

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

Valadao for Congress

ADDRESS (number and street)

504 Van Ness

Check if different than previously reported. (ACC)

Fresno

CA

93721

2. FEC IDENTIFICATION NUMBER ▼

C C00499392

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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

CA

21

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

/  /

through

/  /

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 Richard M Egan

Signature of Treasurer Richard M Egan

[Electronically Filed]

Date

/  /

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

Office Use Only

FEC FORM 3 (Revised 02/2003)

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Valadao for Congress**

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

	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)) ....	88375	90275
(b) Total Contribution Refunds (from Line 20(d)) .....	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	88375	90275
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	85186.36	140434.4
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	85186.36	140434.4
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	<b>136801.58</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>0</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	<b>41415.78</b>	

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**Valadao for Congress**

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	33125	35025
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals ▶	33125	35025
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	55250	55250
(d) The Candidate.....	0	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	88375	90275
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	28.65	70.5
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	88403.65	90345.5

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	85186.36	140434.4
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans .....	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS .....	1200	1200
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	86386.36	141634.4

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	134784.29
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	88403.65
25. SUBTOTAL (add Line 23 and Line 24).....	223187.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	86386.36
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	136801.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>Budles Farms</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445096</b>
City Riverdale	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer	Occupation	Sole Proprietorship
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>Ernest C Mendes</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445096.0</b>
City Riverdale	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer Budles Farms	Occupation Partner	<b>[MEMO ITEM]</b> Sole Proprietor
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) <b>Leslie Mendes</b>		Date of Receipt MM / DD / YYYY 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445096.1</b>
City Riverdale	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer BDL Farms	Occupation Partner	<b>[MEMO ITEM]</b> Sole Proprietor
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

<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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Shawn Coburn**

Mailing Address 8174 W Eucalyptus

City: Dos Palos State: CA Zip Code: 93620

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

Name of Employer: Coburn Ranch Occupation: Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2500**

Date of Receipt: 03 / 28 / 2013

**Transaction ID : SA11AI.C4445064**

Amount of Each Receipt this Period: **2500.00**

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

Mailing Address 2363 S Cedar Ave

City: Fresno State: CA Zip Code: 93725

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

Name of Employer: Donaghy Sales, LLC Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: 03 / 28 / 2013

**Transaction ID : SA11AI.C4445054**

Amount of Each Receipt this Period: **2600.00**

**C.** Full Name (Last, First, Middle Initial)  
**Edward J Donaghy**

Mailing Address 2363 S Cedar Ave

City: Fresno State: CA Zip Code: 93725

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

Name of Employer: Donaghy Sales, LLC Occupation: Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: 03 / 28 / 2013

**Transaction ID : SA11AI.C4445055**

Amount of Each Receipt this Period: **2600.00**

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

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

**7700.00**

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

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

FOR LINE NUMBER: PAGE 7 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Fagundes Dairy**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445101**

Amount of Each Receipt this Period  
**2600.00**

Partnership

**B.** Full Name (Last, First, Middle Initial)  
**Fred Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Occupation  
**Fagundes Dairy Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.66**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445101.0**

Amount of Each Receipt this Period  
**866.66**

**[MEMO ITEM]**  
 Partner

**C.** Full Name (Last, First, Middle Initial)  
**Ralph Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Occupation  
**Fagundes Dairy Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445101.1**

Amount of Each Receipt this Period  
**866.67**

**[MEMO ITEM]**  
 Partner

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

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

**2600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lloyd Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Fagundes Dairy Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445101.2**

Amount of Each Receipt this Period  
**866.67**

**[MEMO ITEM]**  
Partner

**B.** Full Name (Last, First, Middle Initial)  
**Fagundes Dairy**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445334**

Amount of Each Receipt this Period  
**2400.00**

Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Ralph Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Fagundes Dairy Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445334.0**

Amount of Each Receipt this Period  
**800.00**

**[MEMO ITEM]**  
Partner

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

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

**2400.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Lloyd Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Fagundes Dairy Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.67**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445334.1**

Amount of Each Receipt this Period  
**800.00**

**[MEMO ITEM]**  
Partner

**B.** Full Name (Last, First, Middle Initial)  
**Fred Fagundes**

Mailing Address 11158 Avenue 24

City Chowchilla State CA Zip Code 93610

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

Name of Employer Fagundes Dairy Occupation Partner

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1666.66**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445334.2**

Amount of Each Receipt this Period  
**800.00**

**[MEMO ITEM]**  
Partner

**C.** Full Name (Last, First, Middle Initial)  
**Thomas Gregory MendesTrust**

Mailing Address PO box 3044

City Visalia State CA Zip Code 93278

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

Name of Employer Ernest F. Mendes & Son Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445099**

Amount of Each Receipt this Period  
**2600.00**

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

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

**2600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Thomas Gregory MendesTrust**

Mailing Address PO box 3044

City Visalia State CA Zip Code 93278

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

Name of Employer Ernest F. Mendes & Son Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445100**

Amount of Each Receipt this Period  
**2600.00**

**B.** Full Name (Last, First, Middle Initial)  
**Gary J Kline**

Mailing Address 4114 Davis PI NW Apt 311

City Washington State DC Zip Code 20007

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

Name of Employer Express Scripts Occupation Director Gov't Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2013**

**Transaction ID : SA11AI.C4444225**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Jared Martin**

Mailing Address 1175 W Shaw

City Fresno State CA Zip Code 93711

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

Name of Employer Keller Williams Wesland Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **475**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 04 / 2013**

**Transaction ID : SA11AI.C4443297**

Amount of Each Receipt this Period  
**475.00**

Earmarked through Votesane PAC

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

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

**3325.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

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

Mailing Address P.O. Box 2713

City: Alexandria State: VA Zip Code: 22301

FEC ID number of contributing federal political committee: **C** C00484535

Name of Employer: Occupation:

