2 0 0 9

Transaction ID: SA11C.39622

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 59
(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)
MEDCO HEALTH SOLUTIONS INC POLITICAL ACTION COMMITTEE (AKA: MEDCO HEALTH PAC)

Mailing Address 591 Redwood Hwy. #4000
MAIL STOP E3-13

City State Zip Code
Mill Valley CA 94941

FEC ID number of contributing federal political committee. **C** C00384362

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
 1 1 / 2 4 / 2 0 0 9

Transaction ID: SA11C.39836

Amount of Each Receipt this Period
2000.00

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

Mailing Address 1111 North Fairfax Street

City State Zip Code
Alexandria VA 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 ▼ 4500.00

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

Transaction ID: SA11C.39704

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE (AKA P&G PAC), THE

Mailing Address One Procter & Gamble Plaza

City State Zip Code
Cincinnati OH 45202

FEC ID number of contributing federal political committee. **C** C00257329

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
 1 1 / 0 4 / 2 0 0 9

Transaction ID: SA11C.39830

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional) ► **5000.00**

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 / 59
(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)
PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE (AKA P&G PAC), THE
 Mailing Address One Procter & Gamble Plaza
 City State Zip Code
 Cincinnati OH 45202
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 9
Transaction ID: SA11C.39831
 Amount of Each Receipt this Period
 1500.00
 FEC ID number of contributing federal political committee. **C** C00257329
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
 2500.00

B. Full Name (Last, First, Middle Initial)
PROCTER & GAMBLE COMPANY GOOD GOVERNMENT COMMITTEE (AKA P&G PAC), THE
 Mailing Address One Procter & Gamble Plaza
 City State Zip Code
 Cincinnati OH 45202
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 2 2 / 2 0 0 9
Transaction ID: SA11C.39619
 Amount of Each Receipt this Period
 1000.00
 FEC ID number of contributing federal political committee. **C** C00257329
 Name of Employer Occupation
 Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼
 3500.00

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
 Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 1 4 / 2 0 0 9
Transaction ID: SA11C.39624
 Amount of Each Receipt this Period
 2000.00
 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 ▼
 3000.00

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 33 / 59
(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 City Firefighters Assn.
Mailing Address 121 W. Carrillo St.
City Santa Barbara State CA Zip Code 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 ▼ 500.00
Date of Receipt 11 / 01 / 2009
Transaction ID: SA11C.39787
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
SPRINT NEXTEL CORPORATION POLITICAL ACTION COMMITTEE
Mailing Address KSOPHN0212-2A372
6450 Sprint Parkway
City Overland Park State KS Zip Code 66251
FEC ID number of contributing federal political committee. **C** C00089342
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00
Date of Receipt 11 / 24 / 2009
Transaction ID: SA11C.39839
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
VERIZON WIRELESS/VERIZON COMMUNICATIONS INC. POLITICAL ACTION COMMITTEE
Mailing Address 1300 I St NW
Ste 400W
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00363127
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt 12 / 09 / 2009
Transaction ID: SA11C.39967
Amount of Each Receipt this Period 1500.00

SUBTOTAL of Receipts This Page (optional) ► 3000.00
TOTAL This Period (last page this line number only) ► 29250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 59
(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 ▼
2014.91

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 9

Transaction ID: SA15.39472

Amount of Each Receipt this Period
7.31

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 ▼
2197.84

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 9

Transaction ID: SA15.39473

Amount of Each Receipt this Period
182.93

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 ▼
2204.59

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 3 0 / 2 0 0 9

Transaction ID: SA15.39467

Amount of Each Receipt this Period
6.75

interest

SUBTOTAL of Receipts This Page (optional) ► **196.99**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 59

(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 ▼
2387.49

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 30 / 2009

Transaction ID: SA15.39468

Amount of Each Receipt this Period

182.90

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 ▼
2578.34

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: SA15.39464

Amount of Each Receipt this Period

190.85

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 ▼
2584.84

Date of Receipt

M M / D D / Y Y Y Y Y
12 / 31 / 2009

Transaction ID: SA15.39466

Amount of Each Receipt this Period

6.50

interest

SUBTOTAL of Receipts This Page (optional)

