

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 555 Capitol Mall, Suite 1425
 Check if different than previously reported. (ACC)
Sacramento CA 95814

2. **FEC IDENTIFICATION NUMBER** C00258475
CITY **STATE** **ZIP CODE**
STATE **DISTRICT**
3. IS THIS REPORT NEW (N) OR AMENDED (A)
CA 14

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 11 04 2008 in the State of CA

5. Covering Period 10 16 2008 through 11 24 2008

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 Christopher Ream

Signature of Treasurer Electronically Filed by Christopher Ream Date 01 26 2009

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

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Anna Eshoo for Congress

Report Covering the Period:

From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	89586.40	1564246.67
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	16050.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	89586.40	1548196.67
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	84973.47	880436.73
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	4554.15
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	84973.47	875882.58
8. Cash on Hand at Close of Reporting Period (from Line 27).....	517016.63	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

**POST-ELECTION DETAILED
SUMMARY PAGE**
Report of Receipts and Disbursements

FEC Form 3 (Revised 07/05)

Page 5

- . If the candidate participated in the general election, use this form for the 30-day Post-General report.
- . If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

Anna Eshoo for Congress

Report Covering the Period: From:

M	M
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date of general election)	M	M	1	1	D	D	0	4	Y	Y	Y	Y	2	0	0	8	COLUMN C Total for <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>0</td><td>5</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (date after general election) through <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>M</td><td>M</td></tr><tr><td>1</td><td>1</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>D</td><td>D</td></tr><tr><td>2</td><td>4</td></tr></table> <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table> (last day of reporting period)	M	M	1	1	D	D	0	5	Y	Y	Y	Y	2	0	0	8	M	M	1	1	D	D	2	4	Y	Y	Y	Y	2	0	0	8
M	M																																																	
1	1																																																	
D	D																																																	
0	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
0	5																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
M	M																																																	
1	1																																																	
D	D																																																	
2	4																																																	
Y	Y	Y	Y																																															
2	0	0	8																																															
11. CONTRIBUTIONS (other than loans) FROM:																																																		
(a) Individuals/Persons Other than Political Committees																																																		
(i) Itemized (Use Schedule A)																																																		
36300.00	712009.05	0.00																																																
(ii) Unitemized																																																		
3161.40	49407.36	0.00																																																
(iii) Total of contributions from individuals																																																		
39461.40	761416.41	4975.00																																																
(b) Political Party Committees																																																		
0.00	79.09	0.00																																																
(c) Other Political Committees																																																		
50125.00	802751.17	0.00																																																

**POST-ELECTION DETAILED
SUMMARY PAGE
Report of Receipts and Disbursements**

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general Election) (* See page 5 for date)	COLUMN C Total for * (date after general election) Through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
89586.40	1564246.67	4975.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b). All Other Loans		
0.00	0.00	0.00
(c). TOTAL LOANS (add Lines 13(a) and (b))		
0.00	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (refunds, rebates, etc)		
0.00	4554.15	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc)		
131.83	8645.48	0.00
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
89718.23	1577446.30	4975.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 7

Write or Type Committe Name

Anna Eshoo for Congress

Report the covering period

From:

MM 10

DD 16

YYYY 2008

To:

MM 11

DD 24

YYYY 2008

II. DISBURSEMENTS

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * Through * (date after general election) (last day of reporting period) (* See page 5 for date)
17. OPERATING EXPENDITURES		
84973.47	880436.73	21388.65
18. TRANSFER TO OTHER AUTHORIZED COMMITTEES		
0.00	0.00	0.00
19. LOAN PAYMENTS		
(a) Of Loans Made or Guaranteed by the Candidate		
0.00	0.00	0.00
(b) Of All Other Loans		
0.00	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
0.00	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
0.00	11150.00	0.00
(b) Political Party Committees		
0.00	0.00	0.00

POST ELECTION DETAILED SUMMARY PAGE

FEC Form 3 (Revised 1/01)

Report of Receipts and Disbursements

Page 8

COLUMN A Total this period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	Total for * Through *	COLUMN C (date after general election) (last day of reporting period) (* See page 5 for date)
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(c) Other political committees (such as PACs)

0.00	4900.00	0.00
------	---------	------

(d) TOTAL CONTRIBUTION REFUNDS (See Lines 20(a), (b) and (c))

0.00	16050.00	0.00
------	----------	------

21. OTHER DISBURSEMENTS

25200.00	534535.00	5650.00
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22. TOTAL DISBURSEMENTS (add lines 17, 18, 19(c), 20(d), and 21)

110173.47	1431021.73	27038.65
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III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract line 20(d) from Line 11(e))

89586.40	1548196.67	4975.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract line 14 from Line 17)

84973.47	875882.58	21388.65
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINING OF REPORTING PERIOD	537471.87
24. TOTAL RECEIPTS AT THIS PERIOD (from Line 16).....	89718.23
25. SUBTOTAL(add Line 23 and Line 24)	627190.10
26. TOTAL DISBURSEMENTS AT THIS PERIOD (from Line 22).....	110173.47
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (Subtract Line 26 from Line 25).....	517016.63

**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 7 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) William T. Archey		Date of Receipt
	Mailing Address 501 Hilltop Terrace		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Alexandria	VA	22301
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10093
Name of Employer American Electronics Association		Occupation President / Chief Executive Officer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Catherine Athans		Date of Receipt
	Mailing Address 349 First Street, Suite L		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 0 8
	City	State	Zip Code
	Los Altos	CA	94022
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10070
Name of Employer Catherine Athans, Consultant		Occupation Consultant	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Frederick D. Baron		Date of Receipt
	Mailing Address 521 Lowell Avenue		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 9 / 2 0 0 8
	City	State	Zip Code
	Palo Alto	CA	94301
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10018
Name of Employer Cooley Goodward		Occupation Attorney	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1750.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Robert Berman		Date of Receipt
	Mailing Address 535 West Crescent Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 0 / 2 0 0 8
	City	State	Zip Code
	Palo Alto	CA	94301
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10078
Name of Employer Roplast Industries, Inc.		Occupation Chief Financial Officer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 250.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Shona Brown		Date of Receipt
	Mailing Address 240 Emerson Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 0 2 / 2 0 0 8
	City	State	Zip Code
	Palo Alto	CA	94301
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10094
Name of Employer Google, Inc.		Occupation Executive	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Constance E. Chambers		Date of Receipt
	Mailing Address 27800 Via Feliz		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 3 1 / 2 0 0 8
	City	State	Zip Code
	Los Altos	CA	94022
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10087
Name of Employer Homemaker		Occupation Homemaker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 3300.00
			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3550.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) John T. Chambers		Date of Receipt
	Mailing Address 27800 Via Feliz		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Los Altos	CA	94022
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10088
Name of Employer Cisco Systems, Inc.		Occupation Chief Executive Officer	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 3300.00	<input type="text"/> 2300.00
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