Receipt For:  Primary  General  Other (specify)

Election Cycle-to-Date: 0

Date of Receipt: 02 / 25 / 2013

**Transaction ID : SA11AI.C4443297.P0**

Amount of Each Receipt this Period: 475.00

**[MEMO ITEM]**  
Total earmarked through conduit. Conduit limits not affected.

**B.** Full Name (Last, First, Middle Initial)  
**Mendes Family Farms**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Occupation:

Receipt For: 2014  Primary  General  Other (specify)

Election Cycle-to-Date: 5000

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335**

Amount of Each Receipt this Period: 2400.00

Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Darryl Mendes**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Occupation:  
BDL Farms Partner

Receipt For: 2014  Primary  General  Other (specify)

Election Cycle-to-Date: 1500

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335.0**

Amount of Each Receipt this Period: 720.00

**[MEMO ITEM]**  
Partner

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Adam Mendes**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Mendes Family Farms Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335.1**

Amount of Each Receipt this Period: 720.00

**[MEMO ITEM]**  
Partner

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

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Mendes Family Farms Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335.2**

Amount of Each Receipt this Period: 720.00

**[MEMO ITEM]**  
Partner

**C.** Full Name (Last, First, Middle Initial)  
**Ernest C Mendes**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Budles Famrs Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335.3**

Amount of Each Receipt this Period: 120.00

**[MEMO ITEM]**  
Partner

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Leslie Mendes**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: BDL Farms Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445335.4**

Amount of Each Receipt this Period: **120.00**

**[MEMO ITEM]**  
Partner

**B.** Full Name (Last, First, Middle Initial)  
**Mendes Family Farms**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5000**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445095**

Amount of Each Receipt this Period: **2600.00**

Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Adam Mendes**

Mailing Address P.O. Box 387

City: Riverdale State: CA Zip Code: 93656

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

Name of Employer: Mendes Family Farms Occupation: Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1500**

Date of Receipt: 03 / 29 / 2013

**Transaction ID : SA11AI.C4445095.0**

Amount of Each Receipt this Period: **780.00**

**[MEMO ITEM]**  
Partner

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

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

**2600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. John L. Mendes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445095.1</b>
City Riverdale	State Zip Code CA 93656	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="780.00"/>
Name of Employer Mendes Family Farms	Occupation Partner	<b>[MEMO ITEM]</b> Partner
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="1500"/>	

Full Name (Last, First, Middle Initial) <b>B. Ernest C Mendes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445095.2</b>
City Riverdale	State Zip Code CA 93656	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="130.00"/>
Name of Employer Budles Famrs	Occupation Partner	<b>[MEMO ITEM]</b> Partner
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="1500"/>	

Full Name (Last, First, Middle Initial) <b>C. Leslie Mendes</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 29 / 2013
Mailing Address P.O. Box 387		<b>Transaction ID : SA11AI.C4445095.3</b>
City Riverdale	State Zip Code CA 93656	
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="130.00"/>
Name of Employer BDL Farms	Occupation Partner	<b>[MEMO ITEM]</b> Partner
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text" value="1500"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="0.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Darryl Mendes**

Mailing Address P.O. Box 387

City Riverdale State CA Zip Code 93656

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

Name of Employer BDL Farms Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 29 / 2013**

**Transaction ID : SA11AI.C4445095.4**

Amount of Each Receipt this Period  
**780.00**

**[MEMO ITEM]**  
Partner

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

Mailing Address 227 C Street SE

City Washington State DC Zip Code 20003

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

Name of Employer Shockey Scofield Solutions, LLC Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2013**

**Transaction ID : SA11AI.C4444226**

Amount of Each Receipt this Period  
**1000.00**

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

Mailing Address 10900 Pleasant Hill Dr

City Potomac State MD Zip Code 20854

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

Name of Employer Shockey Scofield Solutions, LLC Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 13 / 2013**

**Transaction ID : SA11AI.C4444227**

Amount of Each Receipt this Period  
**1000.00**

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

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

**2000.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 58
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**James A Soares**

Mailing Address P.O. Box 459

City State Zip Code  
Traver CA 93673

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

Name of Employer Occupation  
Best Agri-Marketing, Inc President / CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 28 / 2013**

**Transaction ID : SA11AI.C4445065**

Amount of Each Receipt this Period  
**2500.00**

**B.** Full Name (Last, First, Middle Initial)  
**TLC, A California Partnership**

Mailing Address 2822 S Maple Ave

City State Zip Code  
Fresno CA 93725

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2013**

**Transaction ID : SA11AI.C4444976**

Amount of Each Receipt this Period  
**2500.00**

Partnership

**C.** Full Name (Last, First, Middle Initial)  
**Tal L Cloud**

Mailing Address 205 Trout Lake Rd

City State Zip Code  
Sanger CA 93657

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

Name of Employer Occupation  
Paper, Pulp & Film Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 25 / 2013**

**Transaction ID : SA11AI.C4444976.0**

Amount of Each Receipt this Period  
**2500.00**

**[MEMO ITEM]**  
Partner

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

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

**5000.00**

**33125.00**



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**American Bankers Association**

Mailing Address 1120 Connecticut Ave N.W.