380.25

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 36 / 59	
	(check only one)			
<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 checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps

A.	Full Name (Last, First, Middle Initial) Jennifer Severance		Date of Receipt																					
	Mailing Address 1718 N. Harrison		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		1	6		2	0	0	9														
	City State Zip Code Boise ID 83702		Transaction ID: SA15.39475																					
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 225.00																					
Name of Employer Occupation																								
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 225.00																						

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	802.24

**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) ActBlue Technical Services Mailing Address P.O. Box 382110 City Cambridge State MA Zip Code 02238 Purpose of Disbursement processing 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: SB17.39487 Date of Disbursement 12 / 13 / 2009 Amount of Each Disbursement this Period 19.75
B.	Full Name (Last, First, Middle Initial) ActBlue Technical Services Mailing Address P.O. Box 382110 City Cambridge State MA Zip Code 02238 Purpose of Disbursement processing 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: SB17.39488 Date of Disbursement 12 / 27 / 2009 Amount of Each Disbursement this Period 127.03
C.	Full Name (Last, First, Middle Initial) American Direct Mail Mailing Address 908 N. Hollywood Way City Burbank State CA Zip Code 91505 Purpose of Disbursement mailing 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: SB17.39541 Date of Disbursement 12 / 11 / 2009 Amount of Each Disbursement this Period 2578.00

SUBTOTAL of Disbursements This Page (optional) ▶

2724.78

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)
Avenet Solutions

Mailing Address 400 Sibley Street #560

City State Zip Code
St. Paul MN 55101

Purpose of Disbursement
internet expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.39557
Date of Disbursement

12 / 22 / 2009

Amount of Each Disbursement this Period

900.00

B.

Full Name (Last, First, Middle Initial)
Lois Capps

Mailing Address 1724 Santa Barbara St.

City State Zip Code
Santa Barbara CA 93101

Purpose of Disbursement
reimbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.39536
Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

1263.84

C.

Full Name (Last, First, Middle Initial)
Whole Foods

Mailing Address 1440 P Street NW

City State Zip Code
Washington DC 20005

Purpose of Disbursement
event expense

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB17.39536.0
Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

1263.84

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ►

2163.84

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

Transaction ID: SB17.39553
Date of Disbursement

Mailing Address 1724 Santa Barbara St.

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

38.80

Purpose of Disbursement
travel reimbursement

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
City of San Luis Obispo

Transaction ID: SB17.39522
Date of Disbursement

Mailing Address PO Box 5699

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

City State Zip Code
San Luis Obispo CA 93454

Amount of Each Disbursement this Period

264.50

Purpose of Disbursement
event expense

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Jennifer Cooper

Transaction ID: SB17.39493
Date of Disbursement

Mailing Address 222 W Anapamu #1

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

5500.00

Purpose of Disbursement
management consulting

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

5803.30

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>A. Full Name (Last, First, Middle Initial) Jennifer Cooper</p> <p>Mailing Address 222 W Anapamu #1</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement reimbursement</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>Transaction ID: SB17.39503</p> <p>Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 279.14</p> <p>Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 800 Anacapa Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.39503.2</p> <p>Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 88.00</p> <p>[MEMO ITEM]</p> <p>Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Jennifer Cooper</p> <p>Mailing Address 222 W Anapamu #1</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement management consulting</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>Transaction ID: SB17.39510</p> <p>Date of Disbursement 11 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 5500.00</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5779.14

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps

<p>A. Full Name (Last, First, Middle Initial) Jennifer Cooper</p> <p>Mailing Address 222 W Anapamu #1</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement reimbursement</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>Transaction ID: SB17.39958</p> <p>Date of Disbursement 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 1281.95</p>
<p>B. Full Name (Last, First, Middle Initial) US Postmaster</p> <p>Mailing Address 800 Anacapa Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.39958.1</p> <p>Date of Disbursement 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 1100.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Kinkos</p> <p>Mailing Address PO Box 530257</p> <p>City Atlanta State GA Zip Code 30353</p> <p>Purpose of Disbursement event supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.39958.2</p> <p>Date of Disbursement 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 50.02</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1281.95