B.	Full Name (Last, First, Middle Initial) Michael J. Culver		Date of Receipt
	Mailing Address 725 Cowper Street, #46		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Palo Alto	CA	94301
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10116
Name of Employer Aesec Corporation		Occupation Executive Computer Security Startup	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 400.00	<input type="text"/> 200.00
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

C.	Full Name (Last, First, Middle Initial) Rodney J. Diridon, Sr.		Date of Receipt
	Mailing Address 870 Camino Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Santa Clara	CA	95050
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10140
Name of Employer SJSU Foundation		Occupation Research Director	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/>
		<input type="text"/> 2500.00	<input type="text"/> 500.00
<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 3000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Donald L. Fowler

Mailing Address 2725 Devine Street

City State Zip Code
Columbia SC 29205

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

Name of Employer Occupation
Fowler Communications, Inc. Public Relations

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

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

Transaction ID: INC.A.10127

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
Minoru Freund

Mailing Address 986 Leonello Avenue

City State Zip Code
Los Altos CA 94024

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

Name of Employer Occupation
NASA Ames Director of Research

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

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

Transaction ID: INC.A.10205

Amount of Each Receipt this Period
250.00

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

C. Full Name (Last, First, Middle Initial)
Phyllis K. Friedman

Mailing Address 119 Reservoir Road

City State Zip Code
Hillsborough CA 94010

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

Name of Employer Occupation
Retired Retired

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

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

Transaction ID: INC.A.10187

Amount of Each Receipt this Period
250.00

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

SUBTOTAL of Receipts This Page (optional) ▶ **750.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 62
(check only one)

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

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

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Thomas J. Furst

Mailing Address 10 Reyna Place

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
SRI International Chief Financial Officer

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

Date of Receipt
MM / DD / YYYY
10 / 31 / 2008

Transaction ID: INC.A.10134

Amount of Each Receipt this Period
250.00

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

B. Full Name (Last, First, Middle Initial)
James C. Gaither

Mailing Address 755 Page Mill Road, Suite A200

City State Zip Code
Palo Alto CA 94304

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

Name of Employer Occupation
Sutter Hill Ventures Investor

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

Date of Receipt
MM / DD / YYYY
11 / 03 / 2008

Transaction ID: INC.A.10159

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Mary Lynn Gibbons

Mailing Address 15 Redberry Ridge

City State Zip Code
Portola Valley CA 94028

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

Name of Employer Occupation
Homemaker Homemaker

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

Date of Receipt
MM / DD / YYYY
10 / 28 / 2008

Transaction ID: INC.A.10114

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
John D. Goldman

Mailing Address One Bush Street, 9th Floor

City State Zip Code
San Francisco CA 94104

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

Name of Employer Occupation
Willis Insurance Insurance Executive

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
11 / 13 / 2008

Transaction ID: INC.A.10184

Amount of Each Receipt this Period
2300.00

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

B.

Full Name (Last, First, Middle Initial)
Carol Hake

Mailing Address 12830 Viscaino Road

City State Zip Code
Los Altos Hills CA 94022

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

Name of Employer Occupation
Carol Hake, Artist Artist

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
10 / 28 / 2008

Transaction ID: INC.A.10128

Amount of Each Receipt this Period
200.00

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

C.

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

Mailing Address 2397 Sharon Road

City State Zip Code
Menlo Park CA 94025

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

Name of Employer Occupation
FT Ventures Venture Capitol

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
MM / DD / YYYY
10 / 28 / 2008

Transaction ID: INC.A.10199

Amount of Each Receipt this Period
500.00

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

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

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Claudia A. Hevel

Mailing Address 1001 Suffolk Way

City State Zip Code
Los Altos CA 94024

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

Name of Employer Occupation
Homemaker Homemaker

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

Amount of Each Receipt this Period
50.00

Transaction ID: INC.A.10133

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

B. Full Name (Last, First, Middle Initial)
H. Langdon Hilleary

Mailing Address 501 Portola Road, Box 8178

City State Zip Code
Portola Valley CA 94028

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

Name of Employer Occupation
Retired Retired

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

Amount of Each Receipt this Period
100.00

Transaction ID: INC.A.10065

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

C. Full Name (Last, First, Middle Initial)
Janet R. Hofmann

Mailing Address 3889 Harvest Drive

City State Zip Code
Redwood City CA 94061

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

Name of Employer Occupation
Retired Retired

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

Amount of Each Receipt this Period
200.00

Transaction ID: INC.A.10063

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

SUBTOTAL of Receipts This Page (optional) ▶ **350.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Diane M. Howard	Date of Receipt MM / DD / YYYY 10 / 21 / 2008
	Mailing Address 907 Katherine Avenue	Transaction ID: INC.A.10073
	City State Zip Code Redwood City CA 94062	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Redwood City	Occupation Vice Mayor & Nurse	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 650.00	

B.	Full Name (Last, First, Middle Initial) Alexander C. Karp	Date of Receipt MM / DD / YYYY 11 / 03 / 2008
	Mailing Address 800 High Street, #201	Transaction ID: INC.A.10160
	City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 2300.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Palantir Technologies	Occupation Chief Executive Officer	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2300.00	

C.	Full Name (Last, First, Middle Initial) John A.D. Kelley	Date of Receipt MM / DD / YYYY 11 / 04 / 2008
	Mailing Address 401 Florence Street	Transaction ID: INC.A.10152
	City State Zip Code Palo Alto CA 94301	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Russo & Hale LLP	Occupation Attorney	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Amy Klein

Mailing Address 138 Yale Road

City State Zip Code
Menlo Park CA 94025

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

Name of Employer
Classic Portfolio Management, Inc.

Occupation
Registered Investment Advisor

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 3 / 2 0 0 8

Transaction ID: INC.A.10194

Amount of Each Receipt this Period
100.00

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

B.