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C** C00082834

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11C.C4445093**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Associated Builders & Contractors Political Action Committee**

Mailing Address 4250 North Fairfax Drive  
9th Floor

City Arlington State VA Zip Code 22203

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11C.C4445102**

Amount of Each Receipt this Period  
 2500.00

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

Mailing Address 8500 Keystone Crossing

City Indianapolis State IN Zip Code 46240

FEC ID number of contributing federal political committee. **C** C00309120

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2013

**Transaction ID : SA11C.C4432515**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**California Dairies Federal PAC**

Mailing Address 475 S Tegner Rd

City State Zip Code  
Turlock CA 95380

FEC ID number of contributing federal political committee. **C** C00349746

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11C.C4445097**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Cigar - PAC**

Mailing Address 818 Connecticut Ave NW  
Suite 200

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00121350

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 27 / 2013

**Transaction ID : SA11C.C4445436**

Amount of Each Receipt this Period  
250.00

In-Kind: Boxes of cigars

**C.** Full Name (Last, First, Middle Initial)  
**Edison International PAC**

Mailing Address 2244 Walnut Grove Ave

City State Zip Code  
Rosemead CA 91770

FEC ID number of contributing federal political committee. **C** C00019653

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445060**

Amount of Each Receipt this Period  
2000.00

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

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

7250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Every Republican is Crucial ERIC PAC**

Mailing Address 25 E. Main St. Suite 200

City	State	Zip Code
Richmond	VA	23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 11 / 2013

**Transaction ID : SA11C.C444127**

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
**Every Republican is Crucial ERIC PAC**

Mailing Address 25 E. Main St. Suite 200

City	State	Zip Code
Richmond	VA	23219

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11C.C444979**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address P.O. Box 2485

City	State	Zip Code
Springfield	VA	22152

FEC ID number of contributing federal political committee. **C** C00497677

Name of Employer	Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445056**

Amount of Each Receipt this Period  
1000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

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

Mailing Address 101 Constitution Ave., NW  
Suite 500 W.

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00096156

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2013

**Transaction ID : SA11C.C4443565**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**JEFF PAC**

Mailing Address 2150 River Plaza Dr. #150

City Sacramento State CA Zip Code 95833

FEC ID number of contributing federal political committee. **C** C00489112

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11C.C4444981**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**Jobs, Economy and Budget Fund**

Mailing Address P.O. Box 30844

City Bethesda State MD Zip Code 20824

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 29 / 2013

**Transaction ID : SA11C.C4445092**

Amount of Each Receipt this Period  
 5000.00

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 21 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Kevin McCarthy for Congress**

Mailing Address P.O. Box 12667

City State Zip Code  
Bakersfield CA 93389

FEC ID number of contributing federal political committee. **C C00420935**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445052**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**Majority Committee PAC**

Mailing Address P.O. Box 10134

City State Zip Code  
Bakersfield CA 93389

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445053**

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
**National Beer Wholesalers Association PAC**

Mailing Address 1101 King Street Suite 600

City State Zip Code  
Alexandria VA 22314

FEC ID number of contributing federal political committee. **C C00144766**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 26 / 2013

**Transaction ID : SA11C.C4445011**

Amount of Each Receipt this Period  
2000.00

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

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

9000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A. National Chicken Council PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1015 15th St NW #930  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C** C00034272  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2013  
**Transaction ID : SA11C.C4445059**  
 Amount of Each Receipt this Period  
 1000.00

**B. NRA Political Victory Fund**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11250 Waples Mill Road  
 City Fairfax State VA Zip Code 22030  
 FEC ID number of contributing federal political committee. **C** C00053553  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2013  
**Transaction ID : SA11C.C4444958**  
 Amount of Each Receipt this Period  
 1000.00

**C. PPG Better Government Team**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One PPG Place  
 40 East  
 City Pittsburgh State PA Zip Code 15272  
 FEC ID number of contributing federal political committee. **C** C00034298  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 23 / 2013  
**Transaction ID : SA11C.C4444957**  
 Amount of Each Receipt this Period  
 1000.00

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

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

Mailing Address 1301 K Street NW, Suite 800 West

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00107235**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 04 / 2013

**Transaction ID : SA11C.C4443298**

Amount of Each Receipt this Period  
2000.00

**B.** Full Name (Last, First, Middle Initial)  
**PuroPAC Inc**

Mailing Address 300 New Jersey Ave NW Suite 900

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C C00507053**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445057**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 1100 Wilson Blvd Suite 1500

City Arlington State VA Zip Code 22209

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 03 / 07 / 2013

**Transaction ID : SA11C.C4443553**

Amount of Each Receipt this Period  
1000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Republican Main Street PAC**

Mailing Address 1220 L Street NW  
Suite 100-263

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11C.C444978**

Amount of Each Receipt this Period  
 1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Republican Main Street PAC**

Mailing Address 1220 L Street NW  
Suite 100-263

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 02 / 26 / 2013

**Transaction ID : SA11C.C4443242**

Amount of Each Receipt this Period  
 1000.00

**C.** Full Name (Last, First, Middle Initial)  
**The Boeing Company PAC**

Mailing Address 1200 Wilson Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 07 / 2013

**Transaction ID : SA11C.C4443560**

Amount of Each Receipt this Period  
 1000.00

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

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

3000.00



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

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

FOR LINE NUMBER: PAGE 25 OF 58  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

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

Mailing Address P.O. Box 11586

City Washington State DC Zip Code 20008

FEC ID number of contributing federal political committee. **C** C00433060

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 25 / 2013

**Transaction ID : SA11C.C444980**

Amount of Each Receipt this Period  
 2500.00

**B.** Full Name (Last, First, Middle Initial)  
**United Technologies**

Mailing Address 1101 Pennsylvania Ave NW  
10th FL

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00035683

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445058**

Amount of Each Receipt this Period  
 1000.00

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

Mailing Address 55 Glenlake Pkwy NE

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00064766

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11C.C4444228**

Amount of Each Receipt this Period  
 1000.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 58
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A.** Full Name (Last, First, Middle Initial)  
**Verizon Wireless Good Government Club**

Mailing Address 1300 I St NW  
4th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00186288

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 28 / 2013

**Transaction ID : SA11C.C4445070**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
**Wine & Spirits Wholesalers of America PAC**