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Friends of Lois Capps

<p>A. Full Name (Last, First, Middle Initial) Staples</p> <p>Mailing Address PO Box 9020</p> <p>City Des Moines State IA Zip Code 50368</p> <p>Purpose of Disbursement event supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.39958.3</p> <p>Date of Disbursement 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 128.06</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Jennifer Cooper</p> <p>Mailing Address 222 W Anapamu #1</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement management consulting</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>Transaction ID: SB17.39533</p> <p>Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 5500.00</p>
<p>C. Full Name (Last, First, Middle Initial) Jennifer Cooper</p> <p>Mailing Address 222 W Anapamu #1</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement reimbursements</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>Transaction ID: SB17.39543</p> <p>Date of Disbursement 12 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 1426.01</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6926.01

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)
Kinkos

Transaction ID: SB17.39543.0
Date of Disbursement

Mailing Address PO Box 530257

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

City Atlanta State GA Zip Code 30353

Amount of Each Disbursement this Period

40.35

Purpose of Disbursement
event supplies

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

B.

Full Name (Last, First, Middle Initial)
US Postmaster

Transaction ID: SB17.39543.1
Date of Disbursement

Mailing Address 800 Anacapa Street

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

City Santa Barbara State CA Zip Code 93101

Amount of Each Disbursement this Period

1100.00

Purpose of Disbursement
postage

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

C.

Full Name (Last, First, Middle Initial)
Staples

Transaction ID: SB17.39543.2
Date of Disbursement

Mailing Address PO Box 9020

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

City Des Moines State IA Zip Code 50368

Amount of Each Disbursement this Period

285.66

Purpose of Disbursement
event supplies

Category/ Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼
State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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) 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: SB17.39551 Date of Disbursement 12 / 22 / 2009 Amount of Each Disbursement this Period 750.00 Category/Type
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: SB17.39494 Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 3791.70 Category/Type
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: SB17.39507 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 5405.78 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

9947.48

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 45 / 59

<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) 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: SB17.39530 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 3581.46 Category/Type
B.	Full Name (Last, First, Middle Initial) David Feldman Mailing Address 4685 Arizona Ave. City Atascadero State CA Zip Code 93422 Purpose of Disbursement 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: SB17.39511 Date of Disbursement 11 / 01 / 2009 Amount of Each Disbursement this Period 900.00 Category/Type
C.	Full Name (Last, First, Middle Initial) La Casa de Maria Mailing Address 800 El Bosque City Santa Barbara State CA Zip Code 93108 Purpose of Disbursement 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: SB17.39524 Date of Disbursement 11 / 18 / 2009 Amount of Each Disbursement this Period 350.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	4831.46
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 46 / 59

<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) La Casa de Maria <hr/> Mailing Address 800 El Bosque <hr/> City Santa Barbara State CA Zip Code 93108 <hr/> Purpose of Disbursement event expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.39548 Date of Disbursement 12 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 292.20
B.	Full Name (Last, First, Middle Initial) Omni Fresco <hr/> Mailing Address 917 Bath Street <hr/> City Santa Barbara State CA Zip Code 93101 <hr/> Purpose of Disbursement event expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.39547 Date of Disbursement 12 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 179.44
C.	Full Name (Last, First, Middle Initial) Omni Fresco <hr/> Mailing Address 917 Bath Street <hr/> City Santa Barbara State CA Zip Code 93101 <hr/> Purpose of Disbursement event expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB17.39963 Date of Disbursement 12 / 22 / 2009 <hr/> Amount of Each Disbursement this Period 125.61