Full Name (Last, First, Middle Initial)
James M. Koshland

Mailing Address 73 Maple Leaf Way

City State Zip Code
Atherton CA 94025

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

Name of Employer
Gray, Cary, Ware & Freidrich LLP

Occupation
Senior Partner

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

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

Transaction ID: INC.A.10182

Amount of Each Receipt this Period
1000.00

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

C.

Full Name (Last, First, Middle Initial)
Leslie Lamport

Mailing Address 941 Elsinore Drive

City State Zip Code
Palo Alto CA 94303

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

Name of Employer
Microsoft

Occupation
Computer Scientist

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 3 / 2 0 0 8

Transaction ID: INC.A.10185

Amount of Each Receipt this Period
350.00

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

SUBTOTAL of Receipts This Page (optional) ► **1450.00**

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

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

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

FOR LINE NUMBER: PAGE 17 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Joan F. Lane

Mailing Address 99 Tallwood Court

City Atherton State CA Zip Code 94027

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

Name of Employer Stanford University Occupation Educational Administrator

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2300.00

Date of Receipt 10 / 31 / 2008
Transaction ID: INC.A.10092
 Amount of Each Receipt this Period 2300.00

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

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

Mailing Address 405 El Camino Real, PMB 614

City Menlo Park State CA Zip Code 94025

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

Name of Employer Self-Employed Occupation Non-Profit

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 22 / 2008
Transaction ID: INC.A.10029
 Amount of Each Receipt this Period 2000.00

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

C. Full Name (Last, First, Middle Initial)
Diane Mason

Mailing Address 6402 Cherry Hill Parkway

City Fort Wayne State IN Zip Code 46835

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

Name of Employer Parkview Health Occupation Health Executive

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 10 / 31 / 2008
Transaction ID: INC.A.10091
 Amount of Each Receipt this Period 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **5300.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Nancy McGaraghan

Mailing Address 200 Coleridge Avenue

City Palo Alto State CA Zip Code 94301

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

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 500.00

Date of Receipt 10 / 31 / 2008

Transaction ID: INC.A.10125

Amount of Each Receipt this Period 250.00

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

B. Full Name (Last, First, Middle Initial)
Mary Helen McMillan

Mailing Address 15 Arch Lane

City San Carlos State CA Zip Code 94070

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

Name of Employer San Mateo County Occupation Deputy County Manager

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 10 / 28 / 2008

Transaction ID: INC.A.10143

Amount of Each Receipt this Period 250.00

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

C. Full Name (Last, First, Middle Initial)
Jon J. Metzler

Mailing Address 3573 22nd Street

City San Francisco State CA Zip Code 94114

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

Name of Employer Blue Field Strategies, Inc. Occupation Telecommunications Consultant

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1500.00

Date of Receipt 10 / 24 / 2008

Transaction ID: INC.A.10196

Amount of Each Receipt this Period 500.00

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

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
H. Signe Ostby

Date of Receipt
MM / DD / YYYY
11 / 03 / 2008

Mailing Address 386 Mountain Home Road

Transaction ID: INC.A.10120

City Woodside State CA Zip Code 94062

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. C

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 3300.00

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

B.

Full Name (Last, First, Middle Initial)
Helen Hilton Raiser

Date of Receipt
MM / DD / YYYY
11 / 04 / 2008

Mailing Address 2256 Hyde Street

Transaction ID: INC.A.10153

City San Francisco State CA Zip Code 94109

Amount of Each Receipt this Period
500.00

FEC ID number of contributing federal political committee. C

Name of Employer The Raiser Organization Occupation Chair

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

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

C.

Full Name (Last, First, Middle Initial)
Shyam Sankar

Date of Receipt
MM / DD / YYYY
11 / 02 / 2008

Mailing Address 100 Hamilton Avenue, Suite 300

Transaction ID: INC.A.10206

City Palo Alto State CA Zip Code 94301

Amount of Each Receipt this Period
1000.00

FEC ID number of contributing federal political committee. C

Name of Employer Palantir Technologies Occupation Software Engineer

Receipt For: 2008 Election Cycle-to-Date
 Primary General
 Other (specify) ▼ 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 2500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Mark J. Solomon

Mailing Address 228 Brighton Lane

City State Zip Code
Redwood City CA 94061

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

Name of Employer Occupation
Mark J. Solomon, Attorney at Law Attorney

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

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

Transaction ID: INC.A.10148

Amount of Each Receipt this Period
250.00

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

B.

Full Name (Last, First, Middle Initial)
Terence R. Spies

Mailing Address 950 San Pierre Way

City State Zip Code
Mountain View CA 94043

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

Name of Employer Occupation
Voltage Security Chief Technical Officer

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

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

Transaction ID: INC.A.10017

Amount of Each Receipt this Period
2300.00

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

C.

Full Name (Last, First, Middle Initial)
Lawrence E. Stone

Mailing Address 1373 Bedford Avenue

City State Zip Code
Sunnyvale CA 94087

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

Name of Employer Occupation
Santa Clara County County Assessor

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

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

Transaction ID: INC.A.10068

Amount of Each Receipt this Period
500.00

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

SUBTOTAL of Receipts This Page (optional) ► **3050.00**

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

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

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

FOR LINE NUMBER: PAGE 21 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Sanjay Subhedar

Mailing Address 88 Spencer Lane

City Atherton State CA Zip Code 94027

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

Name of Employer Storm Ventures Occupation General Partner

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2008.00

Date of Receipt 10 / 19 / 2008
Transaction ID: INC.A.10016
 Amount of Each Receipt this Period 2000.00

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

B. Full Name (Last, First, Middle Initial)
Richard J. Traverso

Mailing Address 1245 Southdown Road

City Hillsborough State CA Zip Code 94010

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

Name of Employer Adco Outdoor Advertising Occupation Billboard Plant Operator

Receipt For: 2010
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 11 / 20 / 2008
Transaction ID: INC.A.10188
 Amount of Each Receipt this Period 1000.00

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

C. Full Name (Last, First, Middle Initial)
Irmengard L. Villarreal

Mailing Address 1098 Eden Bower Lane

City Redwood City State CA Zip Code 94061

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

Name of Employer Retired Occupation Retired

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 300.00

Date of Receipt 10 / 28 / 2008
Transaction ID: INC.A.10149
 Amount of Each Receipt this Period 50.00

