

**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 Joe Baca

ADDRESS (number and street) | 555 Capitol Mall, Suite 1425

Check if different than previously reported. (ACC)

Sacramento | CA | 95814

2. **FEC IDENTIFICATION NUMBER**  CITY STATE ZIP CODE

C00325449 | | CA | 95814

3. IS THIS REPORT  NEW (N) OR  AMENDED (A) STATE DISTRICT

| CA | 43 |

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 | 04 | 01 | 2007 | through | 06 | 30 | 2007

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 | Joe Baca

Signature of Treasurer | Electronically Filed by Joe Baca | Date | 09 | 11 | 2007

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

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

Write or Type Committee Name

Friends of Joe Baca

Report Covering the Period:

From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	121265.89	259282.65
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	6005.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	121265.89	253277.65
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	89776.04	199060.37
(b) Total Offsets to Operating Expenditures (from Line 14).....	453.98	3953.98
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	89322.06	195106.39
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	45262.09	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	43787.04	

**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 02/2003)

Write or Type Committee Name  
Friends of Joe Baca

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

**I. RECEIPTS**

**COLUMN A**  
Total This Period

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

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

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

36176.80

102976.80

(ii) Unitemized.....

1167.50

6392.50

(iii) TOTAL of contributions

37344.30

109369.30

from individuals..... ▶

9.09

100.85

(b) Political Party Committees.....

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

83912.50

149812.50

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans)

121265.89

259282.65

(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

0.00

0.00

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

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.).....

453.98

3953.98

15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

0.73

0.82

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

121720.60

263237.45

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
17. OPERATING EXPENDITURES.....	89776.04	199060.37
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	2650.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	3355.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	6005.00
21. OTHER DISBURSEMENTS.....	32100.00	36120.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	121876.04	241185.37

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	45417.53
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	121720.60
25. SUBTOTAL (add Line 23 and Line 24).....	167138.13
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	121876.04
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	45262.09

**CONSOLIDATED REPORT OF GROSS RECEIPTS FOR AUTHORIZED COMMITTEES (11 CFR 104.19)**  
**(Millionaires' Amendment)**

<b>Name of Candidate</b> Joe Baca		<b>Candidate ID Number</b> H6CA42099
<b>Name of Principal Campaign Committee</b> Friends of Joe Baca		<b>Committee ID Number</b> C C00325449
<b>Committee Address</b> 555 Capitol Mall, Suite 1425		
<b>City</b> Sacramento	<b>State</b> CA	<b>ZIP</b> 95814
Report Covering Period (check one) <input checked="" type="checkbox"/> through June 30, or <input type="checkbox"/> through December 31 of the year preceding the year of the general election		
	<b>Primary</b>	<b>General</b>
1. Gross receipts of authorized committees .....	251487.21	2900.00
2. Aggregate amount of contributions from personal funds of the candidate .....	0.00	0.00
3. Gross receipts minus the candidate's personal contributions .....	251487.21	2900.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 80
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
William Alexander

Mailing Address 13601 SW 103rd Avenue

City Miami State FL Zip Code 33176

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 1 7 / 2 0 0 7

**Transaction ID: A3123**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address Information Requested

City No Response State Zip Code

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

**Transaction ID: A3176**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1800 Old Meadow Road, #522

City McLean State VA Zip Code 22102

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

Name of Employer Hispanic College Fund, Inc. Occupation President and CEO

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 9 / 2 0 0 7

**Transaction ID: A3177**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Lynn Brockman

Mailing Address 2318 Talamill Drive

City State Zip Code  
Marietta GA 30066

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

Transaction ID: A3067

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 331 Bamboo Road

City State Zip Code  
Palm Beach FL 33404

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

Name of Employer Cynthia Broydrick, Lobbyist Occupation Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2007

Transaction ID: A3189

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
C2 Group LLC

Mailing Address 101 Constitution Avenue, NW, Ste. 900

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1316.80

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2007

Transaction ID: A3122

Amount of Each Receipt this Period  
1316.80

Fundraising Event

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

(Inkind) Partnership Attribution See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **2816.80**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Tom Crawford

Mailing Address 101 Constitution Avenue, NW, Ste. 900

City Washington State DC Zip Code 20001

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

Name of Employer C2 Group LLC Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 263.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: P47

Amount of Each Receipt this Period  
263.36

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

Mailing Address 101 Constitution Avenue, NW, Ste. 900

City Washington State DC Zip Code 20001

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

Name of Employer C2 Group LLC Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 263.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: P48

Amount of Each Receipt this Period  
263.36

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

Mailing Address 101 Constituion Avenue, NW, Ste. 900

City Washington State DC Zip Code 20001

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

Name of Employer C2 Group LLC Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 263.36

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 8 / 2 0 0 7

Transaction ID: P49

Amount of Each Receipt this Period  
263.36

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **0.00**

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



# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 80
	<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 Joe Baca

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

Mailing Address 101 Constitution Avenue, NW, Ste. 900

City Washington State DC Zip Code 20001

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

Name of Employer C2 Group LLC Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 263.36

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2007

Transaction ID: P50

Amount of Each Receipt this Period  
263.36

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

Mailing Address 101 Constitution Avenue, NW, Ste. 900

City Washington State DC Zip Code 20001

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

Name of Employer C2 Group LLC Occupation Partner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 263.36

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2007

Transaction ID: P51

Amount of Each Receipt this Period  
263.36

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

Mailing Address 2756 Calloway Court

City Duluth State GA Zip Code 30097

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

Transaction ID: A3070

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Pei Hwa Shi Chang

Mailing Address 22834 Lazy Trail Road

City State Zip Code  
Diamond Bar CA 91765

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

Name of Employer IDPM Ltd. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: A3042

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 553 Seminole Avenue

City State Zip Code  
Atlanta GA 30307

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

Name of Employer Parking Company of America Occupation Manager

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

Transaction ID: A3071

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1500 North Country Club Road