SUBTOTAL of Disbursements This Page (optional) ▶

597.25

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>A. Full Name (Last, First, Middle Initial) Precision Printing</p> <p>Mailing Address 14544 Keswick Street</p> <p>City Van Nuys State CA Zip Code 91405</p> <p>Purpose of Disbursement printing expenses</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>Transaction ID: SB17.39532</p> <p>Date of Disbursement 11 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 3647.68</p>
<p>B. Full Name (Last, First, Middle Initial) Public Storage</p> <p>Mailing Address 5425 Overpass Road</p> <p>City Goleta State CA Zip Code 93111</p> <p>Purpose of Disbursement rent</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>Transaction ID: SB17.39497</p> <p>Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2166.00</p>
<p>C. Full Name (Last, First, Middle Initial) Santa Barbara Bank and Trust</p> <p>Mailing Address 20 E. Carrillo Street</p> <p>City Santa Barbara State CA Zip Code 93101</p> <p>Purpose of Disbursement credit card fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB17.39474</p> <p>Date of Disbursement 10 / 05 / 2009</p> <p>Amount of Each Disbursement this Period 15.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5828.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)
Santa Barbara Bank and Trust

Transaction ID: SB17.39469
Date of Disbursement

Mailing Address 20 E. Carrillo Street

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

423.87

Purpose of Disbursement
credit card fee

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB17.39470
Date of Disbursement

Mailing Address 20 E. Carrillo Street

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

4.95

Purpose of Disbursement
credit card fee

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB17.39471
Date of Disbursement

Mailing Address 20 E. Carrillo Street

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

186.68

Purpose of Disbursement
credit card fee

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

615.50

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)
Santa Barbara Bank and Trust

Transaction ID: SB17.39465
Date of Disbursement

Mailing Address 20 E. Carrillo Street

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

City State Zip Code
Santa Barbara CA 93101

Amount of Each Disbursement this Period

114.70

Purpose of Disbursement
credit card fee

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: SB17.39499
Date of Disbursement

Mailing Address PO Box 505820

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

City State Zip Code
The Lakes NV 88905

Amount of Each Disbursement this Period

1.93

Purpose of Disbursement
mailing expenses

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
UPS

Transaction ID: SB17.39957
Date of Disbursement

Mailing Address PO Box 505820

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

City State Zip Code
The Lakes NV 88905

Amount of Each Disbursement this Period

146.13

Purpose of Disbursement
mailing expenses

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

262.76

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) UPS Mailing Address PO Box 505820 City The Lakes State NV Zip Code 88905 Purpose of Disbursement mailing 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: SB17.39556 Date of Disbursement 12 / 22 / 2009 Amount of Each Disbursement this Period 5.39
B.	Full Name (Last, First, Middle Initial) VCEDA Mailing Address 1601 Carmen Drive Ste. 215 City Oxnard State CA Zip Code 93010 Purpose of Disbursement membership renewal 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: SB17.39542 Date of Disbursement 12 / 11 / 2009 Amount of Each Disbursement this Period 400.00
C.	Full Name (Last, First, Middle Initial) Verizon CA Mailing Address PO Box 30001 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: SB17.39490 Date of Disbursement 10 / 01 / 2009 Amount of Each Disbursement this Period 39.24

SUBTOTAL of Disbursements This Page (optional) ▶

444.63

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)
Verizon CA

Transaction ID: SB17.39500
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

39.20

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: SB17.39501
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

109.85

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: SB17.39528
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

110.13

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

259.18

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: SB17.39529
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

40.53

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: SB17.39555
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

109.63

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: SB17.39964
Date of Disbursement

Mailing Address PO Box 30001

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

City Inglewood State CA Zip Code 90313

Amount of Each Disbursement this Period

Purpose of Disbursement
utilities

40.59

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

190.75

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 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: SB17.39489 Date of Disbursement 10 / 01 / 2009	Amount of Each Disbursement this Period 93.22
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: SB17.39498 Date of Disbursement 10 / 26 / 2009	Amount of Each Disbursement this Period 91.70
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: SB17.39531 Date of Disbursement 11 / 30 / 2009	Amount of Each Disbursement this Period 93.82