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

SUBTOTAL of Receipts This Page (optional) ► 3050.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 62
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Ellen C. Weaver		Date of Receipt
	Mailing Address 701 Deer Valley Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	San Rafael	CA	94903
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10155
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 50.00
		<input type="text"/> 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B.	Full Name (Last, First, Middle Initial) Amos Wilnai		Date of Receipt
	Mailing Address 885 Northampton Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Palo Alto	CA	94303
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10023
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 1000.00
		<input type="text"/> 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C.	Full Name (Last, First, Middle Initial) Brenda L. Yost		Date of Receipt
	Mailing Address 4030 21st Street		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	San Francisco	CA	94114
	FEC ID number of contributing federal political committee. C		Transaction ID: INC.A.10080
Name of Employer Wells Fargo Bank		Occupation Banker	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 150.00
		<input type="text"/> 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 1200.00
TOTAL This Period (last page this line number only)	<input type="text"/> 36300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
3M Company PAC
Mailing Address 3M Center
City St. Paul State MN Zip Code 55144
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1000.00
Date of Receipt: 10 / 20 / 2008
Transaction ID: INC.A.10021
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Allergan, Inc. PAC Committee for Employees - APACE
Mailing Address 2148 East Orange View Lane
City Orange State CA Zip Code 92867
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
8500.00
Date of Receipt: 10 / 23 / 2008
Transaction ID: INC.A.10032
Amount of Each Receipt this Period: 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Amalgamated Transit Union COPE Voluntary Fund
Mailing Address 5025 Wisconsin Avenue, NW
City Washington State DC Zip Code 20016
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼
1500.00
Date of Receipt: 10 / 16 / 2008
Transaction ID: INC.A.10064
Amount of Each Receipt this Period: 500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 24 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
American Association of Nurse Anesthetists CRNAPAC

Mailing Address 25 Massachusetts Ave., NW, #550

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3500.00

Date of Receipt: 10 / 28 / 2008
Transaction ID: INC.A.10054
Amount of Each Receipt this Period: 1500.00

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

B. Full Name (Last, First, Middle Initial)
American Federation of State, County & Municipal Employees (AFSCME PEOPLE)

Mailing Address 1625 L Street, NW

City Washington State DC Zip Code 20036

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 11 / 04 / 2008
Transaction ID: INC.A.10122
Amount of Each Receipt this Period: 1000.00

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

C. Full Name (Last, First, Middle Initial)
American Medical Association PAC

Mailing Address 25 Massachusetts Ave., NW, #600

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 4500.00

Date of Receipt: 11 / 04 / 2008
Transaction ID: INC.A.10156
Amount of Each Receipt this Period: 2500.00

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

SUBTOTAL of Receipts This Page (optional) ► 5000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
American Osteopathic Information Association - Osteopathic PAC (AOIC-PAC)
Mailing Address 1090 Vermont Avenue, NW, #510

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 0 3 / 2 0 0 8

Transaction ID: INC.A.10117

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
America's Health Insurance Plans (AHIP PAC)
Mailing Address 601 Pennsylvania Avenue, NW # 500

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: INC.A.10055

Amount of Each Receipt this Period
1000.00

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

C. Full Name (Last, First, Middle Initial)
Anheuser-Busch Political Action Committee (ABPAC)
Mailing Address One Busch Place, #202-5

City State Zip Code
St. Louis MO 63118

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

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

Transaction ID: INC.A.10024

Amount of Each Receipt this Period
2500.00

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

SUBTOTAL of Receipts This Page (optional) ► 4500.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Becton, Dickinson and Company Political Action Committee
 Mailing Address 1 Becton Drive, MC-085
 City State Zip Code
 Franklin Lakes NJ 07417
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
Blue Shield of California Political Action Committee
 Mailing Address 50 Beale Street, 18th Floor
 City State Zip Code
 San Francisco CA 94105
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 Amount of Each Receipt this Period 3000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
Build PAC of National Association Home Builders
 Mailing Address 1201 15th Street, NW
 City State Zip Code
 Washington DC 20005
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2008
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 Amount of Each Receipt this Period 8500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ► **9000.00**
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 27 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Carpenters' Legislative Improvement Committee (CLIC)
Mailing Address 101 Constitution Avenue, NW

City State Zip Code
Washington DC 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 4 / 2 0 0 8

Transaction ID: INC.A.10123

Amount of Each Receipt this Period
2500.00

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

B. Full Name (Last, First, Middle Initial)
Cisco Systems, Inc. Federal PAC
Mailing Address 20 Park Road, Suite E

City State Zip Code
Burlingame CA 94010

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: INC.A.10089

Amount of Each Receipt this Period
3000.00

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

C. Full Name (Last, First, Middle Initial)
College of American Pathologists PAC (PATHPAC)
Mailing Address 1350 I Street, NW, #590

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 1 / 0 3 / 2 0 0 8

Transaction ID: INC.A.10121

Amount of Each Receipt this Period
4000.00

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

SUBTOTAL of Receipts This Page (optional) ► **9500.00**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Communications Workers of America (CWA) COPE PCC

Mailing Address 501 3rd Street, NW

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 30 / 2008
Transaction ID: INC.A.10085
Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 900 7th Street, NW, Suite 975

City Washington State DC Zip Code 20001

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt: 10 / 17 / 2008
Transaction ID: INC.A.9984
Amount of Each Receipt this Period: 1000.00

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

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

Mailing Address 601 Pennsylvania Ave., NW, #600

City Washington State DC Zip Code 20004

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 3000.00

Date of Receipt: 11 / 03 / 2008
Transaction ID: INC.A.10118
Amount of Each Receipt this Period: 1000.00

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

SUBTOTAL of Receipts This Page (optional) ► 3000.00

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 29 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Dealers Election Action Committee of the National Automobile Dealers Association

Mailing Address 8400 Westpark Drive

City State Zip Code
McLean VA 22102

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 28 / 2008

Transaction ID: INC.A.10056

Amount of Each Receipt this Period
1000.00

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

B. Full Name (Last, First, Middle Initial)
Gibson 2008, Friends of Supervisor Rose Jacobs

Mailing Address 20 Park Road, Suite E

City State Zip Code
Burlingame CA 94010

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt
MM / DD / YYYY
11 / 04 / 2008

Transaction ID: INC.A.10163

Amount of Each Receipt this Period
100.00

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

C. Full Name (Last, First, Middle Initial)
Heineken USA Good Government Fund

Mailing Address 360 Hamilton Avenue, Suite 1103

City State Zip Code
White Plains NY 10601

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
10 / 24 / 2008

Transaction ID: INC.A.10036

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **2100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 62
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Hewlett-Packard Company PAC	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 3000 Hanover Street, MC-1035	Transaction ID: INC.A.10058
	City State Zip Code Palo Alto CA 94304	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 7300.00	