Mailing Address 805 Fifteenth St, NW Suite 430

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00147173

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2013

**Transaction ID : SA11C.C4444229**

Amount of Each Receipt this Period  
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

55250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. George Andrews</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013	
Mailing Address 665 Petter Dr Apt A			Amount of Each Disbursement this Period 350.00	
City Hanford	State CA	Zip Code 93230	Transaction ID : SB17.E1536878	
Purpose of Disbursement Communications consultant - Bonus		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>B. Michael Bowers</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013	
Mailing Address 1600 Abrazo St			Amount of Each Disbursement this Period 350.00	
City Bakersfield	State CA	Zip Code 93306	Transaction ID : SB17.E1536880	
Purpose of Disbursement District Consultant - Bonus		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) <b>c. Terra Brusseau</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013	
Mailing Address 8840 N Fuller Ave			Amount of Each Disbursement this Period 624.00	
City Fresno	State CA	Zip Code 93720	Transaction ID : SB17.E1536926	
Purpose of Disbursement Swearing in expenses		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1324.00
<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)		PAGE 28 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Eagle Limo</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2013
Mailing Address 4380 King St Apt 310		Amount of Each Disbursement this Period 450.00
City Alexander	State VA	Zip Code 22302
Purpose of Disbursement Travel during swearing in events	Category/ Type 002	
Candidate Name	Transaction ID : SB17.E1536926.0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Sub-vendor itemization of Terra Brusseau	

Full Name (Last, First, Middle Initial) <b>B. Congressional Liquor &amp; Deli</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 404 1st Street Southeast		Amount of Each Disbursement this Period 174.00
City Washington	State DC	Zip Code 20003
Purpose of Disbursement Beverages during swearing in events	Category/ Type 001	
Candidate Name	Transaction ID : SB17.E1536926.1	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Sub-vendor itemization of Terra Brusseau	

Full Name (Last, First, Middle Initial) <b>C. Terra Brusseau</b>		Date of Disbursement MM / DD / YYYY 03 / 01 / 2013
Mailing Address 8840 N Fuller Ave		Amount of Each Disbursement this Period 1000.00
City Fresno	State CA	Zip Code 93720
Purpose of Disbursement Finance Director Services	Category/ Type 001	
Candidate Name	Transaction ID : SB17.E1540215	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1000.00
<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)	PAGE 29 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Terra Brusseau</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2013
Mailing Address 8840 N Fuller Ave		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17.E1539690</b>
City Fresno	State CA	
Zip Code 93720	Purpose of Disbursement Finance Director Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Capitol Development Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 26 / 2013
Mailing Address 1127 11th Street Suite 210		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.E1540167</b>
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Fundraising Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Capitol Development Strategies</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2013
Mailing Address 1127 11th Street Suite 210		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.E1538677</b>
City Sacramento	State CA	
Zip Code 95814	Purpose of Disbursement Fundraising Consultant	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1500.00
<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)	PAGE 30 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 51.79 <b>Transaction ID : SB17.E1540555</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Lunch for candidate		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2013
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 88.85 <b>Transaction ID : SB17.E1540731</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Meals for candidate and staff		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>c. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 3465.78 <b>Transaction ID : SB17.E1536977</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Food & beverages for swearing in events		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3606.42
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 58			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Capitol Hill Club</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013
Mailing Address 300 First St., SE			Amount of Each Disbursement this Period 2519.17 <b>Transaction ID : SB17.E1536983</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Swearing in expenses		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Congressional Liquor &amp; Deli</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013
Mailing Address 404 1st Street Southeast			Amount of Each Disbursement this Period 104.25 <b>Transaction ID : SB17.E1536983.0</b>
City Washington	State DC	Zip Code 20003	
Purpose of Disbursement Beverages during swearing in events		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		<b>[MEMO ITEM]</b> Sub-vendor itemization of Capitol Hill Club

Full Name (Last, First, Middle Initial) <b>C. Walmart - Washington</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 01 / 2013
Mailing Address 6303 Richmond Way			Amount of Each Disbursement this Period 107.63 <b>Transaction ID : SB17.E1536983.1</b>
City Alexandria	State VA	Zip Code 22306	
Purpose of Disbursement Swearing in expenses		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____	District: _____		<b>[MEMO ITEM]</b> Sub-vendor itemization of Capitol Hill Club