City State Zip Code  
Ada OK 74820

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

Transaction ID: A3112

Amount of Each Receipt this Period  
1500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 80
	<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Edward M. Cooney</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 1234 North Vermont Street		<b>Transaction ID: A3079</b>	
City State Zip Code Arlington VA 22201		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Congressional Hunger Center		Occupation Administrator	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Ruy A. Cotasaenz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 985 Landover Crossing		<b>Transaction ID: A3073</b>	
City State Zip Code Suwanee GA 30024		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Best Efforts		Occupation Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Rene M. Diaz</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 5501 Fulton Industrial Blvd., Southwest		<b>Transaction ID: A3076</b>	
City State Zip Code Atlanta GA 30336		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Diaz Foods		Occupation President/Chief Executive Officer	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 80
	<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Joseph E. Dicorpo</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 4230 Ridgehurst Drive		<b>Transaction ID: A3077</b>	
City State Zip Code Smyrna GA 30080		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Worldwide Transportation Svcs LLC		Occupation Medical Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. David D. Ferreira</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 602 E Street, Southeast # 2		<b>Transaction ID: A3078</b>	
City State Zip Code Washington DC 20003		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer US Hispanic Chamber of Commerce		Occupation Government Affairs Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Steven A. Figueroa, Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
Mailing Address 4440 6th Street		<b>Transaction ID: A3114</b>	
City State Zip Code Riverside CA 92501		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Figueroa's Community Consulting		Occupation Consultant	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Mary D. Foley

Mailing Address 914 Ravens Head Road

City State Zip Code  
Sherwood Forest MD 21405

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

Name of Employer Occupation  
Foley, Maldonado & Turell Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2007

**Transaction ID: A3180**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 6931 Arlington Road, Suite B

City State Zip Code  
Bethesda MD 20814

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

Name of Employer Occupation  
Gali Service Industries, Inc. Owner

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

**Transaction ID: A3128**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 10525 Bloomfield Street

City State Zip Code  
Toluca Lake CA 91602

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 04 / 2007

**Transaction ID: A3106**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Law Office of Garza, Garza & Pacheco, LLP

Mailing Address 1980 Orangetree Lane, Suite #280

City State Zip Code  
Redlands CA 92374

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: A3045

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Partnership Attribution  
See Below

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

Mailing Address 1980 Orangetree Lane, Suite #280

City State Zip Code  
Redlands CA 92374

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

Name of Employer Occupation  
Garza, Garza & Pacheco, LLP Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: P45

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

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

Mailing Address 1980 Orangetree Lane, Suite #280

City State Zip Code  
Redlands CA 92374

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

Name of Employer Occupation  
Garza, Garza & Pacheco, LLP Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

Transaction ID: P46

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  
**[MEMO ITEM]**

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Bruce Goldstein

Mailing Address 9402 Woodland Drive

City State Zip Code  
Silver Spring MD 20910

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

Name of Employer Occupation  
Farmworker Justice Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 7

**Transaction ID: A3056**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 16136 Krameria Avenue

City State Zip Code  
Riverside CA 92504

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

Name of Employer Occupation  
Inland Empire Job Corp. Business & Community Liason

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

385.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 7

**Transaction ID: A3046**

Amount of Each Receipt this Period  
185.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1754 Emory Ridge Drive

City State Zip Code  
Atlanta GA 30329

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

Name of Employer Occupation  
GALEO Executive Director

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID: A3075**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>935.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 80
	<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 Joe Baca

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

Mailing Address 13300 Morris Road

City State Zip Code  
Alpharetta GA 30004

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3080

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3116 South High Street

City State Zip Code  
Arlington VA 22202

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

Name of Employer The Raben Group Occupation Principal

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 650.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 3 / 2 0 0 7

**Transaction ID:** A3057

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Lawrence M. Goodman, III

Mailing Address 425 Marguerita Avenue

City State Zip Code  
Santa Monica CA 90402

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

Name of Employer School-Link Technologies, Inc. Occupation Chief Executive Officer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3081

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Daniel T. Gryczman

Mailing Address 11355 West Olympic Blvd.

City State Zip Code  
Los Angeles CA 90064

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

Name of Employer  
Manatt, Phelps & Phillips, LLP

Occupation  
Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 4 / 2 0 0 7

**Transaction ID:** A3107

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 520 Laurian View Court

City State Zip Code  
Roswell GA 30075

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

Name of Employer  
Best Efforts

Occupation  
Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3082

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 630 North Maple Drive

City State Zip Code  
Beverly Hills CA 90210

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

Name of Employer  
Retired

Occupation  
Retired

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 1 / 2 0 0 7

**Transaction ID:** A3172

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 80
	<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Michael H. Hutton</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 20 Royal Dominion Court		<b>Transaction ID: A3083</b>	
City State Zip Code Bethesda MD 20817		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Bockorny & Petrizzo Consultant			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Mickey Ibarra</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address 1140 Connecticut Avenue, NW, Suite 1100		<b>Transaction ID: A3084</b>	
City State Zip Code Washington DC 20036-4007		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Ibarra & Associates President/Co-Founder			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C. Richard H. Jacques</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 15928 Hunsaker Avenue, Unit 11		<b>Transaction ID: A3047</b>	
City State Zip Code Paramount CA 90723		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Richard Jacques, Consultant Consultant			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Albert S. Jacquez

Mailing Address 2403 Lellah Court

City State Zip Code  
Dunn Loring VA 22027

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

Name of Employer Occupation  
Albert S. Jacquez, Consultant Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 15 / 2007

**Transaction ID: A3157**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 16130 Ventura Blvd., #320

City State Zip Code  
Encino CA 91436

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

Name of Employer Occupation  
Ares Management Investment Banker

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 21 / 2007

**Transaction ID: A3174**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Gerald R. Kunde, II

Mailing Address 7201 Churchill Road

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
International Dairy Foods Assn. Association Executive

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

**Transaction ID: A3131**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Eve M. Kurtin

Mailing Address 16830 Ventura Blvd., Suite 244

City Encino State CA Zip Code 91436

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

Name of Employer Pacific Venture Group Occupation Venture Capital

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

**Transaction ID:** A3108

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1411 North Nash Street

City Arlington State VA Zip Code 22209

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

Name of Employer Leshner & Russell, Inc. Occupation Consultant/Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

**Transaction ID:** A3061

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 418 4th Street, NE

City Washington State DC Zip Code 20002

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

Name of Employer Levinson & Association Occupation Independent Contractor

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
06 / 28 / 2007

**Transaction ID:** A3181

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Gary Jih-Shan Liaou

Mailing Address P.O. Box 986

City State Zip Code  
Loma Linda CA 92354

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

Name of Employer Occupation  
Lucky Farms President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 6 / 2 0 0 7

**Transaction ID: A3048**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1830 17th Street, NW, #607

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
Magana Associates Government Affairs Consultant

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID: A3087**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 8809 Potomac Station Lane