B.	Full Name (Last, First, Middle Initial) Honeywell International PAC (HIPAC)	Date of Receipt MM / DD / YYYY 10 / 22 / 2008
	Mailing Address 101 Constitution Avenue, NW, #500W	Transaction ID: INC.A.10025
	City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 10000.00	

C.	Full Name (Last, First, Middle Initial) Human Rights Campaign Fund PAC	Date of Receipt MM / DD / YYYY 10 / 27 / 2008
	Mailing Address 1640 Rhode Island Avenue, NW	Transaction ID: NON.A.10084
	City State Zip Code Washington DC 20036	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer	Occupation	Website Advocacy (Inkind)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2025.00	

SUBTOTAL of Receipts This Page (optional)	3025.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
KPMG PAC
Mailing Address P.O. Box 18254
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 5000.00
Date of Receipt 10 / 17 / 2008
Transaction ID: INC.A.9986
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
National Academy of Elder Law Attorneys Senior Rights PAC
Mailing Address 1604 North Country Club Road
City Tucson State AZ Zip Code 85716
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00
Date of Receipt 10 / 22 / 2008
Transaction ID: INC.A.10026
Amount of Each Receipt this Period 1000.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
National Education Association Fund for Children & Public Education PAC
Mailing Address 1201 16th Street, NW, #420
City Washington State DC Zip Code 20036
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: 2008
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00
Date of Receipt 11 / 03 / 2008
Transaction ID: INC.A.10119
Amount of Each Receipt this Period 1500.00
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

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

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

FOR LINE NUMBER: PAGE 32 / 62
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
ORACLE USA, Inc. PAC

Mailing Address 1015 15th Street, NW, #200

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 7500.00

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

Transaction ID: INC.A.10059

Amount of Each Receipt this Period
3000.00

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

B. Full Name (Last, First, Middle Initial)
PAC of the American Association of the Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue, NE

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 10000.00

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

Transaction ID: INC.A.10060

Amount of Each Receipt this Period
2000.00

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

C. Full Name (Last, First, Middle Initial)
Sempra Energy Employees Political Action Committee

Mailing Address 101 Ash Street

City State Zip Code
San Diego CA 92101

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

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

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

Transaction ID: INC.A.10061

Amount of Each Receipt this Period
1000.00

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

SUBTOTAL of Receipts This Page (optional) ► **6000.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 62			
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial) Transport Workers Union Political Contributions Committee		Date of Receipt MM / DD / YYYY 11 / 04 / 2008
Mailing Address 1700 Broadway, 2nd Floor		Transaction ID: INC.A.10111
City New York	State NY	Zip Code 10019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) Varian Medical Systems PAC		Date of Receipt MM / DD / YYYY 10 / 19 / 2008
Mailing Address 1212 South Victory Blvd.		Transaction ID: INC.A.10019
City Burbank	State CA	Zip Code 91502
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	50125.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 62
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Comerica

Mailing Address 455 Capitol Mall, Suite 400

City State Zip Code
Sacramento CA 95814

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 988.45

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: INC:A:10211

Amount of Each Receipt this Period
50.89

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

B.

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

Mailing Address P.O. Box 64799

City State Zip Code
St. Paul MN 55164

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 935.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: INC:A:10209

Amount of Each Receipt this Period
30.39

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

C.

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

Mailing Address P.O. Box 64799

City State Zip Code
St. Paul MN 55164

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Election Cycle-to-Date ▼ 935.51

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 0 8

Transaction ID: INC:A:10210

Amount of Each Receipt this Period
6.88

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

SUBTOTAL of Receipts This Page (optional) ► **88.16**

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 35 / 62
 (check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Wells Fargo Bank

Mailing Address P.O. Box 6995

City	State	Zip Code
Portland	OR	97228

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 557.73

Date of Receipt
 M M / D D / Y Y Y Y
 1 0 / 3 1 / 2 0 0 8

Transaction ID: INC:A:10212

Amount of Each Receipt this Period
 43.67

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

SUBTOTAL of Receipts This Page (optional)	43.67
TOTAL This Period (last page this line number only)	131.83

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Carol Pfeifer <hr/> Mailing Address 99 Monte Mar Drive <hr/> City Sausalito State CA Zip Code 94965 <hr/> Purpose of Disbursement Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10046 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">6500.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	8	/	2	0	0	8	6500.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	0	/	2	8	/	2	0	0	8														
6500.00																							
B.	Full Name (Last, First, Middle Initial) Carol Pfeifer <hr/> Mailing Address 99 Monte Mar Drive <hr/> City Sausalito State CA Zip Code 94965 <hr/> Purpose of Disbursement Fundraising Shipping Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10105 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">121.71</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	1	/	2	0	0	8	121.71
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	1	/	2	0	0	8														
121.71																							
C.	Full Name (Last, First, Middle Initial) Carol Pfeifer <hr/> Mailing Address 99 Monte Mar Drive <hr/> City Sausalito State CA Zip Code 94965 <hr/> Purpose of Disbursement Fundraising Phone and Fax Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10106 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1"> <tr> <td style="text-align: right;">191.00</td> </tr> </table> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	1	/	2	0	0	8	191.00
M	M	/	D	D	/	Y	Y	Y	Y														
1	1	/	1	1	/	2	0	0	8														
191.00																							

SUBTOTAL of Disbursements This Page (optional) ▶	<table border="1"> <tr> <td style="text-align: right;">6812.71</td> </tr> </table>	6812.71
6812.71		
TOTAL This Period (last page this line number only) ▶	<table border="1"> <tr> <td style="text-align: right;"> </td> </tr> </table>	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Carol Pfeifer

Mailing Address 99 Monte Mar Drive

City Sausalito State CA Zip Code 94965

Purpose of Disbursement
Fundraising Decorations

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10104
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

854.24

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Carol Pfeifer

Mailing Address 99 Monte Mar Drive

City Sausalito State CA Zip Code 94965

Purpose of Disbursement
Fundraising Equipment Rental

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10103
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

468.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Meals with Constituents

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10037
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