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2519.17
<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)	PAGE 32 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Walmart - Washington</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 6303 Richmond Way		Amount of Each Disbursement this Period 41.76
City Alexandria	State VA	
Zip Code 22306	Purpose of Disbursement Gift bags for swearingin events	<b>Transaction ID : SB17.E1536983.2</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Capitol Hill Club
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Costco - Washington</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2013
Mailing Address 1200 S Fern St		Amount of Each Disbursement this Period 866.99
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Beverages & snacks during swearing in events	<b>Transaction ID : SB17.E1536983.3</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Capitol Hill Club
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sonoma Restaurant Wine Bar</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2013
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1197.00
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Lunch expense for swearingin events	<b>Transaction ID : SB17.E1536983.4</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Capitol Hill Club
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Harris Teeter</b>		Date of Disbursement MM / DD / YYYY 01 / 04 / 2013
Mailing Address 1350 Potomac Ave SE		Amount of Each Disbursement this Period 163.09
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Beverages & snacks during swearing in events	Transaction ID : <b>SB17.E1536983.5</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Capitol Hill Club
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Safeway - Washington</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2013
Mailing Address 5980 Kingstowne Towne Ctr		Amount of Each Disbursement this Period 38.45
City Alexandria	State VA	
Zip Code 22315	Purpose of Disbursement Beverages & snacks during swearing in events	Transaction ID : <b>SB17.E1536983.6</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Capitol Hill Club
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Chase - Visa</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 4453.78
City New York	State NY	
Zip Code 10017	Purpose of Disbursement See memo items below	Transaction ID : <b>SB17.E1537124</b>
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4453.78
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Constant Contact CTC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2012
Mailing Address 1601 Trapelo Road		Amount of Each Disbursement this Period 20.00
City Waltham State MA Zip Code 02451	Purpose of Disbursement Email Marketing 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.E1537124.0</b> <b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2012
Mailing Address 300 First St., SE		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20003	Purpose of Disbursement Membership Fee 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.E1537124.1</b> <b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Woolgrowers Restaurant</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2012
Mailing Address 620 East 19th Street		Amount of Each Disbursement this Period 71.65
City Bakersfield State CA Zip Code 93305	Purpose of Disbursement Meal for candidate and staff 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>Transaction ID : SB17.E1537124.2</b> <b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 5175 E Clinton Ave		Amount of Each Disbursement this Period 395.60
City Fresno	State CA	
Zip Code 93727	Purpose of Disbursement Air travel for staff	<b>Transaction ID : SB17.E1537124.3</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 5175 E Clinton Ave		Amount of Each Disbursement this Period 395.60
City Fresno	State CA	
Zip Code 93727	Purpose of Disbursement Air travel for staff	<b>Transaction ID : SB17.E1537124.4</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 5175 E Clinton Ave		Amount of Each Disbursement this Period 395.60
City Fresno	State CA	
Zip Code 93727	Purpose of Disbursement Air travel for staff	<b>Transaction ID : SB17.E1537124.5</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jet Blue Airways</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2012
Mailing Address 5175 E Clinton Ave		Amount of Each Disbursement this Period 395.60
City Fresno	State CA	
Zip Code 93727	Purpose of Disbursement Air travel for staff	<b>Transaction ID : SB17.E1537124.6</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Residence In - DC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2012
Mailing Address 333 E Street Southwest		Amount of Each Disbursement this Period 1679.73
City Washington	State DC	
Zip Code 20024	Purpose of Disbursement Hotels for candidate, and candidate's staff	<b>Transaction ID : SB17.E1537124.7</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Johnny's Half Shell</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 21 / 2012
Mailing Address 400 North Capitol St NW		Amount of Each Disbursement this Period 500.00
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meal for Candidate and staff while travelling in DC	<b>Transaction ID : SB17.E1537124.8</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Clyde's of Gallery Place</b>			Date of Disbursement M M / D D / Y Y Y Y 12 / 27 / 2012
Mailing Address 707 7th Street NW			Amount of Each Disbursement this Period 500.00
City Washington	State DC	Zip Code 20001	Transaction ID : SB17.E1537124.9
Purpose of Disbursement Meal for Candidate and staff while travelling in DC		Category/ Type 002	
Candidate Name			[MEMO ITEM] Sub-vendor itemization of Chase - Visa
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Chase - Visa</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013
Mailing Address 270 Park Avenue Floor 12			Amount of Each Disbursement this Period 500.00
City New York	State NY	Zip Code 10017	Transaction ID : SB17.E1537126
Purpose of Disbursement See memo items below		Category/ Type	
Candidate Name			[MEMO ITEM] Sub-vendor itemization of Chase - Visa
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Eagle Limo</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 03 / 2013
Mailing Address 4380 King St Apt 310			Amount of Each Disbursement this Period 500.00
City Alexander	State VA	Zip Code 22302	Transaction ID : SB17.E1537126.0
Purpose of Disbursement Travel for Candidate and staff, while in DC		Category/ Type 002	
Candidate Name			[MEMO ITEM] Sub-vendor itemization of Chase - Visa
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<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)		PAGE 38 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial)  
**A. Chase - Visa**

Mailing Address 270 Park Avenue Floor 12

City New York State NY Zip Code 10017

Purpose of Disbursement See memo items below

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 11 / 2013

Amount of Each Disbursement this Period: 16344.65

Transaction ID : SB17.E1537159

Category/Type

Full Name (Last, First, Middle Initial)  
**B. Constant Contact CTC**

Mailing Address 1601 Trapelo Road

City Waltham State MA Zip Code 02451

Purpose of Disbursement Email Marketing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 06 / 2013

Amount of Each Disbursement this Period: 20.00

Transaction ID : SB17.E1537159.0

Category/Type: 001

**[MEMO ITEM]**  
Sub-vendor itemization of Chase - Visa

Full Name (Last, First, Middle Initial)  
**c. Congressional Liquor & Deli**

Mailing Address 404 1st Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement Beverages for swearing in events

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 04 / 2013

Amount of Each Disbursement this Period: 70.49

Transaction ID : SB17.E1537159.1

Category/Type: 001

**[MEMO ITEM]**  
Sub-vendor itemization of Chase - Visa

**SUBTOTAL** of Disbursements This Page (optional) ..... 16344.65

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 39 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn Capitol</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 634.23
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	<b>Transaction ID : SB17.E1537159.10</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Carmine's</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2013
Mailing Address 425 7th Street NW		Amount of Each Disbursement this Period 5087.22
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Meal for Candidate and staff while travelling in DC	<b>Transaction ID : SB17.E1537159.11</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Johnny's Half Shell</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2013
Mailing Address 400 North Capitol St NW		Amount of Each Disbursement this Period 6426.08
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Meal for Candidate and staff while travelling in DC	<b>Transaction ID : SB17.E1537159.2</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Fugazzis</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2013
Mailing Address 601 West 7th St		Amount of Each Disbursement this Period 148.25
City Hanford	State CA	
Zip Code 93232	Purpose of Disbursement Meal with Candidate and Staff	<b>Transaction ID : SB17.E1537159.3</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Holiday Inn Capitol</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 545.04
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	<b>Transaction ID : SB17.E1537159.4</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn Capitol</b>		Date of Disbursement MM / DD / YYYY 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 545.04
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	<b>Transaction ID : SB17.E1537159.5</b>
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn Capitol</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 408.78
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	Transaction ID : SB17.E1537159.6
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Holiday Inn Capitol</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 545.04
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	Transaction ID : SB17.E1537159.7
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Holiday Inn Capitol</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 1369.44
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Hotels for candidate, and candidate's staff	Transaction ID : SB17.E1537159.8
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Holiday Inn Capitol</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 06 / 2013
Mailing Address 550 C Street SW		Amount of Each Disbursement this Period 545.04
City Washington	State DC	Zip Code 20004
Purpose of Disbursement Hotels for candidate, and candidate's staff	Category/Type 002	
Candidate Name	Transaction ID : SB17.E1537159.9	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Sub-vendor itemization of Chase - Visa	