SUBTOTAL of Disbursements This Page (optional) ▶	278.74
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>A. 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>Transaction ID: SB17.39508</p> <p>Date of Disbursement 10 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 81.51</p>
<p>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>Transaction ID: SB17.39520</p> <p>Date of Disbursement 11 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 169.49</p>
<p>C. 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>Transaction ID: SB17.39554</p> <p>Date of Disbursement 12 / 22 / 2009</p> <p>Amount of Each Disbursement this Period 152.09</p>

SUBTOTAL of Disbursements This Page (optional) ►

403.09

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

48338.54

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 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)
BILL OWENS FOR CONGRESS COMMITTEE

Mailing Address 3019 E ELM ST

City SPFLD State IL Zip Code 62702

Purpose of Disbursement contribution

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-General

State: IL District: 20

Transaction ID: SB21.39509

Date of Disbursement

10 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
CAL FIRE

Mailing Address P.O. Box 7107

City Los Osos State CA Zip Code 93412

Purpose of Disbursement event ad contribution

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.39521

Date of Disbursement

11 / 18 / 2009

Amount of Each Disbursement this Period

250.00

C. Full Name (Last, First, Middle Initial)
California Democratic Party

Mailing Address 911 20th Street

City Sacramento State CA Zip Code 95814

Purpose of Disbursement contribution

Candidate Name

Category/Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.39516

Date of Disbursement

10 / 26 / 2009

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

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 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) DCCC Mailing Address 430 South Capitol St., SE City Washington State DC Zip Code 20003 Purpose of Disbursement contribution 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: SB21.39502 Date of Disbursement 10 / 26 / 2009 Amount of Each Disbursement this Period 9091.00 Category/Type
B.	Full Name (Last, First, Middle Initial) DCCC Mailing Address 430 South Capitol St., SE City Washington State DC Zip Code 20003 Purpose of Disbursement contribution 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: SB21.39527 Date of Disbursement 11 / 30 / 2009 Amount of Each Disbursement this Period 9091.00 Category/Type
C.	Full Name (Last, First, Middle Initial) DCCC Mailing Address 430 South Capitol St., SE City Washington State DC Zip Code 20003 Purpose of Disbursement contribution 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: SB21.39552 Date of Disbursement 12 / 22 / 2009 Amount of Each Disbursement this Period 9091.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

27273.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input 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. DEMOCRATIC WOMEN OF SANTA BARBARA COUNTY

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 90655

City SANTA BARBARA State CA Zip Code 93190

Purpose of Disbursement
event contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.39540

Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

70.00

B. Food Share

Full Name (Last, First, Middle Initial)

Mailing Address 4156 South Bank Road

City Oxnard State CA Zip Code 93036

Purpose of Disbursement
military family food bank contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21.39955

Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

500.00

C. GARAMENDI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address c/o California Political Law, Inc.
3605 Long Beach Blvd., Ste. 426

City Long Beach State CA Zip Code 90807

Purpose of Disbursement
contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼
Special-General

State: CA District: 10

Transaction ID: SB21.39517

Date of Disbursement

10 / 31 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

1070.00

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 58 / 59

<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)
Helene Schneider for Santa Barbara Mayor 2009

Transaction ID: SB21.39514

Date of Disbursement

Mailing Address P.O. Box 22606

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

City State Zip Code
Santa Barbara CA 93121

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Re-Elect Grant House for Santa Barbara City Council 2009

Transaction ID: SB21.39512

Date of Disbursement

Mailing Address P.O. Box 4441

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

City State Zip Code
Santa Barbara CA 93140

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
contribution

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

33093.00

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

(Use separate schedule(s) for each numbered line)	PAGE 59 / 59
	FOR LINE NUMBER: (check only one) <input checked="" type="checkbox"/> 9 <input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Friends of Lois Capps

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Jennifer Severance			Nature of Debt (Purpose): Restitution for Unauth. Expenditures
Mailing Address 1718 N. Harrison			
City Boise	State ID	ZIP Code 83702	

Outstanding Balance Beginning This Period		Transaction ID: SD9.22725	
123500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	625.00	122875.00	

1) SUBTOTALS This Period This Page (optional).....	122875.00
2) TOTALS This Period (last page this line number only).....	122875.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	122875.00