468.99

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1791.23

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) Su Hong Restaurant Mailing Address 1039 El Camino Real City Menlo Park State CA Zip Code 94025 Purpose of Disbursement Meals with Constituents Candidate Name	Transaction ID: PDT.B.37 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 88.77 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Twice-Baked, LLC, dba Bistro BIS Mailing Address 15 E Street, NW City Washington State DC Zip Code 20001 Purpose of Disbursement Meals with Constituents Candidate Name	Transaction ID: PDT.B.35 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 186.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) U.S. House Members Dining Mailing Address U.S. Capitol Building, #H117 City Washington State DC Zip Code 20515 Purpose of Disbursement Meals with Constituents Candidate Name	Transaction ID: PDT.B.38 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 59.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EXP.B.10039
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

22.82

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Federal Express

Mailing Address P.O. Box 7221

City Pasadena State CA Zip Code 91109

Purpose of Disbursement
Shipping

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: PDT.B.40
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

22.82

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Gifts for Constituents

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EXP.B.10041
Date of Disbursement

10 / 27 / 2008

Amount of Each Disbursement this Period

247.86

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

270.68

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) Company Flowers Mailing Address 2107 North Pollard Street City Arlington State VA Zip Code 22207 Purpose of Disbursement Gifts for Constituents Candidate Name	Transaction ID: PDT.B.42 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 88.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Edmond's Plaza Florist, Inc. Mailing Address 120 East 3rd Avenue City San Mateo State CA Zip Code 94010 Purpose of Disbursement Gifts for Constituents Candidate Name	Transaction ID: PDT.B.41 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 159.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Chase Card Services Mailing Address P.O. Box 94014 City Palatine State IL Zip Code 60094 Purpose of Disbursement Phone Candidate Name	Transaction ID: EXP.B.10043 Date of Disbursement 10 / 27 / 2008 Amount of Each Disbursement this Period 126.88 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	126.88
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Verizon Wireless	Transaction ID: PDT.B.39 Date of Disbursement 10 / 27 / 2008
	Mailing Address P.O. Box 9622	Amount of Each Disbursement this Period 126.88
	City Mission Hills State CA Zip Code 91346	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Phone Candidate Name Fundraising Catering 001 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chase Card Services	Transaction ID: EXP.B.10215 Date of Disbursement 11 / 19 / 2008
	Mailing Address P.O. Box 94014	Amount of Each Disbursement this Period 1349.65
	City Palatine State IL Zip Code 60094	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Phone Candidate Name Fundraising Catering 003 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Duck Club	Transaction ID: EDT.B.126 Date of Disbursement 11 / 19 / 2008
	Mailing Address 100 El Camino Real	Amount of Each Disbursement this Period 449.65
	City Menlo Park State CA Zip Code 94025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
	Purpose of Disbursement Phone Candidate Name Fundraising Catering 003 Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1349.65
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)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Painted Turtle, Inc., The <hr/> Mailing Address 17000 Elizabeth Lake Road <hr/> City Lake Hughes State CA Zip Code 93532 <hr/> Purpose of Disbursement Fundraising Catering Candidate Name 003 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EDT.B.125 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">900.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address P.O. Box 94014 <hr/> City Palatine State IL Zip Code 60094 <hr/> Purpose of Disbursement Shipping Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10213 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">20.67</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
C.	Full Name (Last, First, Middle Initial) Chase Card Services <hr/> Mailing Address P.O. Box 94014 <hr/> City Palatine State IL Zip Code 60094 <hr/> Purpose of Disbursement Gifts for Constituents Candidate Name 001 Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10214 Date of Disbursement <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 0 8 </div> <hr/> Amount of Each Disbursement this Period <div style="border: 1px solid black; padding: 2px; text-align: right;">572.49</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)	<div style="border: 1px solid black; padding: 2px;">593.16</div>
TOTAL This Period (last page this line number only)	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Edmond's Plaza Florist, Inc.

Mailing Address 120 East 3rd Avenue

City San Mateo State CA Zip Code 94010

Purpose of Disbursement
Gifts for Constituents

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EDT.B.124
Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

361.56

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Annual Fee

Candidate Name

001
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EXP.B.10216
Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

60.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Chase Card Services

Mailing Address P.O. Box 94014

City Palatine State IL Zip Code 60094

Purpose of Disbursement
Fundraising Rental Equipment

Candidate Name

003
Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: EXP.B.10217
Date of Disbursement

11 / 19 / 2008

Amount of Each Disbursement this Period

1420.40

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

1480.40

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

<p>A. Full Name (Last, First, Middle Initial) Rent-A-Center, Inc.</p> <p>Mailing Address 2853 Mission Street</p> <p>City San Francisco State CA Zip Code 94110</p> <p>Purpose of Disbursement Fundraising Rental Equipment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EDT.B.127</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">1420.40</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	9	/	2	0	0	8	1420.40
M	M	/	D	D	/	Y	Y	Y	Y													
0	1	/	1	9	/	2	0	0	8													
1420.40																						
<p>B. Full Name (Last, First, Middle Initial) Chase Card Services</p> <p>Mailing Address P.O. Box 94014</p> <p>City Palatine State IL Zip Code 60094</p> <p>Purpose of Disbursement Meals with Constituents</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10172</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">1286.52</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	0	8	1286.52
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	9	/	2	0	0	8													
1286.52																						
<p>C. Full Name (Last, First, Middle Initial) Ristorante Carpaccio, Inc.</p> <p>Mailing Address 1120 Crane Street</p> <p>City Menlo Park State CA Zip Code 94025</p> <p>Purpose of Disbursement Meals with Constituents</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EDT.B.121</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: right;">288.00</td> </tr> </table> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p>[MEMO ITEM]</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	0	8	288.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	9	/	2	0	0	8													
288.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

1286.52

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Complete Campaigns.com	Transaction ID: EXP.B.10076 Date of Disbursement
	Mailing Address 610 Gateway Center Way, Suite K	<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2008"/>
	City San Diego State CA Zip Code 92102	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing Fee	<input type="text" value="22.50"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

B.	Full Name (Last, First, Middle Initial) Complete Campaigns.com	Transaction ID: EXP.B.10075 Date of Disbursement
	Mailing Address 610 Gateway Center Way, Suite K	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2008"/>
	City San Diego State CA Zip Code 92102	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing Fee	<input type="text" value="255.08"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

C.	Full Name (Last, First, Middle Initial) Complete Campaigns.com	Transaction ID: EXP.B.10198 Date of Disbursement
	Mailing Address 610 Gateway Center Way, Suite K	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2008"/>
	City San Diego State CA Zip Code 92102	Amount of Each Disbursement this Period
	Purpose of Disbursement Processing Fee	<input type="text" value="56.25"/>
	Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/Type

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="333.83"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Complete Campaigns.com

Mailing Address 610 Gateway Center Way, Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement
Processing Fee
Candidate Name

001
Category/
Type

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

Transaction ID: EXP.B.10203
Date of Disbursement

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

Amount of Each Disbursement this Period

54.38

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Computer History Museum, Inc.