Full Name (Last, First, Middle Initial) <b>B. Chase - Visa</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2013
Mailing Address 270 Park Avenue Floor 12		Amount of Each Disbursement this Period 1799.28
City New York	State NY	Zip Code 10017
Purpose of Disbursement See memo items below	Category/Type 001	
Candidate Name	Transaction ID : SB17.E1540429	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Sub-vendor itemization of Chase - Visa	

Full Name (Last, First, Middle Initial) <b>C. United Air</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2013
Mailing Address 77 W. Wacker Drive		Amount of Each Disbursement this Period 168.00
City Chicago	State IL	Zip Code 60666
Purpose of Disbursement Airfare for candidate travel	Category/Type 002	
Candidate Name	Transaction ID : SB17.E1540429.0	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	[MEMO ITEM] Sub-vendor itemization of Chase - Visa	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1799.28
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. United Air</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2013
Mailing Address 77 W. Wacker Drive		Amount of Each Disbursement this Period 79.00
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Airfare expense for candidate travel	Category/Type 002	<b>Transaction ID : SB17.E1540429.1</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Air</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2013
Mailing Address 77 W. Wacker Drive		Amount of Each Disbursement this Period 602.90
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Airfare for candidate travel	Category/Type 002	<b>Transaction ID : SB17.E1540429.2</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

Full Name (Last, First, Middle Initial) <b>C. United Air</b>		Date of Disbursement MM / DD / YYYY 01 / 21 / 2013
Mailing Address 77 W. Wacker Drive		Amount of Each Disbursement this Period 178.91
City Chicago	State IL Zip Code 60666	
Purpose of Disbursement Airfare for candidate travel	Category/Type 002	<b>Transaction ID : SB17.E1540429.3</b>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Chase - Visa
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial)  
**A. Capitol Hill Club**

Mailing Address 300 First St., SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Swearing in event expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 31 / 2013

Amount of Each Disbursement this Period: 450.00

Transaction ID : SB17.E1540429.4

**[MEMO ITEM]**  
Sub-vendor itemization of Chase - Visa

Category/Type: 001

Full Name (Last, First, Middle Initial)  
**B. Hotels.com**

Mailing Address 10440 North Central Expressway Suite 400

City Dallas State TX Zip Code 75231

Purpose of Disbursement Hotel while in Washington

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 21 / 2013

Amount of Each Disbursement this Period: 228.51

Transaction ID : SB17.E1540429.5

**[MEMO ITEM]**  
Sub-vendor itemization of Chase - Visa

Category/Type: 002

Full Name (Last, First, Middle Initial)  
**C. Tunne Inn Inc**

Mailing Address 331 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Meal while in Washington

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 01 / 13 / 2013

Amount of Each Disbursement this Period: 91.96

Transaction ID : SB17.E1540429.6

**[MEMO ITEM]**  
Sub-vendor itemization of Chase - Visa

Category/Type: 002

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Cigar - PAC</b>		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2013
Mailing Address 818 Connecticut Ave NW Suite 200		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB17.C4445436</b>
City Washington State DC Zip Code 20006	Purpose of Disbursement In Kind Boxes of cigars	
Candidate Name <b>Cigar - PAC</b>	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DirectFile</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address 504 Van Ness Ave		Amount of Each Disbursement this Period 1222.25 <b>Transaction ID : SB17.E1540522</b>
City Fresno State CA Zip Code 93721	Purpose of Disbursement Accounting Services	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. DirectFile</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address 504 Van Ness Ave		Amount of Each Disbursement this Period 1432.15 <b>Transaction ID : SB17.E1540520</b>
City Fresno State CA Zip Code 93721	Purpose of Disbursement Accounting Services	
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2904.40
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. DirectFile</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address 504 Van Ness Ave		Amount of Each Disbursement this Period 2111.25 <b>Transaction ID : SB17.E1536866</b>
City Fresno	State CA	
Zip Code 93721	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. DirectFile</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address 504 Van Ness Ave		Amount of Each Disbursement this Period 1508.75 <b>Transaction ID : SB17.E1536868</b>
City Fresno	State CA	
Zip Code 93721	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>c. eFundraising Connections</b>		Date of Disbursement MM / DD / YYYY 03 / 29 / 2013
Mailing Address 2131 Capitol Ave. Suite 306		Amount of Each Disbursement this Period 326.00 <b>Transaction ID : SB17.E1540803</b>
City Sacramento	State CA	
Zip Code 95816	Purpose of Disbursement Credit card processing fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3946.00
<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)		PAGE 47 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tal Eslick</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013	
Mailing Address 1532 N Sanders Ave			Amount of Each Disbursement this Period 350.00	
City Clovis	State CA	Zip Code 93619	Transaction ID : SB17.E1536874	
Purpose of Disbursement Win bonus		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Tal Eslick</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013	
Mailing Address 1532 N Sanders Ave			Amount of Each Disbursement this Period 1051.00	
City Clovis	State CA	Zip Code 93619	Transaction ID : SB17.E1536971	
Purpose of Disbursement Congressional Retreat for GOP Conference Members		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Congressional Institute, Inc</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 09 / 2013	
Mailing Address 1700 Diagonal Road. #730			Amount of Each Disbursement this Period 1051.00	
City Alexandria	State DC	Zip Code 22314	Transaction ID : SB17.E1536971.0	
Purpose of Disbursement Congressional Retreat for GROF Conference members		Category/ Type 001	[MEMO ITEM] Sub-vendor itemization of Tal Eslick	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1401.00
<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)	PAGE 48 OF 58			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Tal Eslick</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address 1532 N Sanders Ave		Amount of Each Disbursement this Period 3300.00
City Clovis	State CA	
Zip Code 93619	Purpose of Disbursement	<b>Transaction ID : SB17.E1536969</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. DC Trails, Inc</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2013
Mailing Address P.O. Box 1508		Amount of Each Disbursement this Period 875.00
City Lorton	State VA	
Zip Code 22199	Purpose of Disbursement taxi service while in DC	<b>Transaction ID : SB17.E1536969.0</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Tal Eslick
State: District:		