City State Zip Code  
Potomac MD 20854

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

Name of Employer Occupation  
Marc Associates, Inc. Chief Executive Officer

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼

250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 8 / 2 0 0 7

**Transaction ID: A3182**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 80
	<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 Joe Baca

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

Mailing Address 8809 Potomac Station Lane

City Potomac State MD Zip Code 20854

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

Name of Employer HMA Associates, Inc. Occupation Executive

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2007

**Transaction ID: A3183**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 15460 Duomo Via

City Bel Air State CA Zip Code 90077

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

Name of Employer E.M. Therapeutics, Inc. Occupation Physical Therapist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 04 / 2007

**Transaction ID: A3109**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 104 Dulany Place

City Falls Church State VA Zip Code 22046

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

Name of Employer Williams & Jensen, P.C. Occupation Attorney

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 07 / 2007

**Transaction ID: A3088**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Marco A. McGuire

Mailing Address 10155 Agate Avenue

City State Zip Code  
Mentone CA 92359

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 7

**Transaction ID: A3115**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Morongo Band of Mission Indians Native American Right Fund-B

Mailing Address P.O. Box 366

City State Zip Code  
Cabazon CA 92230-0366

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 7

**Transaction ID: A3058**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 111 23rd Street, NW, #2-C

City State Zip Code  
Washington DC 20037

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

Name of Employer Best Efforts Occupation Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 0 / 2 0 0 7

**Transaction ID: A3164**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 80
	<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> Paperboard International LLC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 1394 Indian Trail Road, # 302		Transaction ID: A3091
City Norcross State GA Zip Code 30093	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jose R. Perez		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 4321 Doerun Court		Transaction ID: A3092
City Norcross State GA Zip Code 30092	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Best Efforts	Occupation Best Efforts	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank P. Ros		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 1737 Patriots Way		Transaction ID: A3095
City Kennesaw State GA Zip Code 30152	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer The Coca Cola Company	Occupation Assistant Vice President	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 80
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> Randall M. Russell		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 940 Swinks Mill Road		Transaction ID: A3060	
City State Zip Code McLean VA 22102		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Leshner & Russell, Inc. Lobbyist			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> David H. Saber		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 1000 Hillcrest Drive		Transaction ID: A3052	
City State Zip Code Pomona CA 91768-1422		Amount of Each Receipt this Period 2100.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Caltrop Vice President			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Arturo H. Sanchez		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2007	
Mailing Address 215 Moccasin Hollow		Transaction ID: A3096	
City State Zip Code Duluth GA 30097		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation Best Efforts Best Efforts			
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Paul Shimoff

Mailing Address 12912 Hillary Way

City State Zip Code  
Redlands CA 92372

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

Name of Employer Occupation  
McPeters McAlearney Shimoff & Hatt Attorney

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 375.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

**Transaction ID: A3175**

Amount of Each Receipt this Period  
125.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 145 15th Street, Northeast, # 811

City State Zip Code  
Atlanta GA 30309

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

Name of Employer Occupation  
Best Efforts Best Efforts

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 07 / 2007

**Transaction ID: A3098**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2754 Boddie Place

City State Zip Code  
Duluth GA 30097

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

Name of Employer Occupation  
Lou Sobh Pontiac Buick President

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

**Transaction ID: A3136**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1125.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Soboba Band of Luiseno Indians

Mailing Address P.O. Box 487

City State Zip Code  
San Jacinto CA 92581

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 3 / 2 0 0 7

**Transaction ID:** A3054

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 14208 Flomar Drive

City State Zip Code  
Whittier CA 90605

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

Name of Employer Occupation  
Seto & Sanchez Investments, Inc. Chief Financial Officer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3100

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 4329 Miller Street

City State Zip Code  
La Verne CA 91750

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

Name of Employer Occupation  
Best Efforts Best Efforts

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3099

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Charles W. Stenholm

Mailing Address 616 E Street, Northwest, #1154

City Washington State DC Zip Code 20004

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

Name of Employer US Congress Occupation Congressman

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

Transaction ID: A3147

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 3398 Aintree Downs Drive

City Norco State CA Zip Code 92860

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

Name of Employer Ranch Rock Products, Inc. Occupation Aggregate Sales

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2007

Transaction ID: A3117

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1836 West Poplar Street

City San Antonio State TX Zip Code 78207

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

Name of Employer Treco Services, Inc. Occupation Owner

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2007

Transaction ID: A3103

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 80
	<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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
David N. M. Turch

Mailing Address 517 2nd Street, NW

City Washington State DC Zip Code 20002

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

Name of Employer David Turch & Associates Occupation Lobbyist

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2007

**Transaction ID: A3185**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 2600 Century Parkway, # 100

City Atlanta State GA Zip Code 30345

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 07 / 2007

**Transaction ID: A3104**

Amount of Each Receipt this Period  
250.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Permissible funds verification pending

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

Mailing Address 460 Ridgewood Avenue

City Glen Ridge State NJ Zip Code 07028

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

Name of Employer Univision Occupation Chief Executive Officer

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 28 / 2007

**Transaction ID: A3186**

Amount of Each Receipt this Period  
500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 / 80
	(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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Howard S. Welinsky

Mailing Address 6375 Green Valley Circle, Suite 202

City Culver City State CA Zip Code 90230

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

Name of Employer Warner Brothers Occupation Senior Vice President

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

**Transaction ID: A3110**

Amount of Each Receipt this Period  
 500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1397 N. Topsail Avenue

City Colton State CA Zip Code 92324

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

Name of Employer Wright's Adolescent Development Center Occupation Executive Director

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 3 0 / 2 0 0 7

**Transaction ID: A3191**

Amount of Each Receipt this Period  
 100.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	36176.80

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 80	
	(check only one)	
<input type="checkbox"/> 11a	<input checked="" type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

A. Full Name (Last, First, Middle Initial)  
Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street, SE

City State Zip Code  
Washington DC 20003

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
100.85

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	0	7

Transaction ID: A3140

Amount of Each Receipt this Period  
9.09

Fundraising Services  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

(Inkind)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	9.09
<b>TOTAL</b> This Period (last page this line number only) .....	▶	9.09

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

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

FOR LINE NUMBER: PAGE 32 / 80  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
AFSCME, AFL-CIO, PEOPLE