Mailing Address 1401 Shoreline Blvd.

City Mountain View State CA Zip Code 94043

Purpose of Disbursement
Election Night Party Facility Rental
Candidate Name

001
Category/
Type

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

Transaction ID: EXP.B.10095
Date of Disbursement

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

Amount of Each Disbursement this Period

2500.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Eric K. Jaffe dba Jaffe Public Strategies

Mailing Address 1049 Scott Street

City San Francisco State CA Zip Code 94115

Purpose of Disbursement
Website Maintenance
Candidate Name

001
Category/
Type

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

Transaction ID: EXP.B.10107
Date of Disbursement

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

Amount of Each Disbursement this Period

835.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

3389.38

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Anna Eshoo	Transaction ID: EXP.B.10098 Date of Disbursement 11 / 04 / 2008
	Mailing Address 120 Forest Lane	Amount of Each Disbursement this Period 99.95
	City Menlo Park State CA Zip Code 94025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Gifts for Constituents Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

B.	Full Name (Last, First, Middle Initial) Anna Eshoo	Transaction ID: EXP.B.10165 Date of Disbursement 11 / 18 / 2008
	Mailing Address 120 Forest Lane	Amount of Each Disbursement this Period 250.00
	City Menlo Park State CA Zip Code 94025	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Election Night Party Catering Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

C.	Full Name (Last, First, Middle Initial) Weir and Associates	Transaction ID: EDT.B.117 Date of Disbursement 11 / 18 / 2008
	Mailing Address 1064 Shell Blvd., Suite G	Amount of Each Disbursement this Period 250.00
	City Foster City State CA Zip Code 94404	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Election Night Party Catering Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	349.95
TOTAL This Period (last page this line number only)	

[MEMO ITEM]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

<p>A. Full Name (Last, First, Middle Initial) Fiorello Consulting</p> <p>Mailing Address 3914 Barcroft Mews Court</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10045</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) First Class Plus, LLC</p> <p>Mailing Address 1750 Cesar Chavez Street, Unit E</p> <p>City San Francisco State CA Zip Code 94124</p> <p>Purpose of Disbursement Fundraising Mailing Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10108</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="550.12"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Godspeed Courier Services, Inc.</p> <p>Mailing Address P.O. Box 423293</p> <p>City San Francisco State CA Zip Code 94124</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10053</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="27.00"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="3577.12"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

<p>A. Full Name (Last, First, Middle Initial) Mary Leigh Henneberry</p> <p>Mailing Address 185 Berry Street, Suite 1590</p> <p>City San Francisco State CA Zip Code 94107</p> <p>Purpose of Disbursement Fundraising Design</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10010</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1622.08"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Olson, Hagel & Fishburn, LLP</p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Legal & Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.10164</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9935.02"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Olympic Mailing Services, Inc.</p> <p>Mailing Address 467 Nelo Street</p> <p>City Santa Clara State CA Zip Code 95054</p> <p>Purpose of Disbursement Campaign Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: EXP.B.9977</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="17239.74"/></p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Olympic Mailing Services, Inc.	Transaction ID: EXP.B.10022 Date of Disbursement 10 / 21 / 2008
	Mailing Address 467 Nelo Street	Amount of Each Disbursement this Period 8712.45
	City Santa Clara State CA Zip Code 95054	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Postage Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		006 Category/Type

B.	Full Name (Last, First, Middle Initial) Olympic Mailing Services, Inc.	Transaction ID: EXP.B.10028 Date of Disbursement 10 / 22 / 2008
	Mailing Address 467 Nelo Street	Amount of Each Disbursement this Period 2504.60
	City Santa Clara State CA Zip Code 95054	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Mailing Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		006 Category/Type

C.	Full Name (Last, First, Middle Initial) Olympic Mailing Services, Inc.	Transaction ID: EXP.B.10049 Date of Disbursement 10 / 29 / 2008
	Mailing Address 467 Nelo Street	Amount of Each Disbursement this Period 1374.50
	City Santa Clara State CA Zip Code 95054	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Campaign Mailing Services Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		006 Category/Type

SUBTOTAL of Disbursements This Page (optional)	▶	12591.55
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) Political Data, Inc. Mailing Address P.O. Box 1706 City Burbank State CA Zip Code 91507 Purpose of Disbursement Mailing Lists Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10050 Date of Disbursement 10 / 29 / 2008
	Amount of Each Disbursement this Period 786.98
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 001

B. Full Name (Last, First, Middle Initial) Giselle Schmitz Mailing Address 1842 Hackett Avenue City Mountain View State CA Zip Code 94043 Purpose of Disbursement Campaign Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10035 Date of Disbursement 10 / 24 / 2008
	Amount of Each Disbursement this Period 5000.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 003

C. Full Name (Last, First, Middle Initial) Staton & Hughes, Inc. Mailing Address 185 Berry Street, Suite 1590 City San Francisco State CA Zip Code 94107 Purpose of Disbursement Campaign Consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10047 Date of Disbursement 10 / 28 / 2008
	Amount of Each Disbursement this Period 6500.00
	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Category/Type 003

SUBTOTAL of Disbursements This Page (optional) ▶	12286.98
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Staton & Hughes, Inc.

Mailing Address 185 Berry Street, Suite 1590

City State Zip Code
San Francisco CA 94107

Purpose of Disbursement
Campaign Courier, Website Maintenance & Administrative Fees

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10101
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

234.02

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Staton & Hughes, Inc.