Full Name (Last, First, Middle Initial) <b>c. DC Trails, Inc</b>		Date of Disbursement MM / DD / YYYY 01 / 11 / 2013
Mailing Address P.O. Box 1508		Amount of Each Disbursement this Period 2425.00
City Lorton	State VA	
Zip Code 22199	Purpose of Disbursement taxi service while in DC	<b>Transaction ID : SB17.E1536969.1</b>
Candidate Name	002 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<b>[MEMO ITEM]</b> Sub-vendor itemization of Tal Eslick
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3300.00
<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)	PAGE 49 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Franchise Tax Board</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address P.O. Box 942857		Amount of Each Disbursement this Period 64.00
City Sacramento	State CA	
Zip Code 94257	Purpose of Disbursement Tax Payment	<b>Transaction ID : SB17.E1540553</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Franchise Tax Board</b>		Date of Disbursement M M / D D / Y Y Y Y 03 / 15 / 2013
Mailing Address P.O. Box 942857		Amount of Each Disbursement this Period 14.00
City Sacramento	State CA	
Zip Code 94257	Purpose of Disbursement Tax Payment	<b>Transaction ID : SB17.E1540595</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Franchise Tax Board</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2013
Mailing Address P.O. Box 942857		Amount of Each Disbursement this Period 1072.27
City Sacramento	State CA	
Zip Code 94257	Purpose of Disbursement Tax Payment	<b>Transaction ID : SB17.E1539688</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1150.27
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)  
Mailing Address Internal Revenue Service

City Ogden State UT Zip Code 94201

Purpose of Disbursement Tax Payment

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 03 / 15 / 2013

Amount of Each Disbursement this Period: 212.93

Transaction ID : SB17.E1540551

Category/Type: 001

**B. McNeil & McNeil**

Full Name (Last, First, Middle Initial)  
Mailing Address 612 E Shields

City Fresno State CA Zip Code 93704

Purpose of Disbursement Tax Preparation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 03 / 27 / 2013

Amount of Each Disbursement this Period: 375.00

Transaction ID : SB17.E1540733

Category/Type: 001

**C. Justin Mendes**

Full Name (Last, First, Middle Initial)  
Mailing Address 1805 W Colombia Way

City Hanford State CA Zip Code 93230

Purpose of Disbursement District Consultant - Bonus

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 01 / 08 / 2013

Amount of Each Disbursement this Period: 350.00

Transaction ID : SB17.E1536876

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 937.93

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Jane Metcalf</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013
Mailing Address 5150 N Valentine Ave. Apt. 206		Amount of Each Disbursement this Period 21.45
City Fresno	State CA	
Zip Code 93711	Purpose of Disbursement See memo items below	Transaction ID : SB17.E1536892
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Me-N-Ed's Pizza</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013
Mailing Address 2483 North 10th Avenue		Amount of Each Disbursement this Period 21.45
City Hanford	State CA	
Zip Code 93230	Purpose of Disbursement Community Event Expense	Transaction ID : SB17.E1536892.0
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] Sub-vendor itemization of Jane Metcalf
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Jane Metcalf</b>		Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013
Mailing Address 5150 N Valentine Ave. Apt. 206		Amount of Each Disbursement this Period 350.00
City Fresno	State CA	
Zip Code 93711	Purpose of Disbursement Win bonus	Transaction ID : SB17.E1536890
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	371.45
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 58			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Orman Communications</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2013	
Mailing Address 3589 W Buena Vista Ave			Amount of Each Disbursement this Period 15049.57	
City Fresno	State CA	Zip Code 93711	Transaction ID : SB17.E1538678	
Purpose of Disbursement Win Bonus / Agency Commission		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Presson &amp; Associates</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 02 / 2013	
Mailing Address 11700 Old Eureka Way			Amount of Each Disbursement this Period 20000.00	
City Gold River	State CA	Zip Code 95670	Transaction ID : SB17.E1536567	
Purpose of Disbursement Media Consulting Win Bonus		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>c. Betsy Ramsey</b>			Date of Disbursement M M / D D / Y Y Y Y 01 / 08 / 2013	
Mailing Address 7702 Morningstar			Amount of Each Disbursement this Period 350.00	
City Bakersfield	State CA	Zip Code 93306	Transaction ID : SB17.E1536882	
Purpose of Disbursement Win bonus		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	35399.57
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 58			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Andrew Renteria</b>			Date of Disbursement MM / DD / YYYY 01 / 08 / 2013	
Mailing Address 2023 Magnolia			Amount of Each Disbursement this Period 350.00	
City Sanger	State CA	Zip Code 93657	Transaction ID : SB17.E1536884	
Purpose of Disbursement Field Consultant - bonus		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>B. Verizon Wireless</b>			Date of Disbursement MM / DD / YYYY 01 / 02 / 2013	
Mailing Address 140 West St.			Amount of Each Disbursement this Period 413.76	
City New York	State NY	Zip Code 10007	Transaction ID : SB17.E1536566	
Purpose of Disbursement Phone Payment		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) <b>C. Verizon Wireless</b>			Date of Disbursement MM / DD / YYYY 02 / 26 / 2013	
Mailing Address 140 West St.			Amount of Each Disbursement this Period 423.24	
City New York	State NY	Zip Code 10007	Transaction ID : SB17.E1540163	
Purpose of Disbursement Phone Payment		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1187.00
<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)		PAGE 54 OF 58	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Verizon Wireless</b>		Date of Disbursement MM / DD / YYYY 02 / 04 / 2013
Mailing Address 140 West St.		Amount of Each Disbursement this Period 363.24 <b>Transaction ID : SB17.E1540047</b>
City New York	State NY	
Zip Code 10007	Purpose of Disbursement Phone payment	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. George Villagrana</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address Unknown		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.E1536886</b>
City Unknown	State CA	
Zip Code 11111	Purpose of Disbursement Win bonus	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Miriam Yanez</b>		Date of Disbursement MM / DD / YYYY 01 / 08 / 2013
Mailing Address Unknown		Amount of Each Disbursement this Period 350.00 <b>Transaction ID : SB17.E1536888</b>
City Unknown	State CA	
Zip Code 11111	Purpose of Disbursement Win bonus	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1063.24
<b>TOTAL</b> This Period (last page this line number only).....	84708.16