Mailing Address 1625 L Street, NW

City State Zip Code  
Washington DC 20036

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	7

**Transaction ID:** A3178

Amount of Each Receipt this Period  
3000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Amalgamated Transit Union COPE Voluntary Fund

Mailing Address 5025 Wisconsin Avenue, NW

City State Zip Code  
Washington DC 20016

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	0	7

**Transaction ID:** A3142

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
American Association for Justice Political Action Committee

Mailing Address 1050 31st Street, NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	7

**Transaction ID:** A3064

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. American Beverage Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 1101 16th Street, Northwest		<b>Transaction ID: A3065</b>
City Washington State DC Zip Code 20036	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. American Crystal Sugar Company PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 101 North Third Street		<b>Transaction ID: A3124</b>
City Moorhead State MN Zip Code 56560	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. American Society of Anesthesiologists PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 520 North Northwest Highway		<b>Transaction ID: A3154</b>
City Park Ridge State IL Zip Code 60068-2573	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 34 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. American Society of Anesthesiologists PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 520 North Northwest Highway		<b>Transaction ID: A3179</b>
City State Zip Code Park Ridge IL 60068-2573	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. American Sugarbeet Growers Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address 1156 15th Street, NW, Suite 1101		<b>Transaction ID: A3162</b>
City State Zip Code Washington DC 20005	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Anheuser-Busch PAC (AB-PAC)</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address One Busch Place		<b>Transaction ID: A3152</b>
City State Zip Code St. Louis MO 63118	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> Apollo Group, Inc.		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 4615 East Elwood Street, Suite 400		Transaction ID: A3167
City Phoenix State AZ Zip Code 85040	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> AT & T, Inc. Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 175 East Houston, Room 7-A-50		Transaction ID: A3066
City San Antonio State TX Zip Code 78205	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 3000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> AT & T, Inc. Federal PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 175 East Houston, Room 7-A-50		Transaction ID: A3168
City San Antonio State TX Zip Code 78205	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Auction Market Political Action Committee of the Chicago Board of Trade</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 141 West Jackson Blvd.		<b>Transaction ID: A3119</b>
City Chicago State IL Zip Code 60604	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Bank of America Corporation Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 600 Peachtree Street, NE, 3rd Floor		<b>Transaction ID: A3125</b>
City Atlanta State GA Zip Code 30308	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Blue County</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 6924 Clear Spring Court		<b>Transaction ID: A3170</b>
City Highland State CA Zip Code 92346	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> Build PAC of the Nat'l Assn. of Home Builders		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 1201 15th Street, NW		<b>Transaction ID:</b> A3039	
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 2000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)  General 2006 Debt Retirement
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> CA Association of Mortgage Brokers PAC Federal		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 785 Orchard Drive, Suite 225		<b>Transaction ID:</b> A3041	
City State Zip Code Folsom CA 95630	Amount of Each Receipt this Period 500.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> California Dairies, Inc. Federal Political Action Committee		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 7 / 2 0 0 7	
Mailing Address P.O. Box 2198		<b>Transaction ID:</b> A3068	
City State Zip Code Los Banos CA 93635	Amount of Each Receipt this Period 1000.00		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER: PAGE 38 / 80  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
California Farm Bureau Fund to Protect the Family Farm (FARM PAC)

Mailing Address 2300 River Plaza Drive

City State Zip Code  
Sacramento CA 95833

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	7

**Transaction ID:** A3069

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
The Coca Cola Company Nonpartisan Committee for Good Government

Mailing Address P.O. Drawer 1734

City State Zip Code  
Atlanta GA 30301

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	7

**Transaction ID:** A3072

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

Mailing Address 1500 Market Street

City State Zip Code  
Philadelphia PA 19102

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	0	/	2	0	0	7

**Transaction ID:** A3141

Amount of Each Receipt this Period  
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 80  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council CULAC

Mailing Address 601 Pennsylvania Avenue, NW, South Bldg.  
City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 4 / 1 9 / 2 0 0 7

**Transaction ID: A3038**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council CULAC

Mailing Address 601 Pennsylvania Avenue, NW, South Bldg.  
City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

**Transaction ID: A3145**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Credit Union Legislative Action Council CULAC

Mailing Address 601 Pennsylvania Avenue, NW, South Bldg.  
City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 6 / 2 5 / 2 0 0 7

**Transaction ID: A3161**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 80
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input checked="" 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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Dean Foods Company PAC

Mailing Address 2515 McKinney Avenue, Suite 1200

City State Zip Code  
Dallas TX 75201

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 20 / 2007

**Transaction ID: A3159**

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Dell Inc. Employee PAC (DELL PAC)

Mailing Address 1225 Eye Street, Northwest Suite 920

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 23 / 2007

**Transaction ID: A3055**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Democratic Luncheon Club-Federal

Mailing Address P.O. Box 451

City State Zip Code  
San Bernardino CA 92402

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
62.50

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2007

**Transaction ID: A3171**

Amount of Each Receipt this Period  
62.50

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>3062.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. DRIVE Committee Political Fund</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 0 1 / 2 0 0 7
Mailing Address 25 Louisiana Avenue, NW		<b>Transaction ID: A3113</b>
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Farm Credit PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 50 F Street, NW, Suite 900		<b>Transaction ID: A3044</b>
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Federal National Mortgage Association Political Action Committee (FANNIE MAE PAC)</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 3900 Wisconsin Avenue, NW		<b>Transaction ID: A3138</b>
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 42 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Federal National Mortgage Association Political Action Committee (FANNIE MAE PAC)

Mailing Address 3900 Wisconsin Avenue, NW

City Washington State DC Zip Code 20016

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

**Transaction ID:** A3139

Amount of Each Receipt this Period  
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
FreddiePAC Federal Home Loan Mortgage Corp. PAC

Mailing Address 8200 Jones Branch Road, Mailstop 604

City McLean State VA Zip Code 22102

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

**Transaction ID:** A3127

Amount of Each Receipt this Period  
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
General Electric Company PAC

Mailing Address 1299 Pennsylvania Avenue, NW, Suite 1100

City Washington State DC Zip Code 20004-2407

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 6 / 2 0 / 2 0 0 7

**Transaction ID:** A3160

Amount of Each Receipt this Period  
 1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Grocery Manufacturers Association PAC (GMA-PAC)

Mailing Address 1350 I Street, NW, Suite 300

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 13 / 2007

**Transaction ID: A3155**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Home Depot Inc. PAC

Mailing Address 101 Constitution Avenue, NW, # 800W

City State Zip Code  
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 11 / 2007