Mailing Address 185 Berry Street, Suite 1590

City State Zip Code
San Francisco CA 94107

Purpose of Disbursement
Phone Banks

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10102
Date of Disbursement

11 / 11 / 2008

Amount of Each Disbursement this Period

1952.04

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
Christine Stavem

Mailing Address 240 Dolores Street, #108

City State Zip Code
San Francisco CA 94103

Purpose of Disbursement
Fundraising Catering

Candidate Name

003
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10048
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

6089.29

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

8275.35

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Christine Stavem Mailing Address 240 Dolores Street, #108 City San Francisco State CA Zip Code 94103 Purpose of Disbursement Fundraising Catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10171 Date of Disbursement 11 / 19 / 2008 Amount of Each Disbursement this Period 514.73 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	003 Category/ Type
B.	Full Name (Last, First, Middle Initial) Transvideo Studios Mailing Address 990 Villa Street City Mountain View State CA Zip Code 94041 Purpose of Disbursement Video Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10173 Date of Disbursement 11 / 21 / 2008 Amount of Each Disbursement this Period 379.13 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	001 Category/ Type
C.	Full Name (Last, First, Middle Initial) US Bank Mailing Address P.O. Box 64799 City St. Paul State MN Zip Code 55164 Purpose of Disbursement Bank Fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.10100 Date of Disbursement 11 / 01 / 2008 Amount of Each Disbursement this Period 252.01 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	1145.87
TOTAL This Period (last page this line number only)	84764.72

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.	Full Name (Last, First, Middle Initial) Asian American Political Empowerment Committee	Transaction ID: EXP.B.9980 Date of Disbursement 10 / 17 / 2008
	Mailing Address 465 North Wolfe Road	Amount of Each Disbursement this Period 1250.00
	City Sunnyvale State CA Zip Code 94086	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Civic Donation Candidate Name Asian American Political Empowerment Committee Category/Type 012	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Assyrian Aid Society of America	Transaction ID: EXP.B.10097 Date of Disbursement 11 / 04 / 2008
	Mailing Address 350 Berkeley Park Blvd.	Amount of Each Disbursement this Period 1000.00
	City Berkeley State CA Zip Code 94707	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Civic Donation Candidate Name Category/Type 012	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Burton for Democratic Party Chair	Transaction ID: EXP.B.10170 Date of Disbursement 11 / 19 / 2008
	Mailing Address 465 California Street, Suite 400	Amount of Each Disbursement this Period 2500.00
	City San Francisco State CA Zip Code 94104	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Purpose of Disbursement Contribution to non-federal committee Candidate Name Burton for Democratic Party Chair Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	4750.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

<p>A. Full Name (Last, First, Middle Initial) Carmouche for Congress</p> <p>Mailing Address 912 Kings Highway</p> <p>City Shreveport State LA Zip Code 71104</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Carmouche for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>State: LA District: 04</p>	<p>Transaction ID: EXP.B.10169 Date of Disbursement 11 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>B. Full Name (Last, First, Middle Initial) Dahlkemper for Congress</p> <p>Mailing Address 1921 West 8th Street</p> <p>City Erie State PA Zip Code 16505</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Dahlkemper for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: PA District: 03</p>	<p>Transaction ID: EXP.B.10027 Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>
<p>C. Full Name (Last, First, Middle Initial) Jim Himes for Congress</p> <p>Mailing Address 65 High Ridge Road, Box 456</p> <p>City Stamford State CT Zip Code 06905</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Jim Himes for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CT District: 04</p>	<p>Transaction ID: EXP.B.10033 Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p><input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>

SUBTOTAL of Disbursements This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial)
Murtha for Congress Committee

Mailing Address 2238 Woodcrest Drive

City Johnstown State PA Zip Code 15905

Purpose of Disbursement
Contribution

Candidate Name
Murtha for Congress Committee

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 12

Transaction ID: EXP.B.10031
Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B. Full Name (Last, First, Middle Initial)
PAC to the Future

Mailing Address PMB 3230 268 Bush Street

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Contribution

Candidate Name
PAC to the Future

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10052
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

5000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C. Full Name (Last, First, Middle Initial)
Pelosi for Congress, Nancy

Mailing Address 235 Montgomery Street, Suite 610

City San Francisco State CA Zip Code 94104

Purpose of Disbursement
Contribution

Candidate Name
Pelosi for Congress, Nancy

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 08

Transaction ID: EXP.B.10051
Date of Disbursement

10 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Peters for Congress, Gary

Mailing Address 5600 West Maple

City State Zip Code
West Bloomfield MI 48322

Purpose of Disbursement
Contribution

Candidate Name
Peters for Congress, Gary

Office Sought: House
 Senate
 President
State: MI District: 09

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: EXP.B.10030
Date of Disbursement

10 / 23 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

B.

Full Name (Last, First, Middle Initial)
Santa Clara University

Mailing Address 500 El Camino Real

City State Zip Code
Santa Clara CA 95053

Purpose of Disbursement
Civic Donation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

012
Category/
Type

Transaction ID: EXP.B.10099
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

C.

Full Name (Last, First, Middle Initial)
St. Anthony's Padua Dining Room

Mailing Address 3500 Middlefield Road

City State Zip Code
Menlo Park CA 94025

Purpose of Disbursement
Civic Donation

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

012
Category/
Type

Transaction ID: EXP.B.10167
Date of Disbursement

11 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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 59 / 62

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

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NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A.

Full Name (Last, First, Middle Initial)
Zen Hospice Project

Mailing Address 503-A Divisadero Street

City San Francisco State CA Zip Code 94117-2212

Purpose of Disbursement
Civic Donation

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.10096
Date of Disbursement

11 / 04 / 2008

Amount of Each Disbursement this Period

2000.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

24750.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase Card Services			Nature of Debt (Purpose): Meals with Constituents
Mailing Address P.O. Box 94014			
City Palatine	State IL	ZIP Code 60094	

Outstanding Balance Beginning This Period <input type="text" value="468.99"/>		Transaction ID: PAY:D:10012	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="468.99"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase Card Services			Nature of Debt (Purpose): Shipping
Mailing Address P.O. Box 94014			
City Palatine	State IL	ZIP Code 60094	

Outstanding Balance Beginning This Period <input type="text" value="22.82"/>		Transaction ID: PAY:D:10013	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="22.82"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase Card Services			Nature of Debt (Purpose): Gifts for Constituents
Mailing Address P.O. Box 94014			
City Palatine	State IL	ZIP Code 60094	

Outstanding Balance Beginning This Period <input type="text" value="247.86"/>		Transaction ID: PAY:D:10014	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="247.86"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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

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

(Use separate schedule(s) for each numbered line)	PAGE 61 / 62
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
 Anna Eshoo for Congress

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Chase Card Services			Nature of Debt (Purpose): Phone
Mailing Address P.O. Box 94014			
City Palatine	State IL	ZIP Code 60094	

Outstanding Balance Beginning This Period		Transaction ID: PAY:D:10015	
126.88			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	126.88	0.00	

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

Image# 29990819017

Form/Schedule: SA11C

Transaction ID: INC.A.10163

federally permissible funds