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 58	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input checked="" type="checkbox"/> 19b 21

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

Full Name (Last, First, Middle Initial) <b>A. Kern County Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y <b>02 / 14 / 2013</b>
Mailing Address P.O. Box 1144		Amount of Each Disbursement this Period <b>1200.00</b>
City <b>Bakersfield</b>	State <b>CA</b>	
Purpose of Disbursement <b>2 fundraiser tickets</b>	Zip Code <b>93302</b>	<b>Transaction ID : SB21.E1540049</b>
Candidate Name <b>Kern County Republican Party</b>	Category/ Type <b>011</b>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

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

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>1200.00</b>

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chase - Visa</b>		Nature of Debt (Purpose): See Memo Items below
Mailing Address 270 Park Avenue Floor 12		
City	State	Zip Code
New York		NY 10017

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1540608</b>	
<input type="text" value="0"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="1767.7"/>	<input type="text" value="0"/>	<input type="text" value="1767.7"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chase - Visa</b>		Nature of Debt (Purpose): See memo items below
Mailing Address 270 Park Avenue Floor 12		
City	State	Zip Code
New York		NY 10017

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1536357</b>	
<input type="text" value="4453.78"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="4453.78"/>	<input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Chase - Visa</b>		Nature of Debt (Purpose): See memo items below
Mailing Address 270 Park Avenue Floor 12		
City	State	Zip Code
New York		NY 10017

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1541092</b>	
<input type="text" value="0"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="8306.98"/>	<input type="text" value="0"/>	<input type="text" value="8306.98"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="10074.68"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>



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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DirectFile</b>	Nature of Debt (Purpose): Accounting Services
Mailing Address 504 Van Ness Ave	
City State Zip Code Fresno CA 93721	

Outstanding Balance Beginning This Period <input type="text" value="0"/>	<b>Transaction ID : SD10.E1541355</b>	
Amount Incurred This Period <input type="text" value="1341.1"/>	Payment This Period <input type="text" value="0"/>	Outstanding Balance at Close of This Period <input type="text" value="1341.1"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DirectFile</b>	Nature of Debt (Purpose): Accounting Services
Mailing Address 504 Van Ness Ave	
City State Zip Code Fresno CA 93721	

Outstanding Balance Beginning This Period <input type="text" value="2111.25"/>	<b>Transaction ID : SD10.E1536865</b>	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="2111.25"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DirectFile</b>	Nature of Debt (Purpose): Accounting Services
Mailing Address 504 Van Ness Ave	
City State Zip Code Fresno CA 93721	

Outstanding Balance Beginning This Period <input type="text" value="1508.75"/>	<b>Transaction ID : SD10.E1536867</b>	
Amount Incurred This Period <input type="text" value="0"/>	Payment This Period <input type="text" value="1508.75"/>	Outstanding Balance at Close of This Period <input type="text" value="0"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="1341.10"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

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

NAME OF COMMITTEE (In Full)  
**Valadao for Congress**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Orman Communications</b>		Nature of Debt (Purpose): Win Bonus / Agency Commission
Mailing Address 3589 W Buena Vista Ave		
City	State	Zip Code
Fresno	CA	93711

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1534686</b>	
<input type="text" value="15049.57"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="15049.57"/>	<input type="text" value="0"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Orman Communications</b>		Nature of Debt (Purpose): Win Bonus
Mailing Address 3589 W Buena Vista Ave		
City	State	Zip Code
Fresno	CA	93711

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1534685</b>	
<input type="text" value="30000"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="0"/>	<input type="text" value="30000"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Presson &amp; Associates</b>		Nature of Debt (Purpose): Media Consulting Win Bonus
Mailing Address 11700 Old Eureka Way		
City	State	Zip Code
Gold River	CA	95670

Outstanding Balance Beginning This Period	<b>Transaction ID : SD10.E1535358</b>	
<input type="text" value="20000"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0"/>	<input type="text" value="20000"/>	<input type="text" value="0"/>

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	<input type="text" value="30000.00"/>
2) <b>TOTALS</b> This Period (last page this line number only) .....	<input type="text" value="41415.78"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="41415.78"/>