**Transaction ID: A3120**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Ice Cream Milk & Cheese Political Action Committee

Mailing Address 1250 H Street NW, Suite 900

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
05 / 17 / 2007

**Transaction ID: A3129**

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 80  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
IUPAT, Int'l Union Painters & Allied Trades Political Action Together PAC

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	7

**Transaction ID:** A3163

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Kellogg Better Government Committee

Mailing Address P.O. Box 3599

City State Zip Code  
Battle Creek MI 49016-3599

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	7	/	2	0	0	7

**Transaction ID:** A3130

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
Laborers' Political League

Mailing Address 905 Sixteenth Street, NW

City State Zip Code  
Washington DC 20006

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	5	/	2	0	0	7

**Transaction ID:** A3165

Amount of Each Receipt this Period  
5000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ► **7000.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 45 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Land O'Lakes PAC

Mailing Address P.O. Box 64101

City State Zip Code  
Saint Paul MN 55164

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3085

Amount of Each Receipt this Period  
2500.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Livestock Marketing Association PAC (LMA-PAC)

Mailing Address 10510 NW Ambassador Drive

City State Zip Code  
Kansas City MO 64153

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3086

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
National Air Traffic Controllers Association PAC

Mailing Address 1325 Massachusetts Avenue, NW

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 7

**Transaction ID:** A3089

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> National Association of Federal Credit Unions/PAC Mailing Address 3138 10th Street, North		Date of Receipt M M / D D / Y Y Y Y Y 06 / 04 / 2007
City State Zip Code Arlington VA 22201		<b>Transaction ID:</b> A3149 Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B.</b> National Farmers Union PAC (NATFARMPAC) Mailing Address 11900 East Cornell Avenue		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2007
City State Zip Code Aurora CO 80014		<b>Transaction ID:</b> A3132 Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C.</b> ROCKPAC - National Stone, Sand, & Gravel Association Mailing Address 1605 King Street		Date of Receipt M M / D D / Y Y Y Y Y 05 / 24 / 2007
City State Zip Code Alexandria VA 22314		<b>Transaction ID:</b> A3144 Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation		
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Election Cycle-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> New Bedford Panoramex Corp. PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 1037 West Ninth Street		Transaction ID: A3133
City State Zip Code Upland CA 91786	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> National Rifle Association Political Victory Fund		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 11250 Waples Mill Road		Transaction ID: A3184
City State Zip Code Fairfax VA 22030	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Olsson, Frank & Weeda Fund for American Values PAC		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 1400 16th Street, NW # 400		Transaction ID: A3090
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A.</b> California Canning Peach Association PAC (PEACH PAC)		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 2300 River Plaza Drive, Suite 110		Transaction ID: A3036
City State Zip Code Sacramento CA 95833	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Pepsico Concerned Citizens Fund		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 700 Anderson Hill Road		Transaction ID: A3150
City State Zip Code Purchase NY 10577	Amount of Each Receipt this Period 4000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Pepsico Concerned Citizens Fund		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 700 Anderson Hill Road		Transaction ID: A3151
City State Zip Code Purchase NY 10577	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 6000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Pfizer PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 235 East 42nd Street		<b>Transaction ID: A3118</b>
City State Zip Code New York NY 10017	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Professionals In Advertising Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address 1203 19th Street, NW, 4th Floor		<b>Transaction ID: A3134</b>
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Prudential Financial Inc. Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 751 Broad Street		<b>Transaction ID: A3059</b>
City State Zip Code Newark NJ 07102	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Raytheon Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 1100 Wilson Boulevard, Suite 1500		<b>Transaction ID: A3094</b>
City State Zip Code Arlington VA 22209	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
2000.00		

Full Name (Last, First, Middle Initial) <b>B. Realtors PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 430 N. Michigan Avenue		<b>Transaction ID: A3051</b>
City State Zip Code Chicago IL 60611	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
1000.00		

Full Name (Last, First, Middle Initial) <b>C. School Nutrition Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 700 South Washington Street, Suite 300		<b>Transaction ID: A3097</b>
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Sempra Energy Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 20 / 2007
Mailing Address 101 Ash Street, HQ15B		<b>Transaction ID: A3173</b>
City State Zip Code San Diego CA 92101	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) <b>B. SNACK Food Association Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 17 / 2007
Mailing Address 1171 King Street, Suite One		<b>Transaction ID: A3135</b>
City State Zip Code Alexandria VA 22314-2720	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 1000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Southern Minnesota Beet Sugar Cooperative PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 07 / 2007
Mailing Address P.O. Box 500		<b>Transaction ID: A3101</b>
City State Zip Code Renville MN 56284	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Election Cycle-to-Date ▼ 2000.00	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Receipt this Period 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	2500.00

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 80
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Transport Workers Union Political Contributions Committee</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 29 / 2007
Mailing Address 1700 Broadway, Second Floor		<b>Transaction ID: A3166</b>
City State Zip Code New York NY 10019-5905	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Union Pacific Corporation Fund for Effective Government</b>		Date of Receipt M M / D D / Y Y Y Y Y 05 / 21 / 2007
Mailing Address 600 13th Street, NW, Suite 340		<b>Transaction ID: A3137</b>
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. United Egg Association EGG PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 06 / 28 / 2007
Mailing Address 1303 Hightower Trail, Suite 200		<b>Transaction ID: A3187</b>
City State Zip Code Atlanta GA 30350	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Occupation	Receipt For: 2008 Election Cycle-to-Date ▼ <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. United States Telecom Association PAC</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 07 / 2007
Mailing Address 607 14th Street, Northwest #400		<b>Transaction ID: A3105</b>
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. UPS PAC - United Parcel Service Political Action Committee</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2007
Mailing Address 55 Glenlake Parkway, NE		<b>Transaction ID: A3190</b>
City State Zip Code Atlanta GA 30328	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Verizon Communications Inc. Good Government Club</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2007
Mailing Address 1717 Arch Street, 47 South		<b>Transaction ID: A3121</b>
City State Zip Code Philadelphia PA 19103	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	2500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 80
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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 Joe Baca

**A.** Full Name (Last, First, Middle Initial)  
Women's Alliance for Israel PAC

Mailing Address 30151 Tomas Street

City Rancho S Margarita State CA Zip Code 92688

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 0 4 / 2 0 0 7

**Transaction ID:** A3111

Amount of Each Receipt this Period  
1000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
Yum! Brands, Inc. Good Government Fund

Mailing Address 1441 Gardiner Lane

City Louisville State KY Zip Code 42013

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 5 / 1 7 / 2 0 0 7

**Transaction ID:** A3126

Amount of Each Receipt this Period  
2000.00

Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	83912.50

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 55 / 80	
	(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 checked="" type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Friends of Joe Baca
--

Full Name (Last, First, Middle Initial) A. Palisades Media Group, Inc.	
Mailing Address 1620 26th Street, Suite 2050 North	
City Santa Monica	State Zip Code CA 90404
FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 253.98

Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Transaction ID: A3031
Amount of Each Receipt this Period 253.98
Refund <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....	253.98
TOTAL This Period (last page this line number only) .....	253.98

# 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. David L. Andrukitis, Inc.</b>		<b>Transaction ID: B1671</b> Date of Disbursement 05 / 08 / 2007
Mailing Address 50 E Street, SE		Amount of Each Disbursement this Period 503.75 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003	001 Category/Type	
Purpose of Disbursement Campaign Letterhead Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Arum Group, LLC</b>		<b>Transaction ID: B1646</b> Date of Disbursement 04 / 04 / 2007
Mailing Address 625 Third Street, NE, Suite 2		Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20002	003 Category/Type	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Natalie Baca-Ramos</b>		<b>Transaction ID: B1654</b> Date of Disbursement 04 / 10 / 2007
Mailing Address 7485 Eucalyptus Drive		Amount of Each Disbursement this Period 323.12 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Highland State CA Zip Code 92346	003 Category/Type	
Purpose of Disbursement Fundraiser Rental Equipment Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4326.87</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Natalie Baca-Ramos</b>		<b>Transaction ID: B1690</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 7485 Eucalyptus Drive		Amount of Each Disbursement this Period 184.95
City Highland State CA Zip Code 92346	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Printing Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. C2 Group LLC</b>		<b>Transaction ID: B1685</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 101 Constitution Avenue, NW, Ste. 900		Amount of Each Disbursement this Period 1316.80
City Washington State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Event Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	(Inkind) Partnership Attribution See Below

Full Name (Last, First, Middle Initial) <b>C. California Outdoor Graphics Service South, LLC</b>		<b>Transaction ID: B1678</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 3309 South Main Street		Amount of Each Disbursement this Period 2803.97
City Santa Ana State CA Zip Code 92707	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Signs Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4305.72</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Chambers Lopez &amp; Gaitan LLC</b>		<b>Transaction ID: B1705</b> Date of Disbursement 06 / 25 / 2007
Mailing Address P.O. Box 5539		Amount of Each Disbursement this Period 325.00
City Arlington State VA Zip Code 22205	Purpose of Disbursement Translation Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. El Rancho Verde Royal Vista Golf</b>		<b>Transaction ID: B1662</b> Date of Disbursement 04 / 24 / 2007
Mailing Address 355 East Country Club Drive		Amount of Each Disbursement this Period 5884.50
City Rialto State CA Zip Code 92377	Purpose of Disbursement Fundraising Rental Fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Maria Isolina Espinal</b>		<b>Transaction ID: B1673</b> Date of Disbursement 05 / 09 / 2007
Mailing Address 18384 Timko Lane		Amount of Each Disbursement this Period 500.00
City Germantown State MD Zip Code 20874	Purpose of Disbursement Fundraising Entertainment Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53  Actual Vendor

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6709.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Inland Empire Hispanic News</b>		<b>Transaction ID: B1672</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 1558 North Waterman Avenue, Suite D		Amount of Each Disbursement this Period 167.92
City San Bernardino State CA Zip Code 92404	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Advertising Candidate Name	Category/Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JMM Associates</b>		<b>Transaction ID: B1665</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 800 4th Street, SW # S720		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JMM Associates</b>		<b>Transaction ID: B1688</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 800 4th Street, SW # S720		Amount of Each Disbursement this Period 3500.00
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Consulting Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7167.92
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. JMM Associates</b>		<b>Transaction ID: B1708</b> Date of Disbursement 06 / 27 / 2007
Mailing Address 800 4th Street, SW # S720		Amount of Each Disbursement this Period 3500.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20024	003 Category/Type	
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Lefty's Sports Outfitter, Inc.</b>		<b>Transaction ID: B1660</b> Date of Disbursement 04 / 18 / 2007
Mailing Address 347 La Cadena Drive		Amount of Each Disbursement this Period 2111.90 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Colton State CA Zip Code 92324	003 Category/Type	
Purpose of Disbursement Campaign Hats & T-Shirts Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Lefty's Sports Outfitter, Inc.</b>		<b>Transaction ID: B1689</b> Date of Disbursement 05 / 29 / 2007
Mailing Address 347 La Cadena Drive		Amount of Each Disbursement this Period 1377.31 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Colton State CA Zip Code 92324	006 Category/Type	
Purpose of Disbursement Campaign Signs Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>6989.21</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Joseph Macias</b>		<b>Transaction ID: B1652</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 64.16
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Joseph Macias</b>		<b>Transaction ID: B1653</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 54.64
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Joseph Macias</b>		<b>Transaction ID: B1663</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 96.53
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Decorations	Candidate Name	003 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	215.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Joseph Macias</b>		<b>Transaction ID: B1670</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 99.75
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Campaign Stationery Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Joseph Macias</b>		<b>Transaction ID: B1687</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 154.39
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Office Supplies Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Joseph Macias</b>		<b>Transaction ID: B1699</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 800 4th Street, SW, #5720		Amount of Each Disbursement this Period 98.25
City Washington State DC Zip Code 20024	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Postage Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	352.39
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. The National Democratic Club</b>		<b>Transaction ID: B1698</b> Date of Disbursement 06 / 08 / 2007
Mailing Address 30 Ivy Street, SE		Amount of Each Disbursement this Period 1554.63
City Washington State DC Zip Code 20003-4071	Purpose of Disbursement Fundraising Catering Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. National Orange Show, Inc.</b>		<b>Transaction ID: B1679</b> Date of Disbursement 05 / 14 / 2007
Mailing Address 689 South E Street		Amount of Each Disbursement this Period 343.98
City San Bernardino State CA Zip Code 92408	Purpose of Disbursement Fundraiser Equipment Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. NJB &amp; Associates</b>		<b>Transaction ID: B1666</b> Date of Disbursement 05 / 03 / 2007
Mailing Address 7485 Eucalyptus Drive		Amount of Each Disbursement this Period 3000.00
City Highland State CA Zip Code 92346	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>4898.61</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. NJB &amp; Associates</b>		<b>Transaction ID: B1694</b> Date of Disbursement 06 / 01 / 2007
Mailing Address 7485 Eucalyptus Drive		Amount of Each Disbursement this Period 3000.00
City Highland State CA Zip Code 92346	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>B. NJB &amp; Associates</b>		<b>Transaction ID: B1709</b> Date of Disbursement 06 / 27 / 2007
Mailing Address 7485 Eucalyptus Drive		Amount of Each Disbursement this Period 3000.00
City Highland State CA Zip Code 92346	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial) <b>C. Olson, Hagel &amp; Fishburn, LLP</b>		<b>Transaction ID: B1658</b> Date of Disbursement 04 / 13 / 2007
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period 3009.96
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Legal & Reporting Services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	9009.96
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)



# 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Olson, Hagel &amp; Fishburn, LLP</b>		<b>Transaction ID: B1680</b> Date of Disbursement 05 / 15 / 2007
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period 3369.65
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Legal & Reporting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>B. Olson, Hagel &amp; Fishburn, LLP</b>		<b>Transaction ID: B1700</b> Date of Disbursement 06 / 15 / 2007
Mailing Address 555 Capitol Mall, Suite 1425		Amount of Each Disbursement this Period 3244.48
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Legal & Reporting Services Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 001		

Full Name (Last, First, Middle Initial) <b>C. Quantum Management Services</b>		<b>Transaction ID: B1659</b> Date of Disbursement 04 / 13 / 2007
Mailing Address 144 North 19th Street		Amount of Each Disbursement this Period 10000.00
City Montebello State CA Zip Code 90640	Purpose of Disbursement Campaign Management Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Category/Type: 003		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	16614.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Quantum Management Services</b>		<b>Transaction ID: B1683</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address 144 North 19th Street		Amount of Each Disbursement this Period 10000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Montebello State CA Zip Code 90640	Purpose of Disbursement Fundraising Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ross Communications, Inc.</b>		<b>Transaction ID: B1674</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 9 / 2 0 0 7
Mailing Address 1700 L Street		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Campaign Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ross Communications, Inc.</b>		<b>Transaction ID: B1702</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 1700 L Street		Amount of Each Disbursement this Period 5000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Sacramento State CA Zip Code 95814	Purpose of Disbursement Campaign Consulting Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	20000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. The Trophy House</b>		<b>Transaction ID: B1655</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 121 East Highland Avenue		Amount of Each Disbursement this Period 334.80 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City San Bernardino State CA Zip Code 92404	Purpose of Disbursement Fundraiser Trophies Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Carlos Uribe dba Uribe Printing</b>		<b>Transaction ID: B1676</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address 2900 Adams Street, Suite #A-20		Amount of Each Disbursement this Period 413.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Riverside State CA Zip Code 92504	Purpose of Disbursement Fundraising Printing Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. U.S. Bank</b>		<b>Transaction ID: B1648</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 843.15 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Meals with Constituents Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1591.13
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Cafe Milano</b>		<b>Transaction ID: S176</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 3251 Prospect Street, NW		Amount of Each Disbursement this Period 291.08 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20007	Purpose of Disbursement Meals with Constituents Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. J C Enterprises, Inc., dba Hunan Dynasty Restaurant</b>		<b>Transaction ID: S177</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address 215 Pennsylvania Avenue, SE, 2nd Floor		Amount of Each Disbursement this Period 221.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20003	Purpose of Disbursement Meals with Constituents Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. U.S. Bank</b>		<b>Transaction ID: B1649</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 47.25 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Travel Expenses Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 002

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	47.25
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

<b>A. U.S. Bank</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 790408 City St. Louis State MO Zip Code 63179 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B1650</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 1122.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
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<b>B. Federal Express</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: S178</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 6 / 2 0 0 7 Amount of Each Disbursement this Period 1122.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
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<b>C. U.S. Bank</b> Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 790408 City St. Louis State MO Zip Code 63179 Purpose of Disbursement Meals with Constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: B1667</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7 Amount of Each Disbursement this Period 264.18 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
--	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1386.67
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		<b>Transaction ID: B1668</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 2551.62
City St. Louis State MO Zip Code 63179	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Catering Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Frontera-Buckhead</b>		<b>Transaction ID: S179</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 4279 Roswell Road		Amount of Each Disbursement this Period 1503.62
City Atlanta State GA Zip Code 30342	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Catering Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

Full Name (Last, First, Middle Initial) <b>C. J C Enterprises, Inc., dba Hunan Dynasty Restaurant</b>		<b>Transaction ID: S180</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 215 Pennsylvania Avenue, SE, 2nd Floor		Amount of Each Disbursement this Period 1082.60
City Washington State DC Zip Code 20003	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Catering Candidate Name	003 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2551.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		<b>Transaction ID: B1669</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 903.24	
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Candidate Travel Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Delta Airlines</b>		<b>Transaction ID: S181</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7	
Mailing Address 580 Anton Blvd.		Amount of Each Disbursement this Period 531.79	
City Costa Mesa State CA Zip Code 92626	Purpose of Disbursement Candidate Travel Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. U.S. Bank</b>		<b>Transaction ID: B1695</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7	
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 210.69	
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Meals with Constituents Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1113.93
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. U.S. Bank</b>		<b>Transaction ID: B1696</b> Date of Disbursement 06 / 06 / 2007
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 589.28 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Fundraising Catering Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. 701 Restaurant</b>		<b>Transaction ID: S182</b> Date of Disbursement 06 / 06 / 2007
Mailing Address 701 Pennsylvania Avenue		Amount of Each Disbursement this Period 589.68 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
City Washington State DC Zip Code 20004	Purpose of Disbursement Fundraising Catering Candidate Name Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. U.S. Bank</b>		<b>Transaction ID: B1697</b> Date of Disbursement 06 / 06 / 2007
Mailing Address P.O. Box 790408		Amount of Each Disbursement this Period 43.05 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City St. Louis State MO Zip Code 63179	Purpose of Disbursement Internet Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	632.33
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster - San Bernardino</b>		<b>Transaction ID: B1701</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7
Mailing Address 390 West 5th Street		Amount of Each Disbursement this Period 334.00
City San Bernardino State CA Zip Code 92401	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Fundraising Postage Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon California</b>		<b>Transaction ID: B1656</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 9688		Amount of Each Disbursement this Period 214.78
City Mission Hills State CA Zip Code 91346	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Phone Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon California</b>		<b>Transaction ID: B1706</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address P.O. Box 9688		Amount of Each Disbursement this Period 361.39
City Mission Hills State CA Zip Code 91346	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	
Purpose of Disbursement Phone Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	910.17
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		<b>Transaction ID: B1664</b> Date of Disbursement 05 / 02 / 2007
Mailing Address P.O. Box 9622		Amount of Each Disbursement this Period 190.32 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mission Hills State CA Zip Code 91346-9622		
Purpose of Disbursement Phone Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>		<b>Transaction ID: B1693</b> Date of Disbursement 05 / 30 / 2007
Mailing Address P.O. Box 9622		Amount of Each Disbursement this Period 189.69 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mission Hills State CA Zip Code 91346-9622		
Purpose of Disbursement Phone Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>		<b>Transaction ID: B1710</b> Date of Disbursement 06 / 29 / 2007
Mailing Address P.O. Box 9622		Amount of Each Disbursement this Period 191.40 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Mission Hills State CA Zip Code 91346-9622		
Purpose of Disbursement Phone Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	571.41
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	89394.15

**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 Joe Baca

Full Name (Last, First, Middle Initial) <b>A. Friends of Jeremy Baca</b>		<b>Transaction ID: B1657</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address P.O. Box 1815		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Colton State CA Zip Code 92324	Purpose of Disbursement Contribution to Non Federal Committee Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Carney for Congress</b>		<b>Transaction ID: B1707</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address P.O. Box A		Amount of Each Disbursement this Period 2000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Clarks Summit State PA Zip Code 18411	Purpose of Disbursement Contribution Candidate Name Chris Carney Category/Type 011	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Democratic Congressional Campaign Committee</b>		<b>Transaction ID: B1704</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 7
Mailing Address 430 South Capitol Street, SE		Amount of Each Disbursement this Period 25000.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
City Washington State DC Zip Code 20003	Purpose of Disbursement Excess Funds to National Party Comm. Candidate Name Category/Type 011	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	29000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

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

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

FOR LINE NUMBER:  
(check only one)

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<input 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 Joe Baca

<p><b>A.</b> Full Name (Last, First, Middle Initial) Esperanza Scholarship Foundation</p> <p>Mailing Address 1757 South Euclid Avenue</p> <p>City Ontario State CA Zip Code 91762</p> <p>Purpose of Disbursement Civic Donation</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><b>Transaction ID:</b> B1684</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="21"/> <input type="text" value="21"/> / <input type="text" value="2007"/> <input type="text" value="2007"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Jenny Oropeza for Congress</p> <p>Mailing Address 6380 Wilshire Blvd., #1612</p> <p>City Los Angeles State CA Zip Code 90048</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Jenny Oropeza</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 37</p>		<p><b>Transaction ID:</b> B1682</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="05"/> / <input type="text" value="16"/> <input type="text" value="16"/> / <input type="text" value="2007"/> <input type="text" value="2007"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

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

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

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

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
 Friends of Joe Baca

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Arum Group, LLC	Nature of Debt (Purpose): Fundraising Consulting
Mailing Address 625 Third Street, NE, Suite 2	
City State ZIP Code Washington DC 20002	

Outstanding Balance Beginning This Period 3500.00	<b>Transaction ID: D48</b>	
Amount Incurred This Period 0.00	Payment This Period 3500.00	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor California Outdoor Graphics Service South, LLC	Nature of Debt (Purpose): Lawn Signs
Mailing Address 3309 South Main Street	
City State ZIP Code Santa Ana CA 92707	

Outstanding Balance Beginning This Period 2803.97	<b>Transaction ID: D20</b>	
Amount Incurred This Period 0.00	Payment This Period 2803.97	Outstanding Balance at Close of This Period 0.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Ross Communications, Inc.	Nature of Debt (Purpose): Campaign Consulting
Mailing Address 1700 L Street	
City State ZIP Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 25000.00	<b>Transaction ID: D9</b>	
Amount Incurred This Period 15000.00	Payment This Period 10000.00	Outstanding Balance at Close of This Period 30000.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>30000.00</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

(Use separate schedule(s) for each numbered line)	PAGE 78 / 80
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of Joe Baca

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Ross Communications, Inc.	Nature of Debt (Purpose): Television Production
Mailing Address 1700 L Street	
City State ZIP Code Sacramento CA 95814	

Outstanding Balance Beginning This Period 10000.00	<b>Transaction ID: D43</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 10000.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor Twenty-First Century Group, Inc.	Nature of Debt (Purpose): Fundraising Reception
Mailing Address 434 New Jersey Avenue, SE	
City State ZIP Code Washington DC 20003	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D40</b>	
Amount Incurred This Period 1750.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1750.00

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Candidate Travel
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 47.25	<b>Transaction ID: D24</b>	
Amount Incurred This Period 856.68	Payment This Period 47.25	Outstanding Balance at Close of This Period 856.68

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	12606.68
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	▶	

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

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
 Friends of Joe Baca

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Civic Donation
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D27</b>	
Amount Incurred This Period 400.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 400.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Meals With Constituents
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 843.15	<b>Transaction ID: D31</b>	
Amount Incurred This Period 121.41	Payment This Period 843.15	Outstanding Balance at Close of This Period 121.41

<b>C.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Staff Travel
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D35</b>	
Amount Incurred This Period 30.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 30.00

<b>1) SUBTOTALS</b> This Period This Page (optional).....	<b>551.41</b>
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

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

(Use separate schedule(s) for each numbered line)	PAGE 80 / 80
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 Friends of Joe Baca

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Fundraising Shipping
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 1122.49	<b>Transaction ID: D49</b>	
Amount Incurred This Period 0.00	Payment This Period 1122.49	Outstanding Balance at Close of This Period 0.00

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor U.S. Bank	Nature of Debt (Purpose): Receptions
Mailing Address P.O. Box 790408	
City State ZIP Code St. Louis MO 63179	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D50</b>	
Amount Incurred This Period 628.95	Payment This Period 0.00	Outstanding Balance at Close of This Period 628.95

1) <b>SUBTOTALS</b> This Period This Page (optional).....	628.95
2) <b>TOTALS</b> This Period (last page this line number only).....	43787.04
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	