

# 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  
JOHN T. DOOLITTLE FOR CONGRESS

ADDRESS (number and street) 2150 RIVER PLAZA DR. #150  
 Check if different than previously reported. (ACC)  
SACRAMENTO CA 95833

2. **FEC IDENTIFICATION NUMBER** C00242768  
**CITY** STATE ZIP CODE STATE DISTRICT  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)  
CA 04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P)  General (12G)  Runoff (12R)
- Convention (12C)  Special (12S)
- Election on [ ] [ ] [ ] in the State of [ ]

(c) 30-Day **POST**-Election Report for the:

- General (30G)  Runoff (30R)  Special (30S)
- Election on [ ] [ ] [ ] in the State of [ ]

5. Covering Period 01 01 2008 through 03 31 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 David Bauer  
Signature of Treasurer Electronically Filed by David Bauer Date 05 09 2008

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										<b>FEC FORM 3</b> (Revised 02/2003)
-----------------	--	--	--	--	--	--	--	--	--	--

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

JOHN T. DOOLITTLE FOR CONGRESS

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	3

D	D
3	1

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)).....	11643.00	350685.10
(b) Total Contribution Refunds (from Line 20(d)).....	8689.00	14396.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	2954.00	336289.10
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	19359.88	584861.26
(b) Total Offsets to Operating Expenditures (from Line 14).....	132.00	53673.84
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	19227.88	531187.42
8. Cash on Hand at Close of Reporting Period (from Line 27).....	23107.46	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	152852.15	

**For further information contact:**

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name  
JOHN T. DOOLITTLE FOR CONGRESS

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

<b>I. RECEIPTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Election Cycle-to-Date</b>
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	10836.00	210608.00
(i) Itemized (use Schedule A).....	457.00	21564.10
(ii) Unitemized.....	11293.00	232172.10
(iii) TOTAL of contributions from individuals..... ▶	0.00	313.00
(b) Political Party Committees.....	350.00	118200.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	11643.00	350685.10
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))		
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	<b>0.00</b>	<b>0.00</b>
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	<b>132.00</b>	<b>53673.84</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	<b>0.00</b>	<b>0.00</b>
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>11775.00</b>	<b>404358.94</b>

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
**Total This Period**

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

17. OPERATING EXPENDITURES.....	19359.88	584861.26
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	7689.00	11896.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	1000.00	2500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	8689.00	14396.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>28048.88</b>	<b>599257.26</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	39381.34
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	11775.00
25. SUBTOTAL (add Line 23 and Line 24).....	51156.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28048.88
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	23107.46

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 43
	<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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) GLENN J. CARPENTER		Date of Receipt
	Mailing Address 7521 FARMHOUSE CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Citrus Heights	CA	95610
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.71137
Name of Employer NONE		Occupation NONE	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 108.00
		<input type="text"/> 265.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>B.</b>	Full Name (Last, First, Middle Initial) BETTY LOU DILLINGHAM		Date of Receipt
	Mailing Address 1508 SMITH ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 1 2 / 2 0 0 8
	City	State	Zip Code
	YUBA CITY	CA	95995
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.71164
Name of Employer N/A		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 500.00
		<input type="text"/> 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT FOURIE		Date of Receipt
	Mailing Address P. O. BOX 329		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 0 2 / 1 2 / 2 0 0 8
	City	State	Zip Code
	Somerset	CA	95684
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> INC.A.71135
Name of Employer none		Occupation retired	Amount of Each Receipt this Period
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	<input type="text"/> 108.00
		<input type="text"/> 315.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> <b>716.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 43  
(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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial) WILLIAM HEINLEIN		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 1523 MISTY WOOD DR.		Transaction ID: INC.A.71136
City ROSEVILLE	State CA	Zip Code 95747
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 108.00
Name of Employer N/A	Occupation retired	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 272.00	

**B.**

Full Name (Last, First, Middle Initial) GARY ROSS		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 3761 NICOLAUS RD.		Transaction ID: INC.A.71139
City LINCOLN	State CA	Zip Code 95648
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Marybelle Farms	Occupation President	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

**C.**

Full Name (Last, First, Middle Initial) PAUL W. ZGRAGGEN		Date of Receipt MM / DD / YYYY 02 / 12 / 2008
Mailing Address 13085 MOSS ROCK DR.		Transaction ID: INC.A.71138
City Auburn	State CA	Zip Code 95602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 108.00
Name of Employer N/A	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 415.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	716.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 43  
(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)  
**JOHN T. DOOLITTLE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM BREINER**

Mailing Address **13410 LAGUNITA WAY**

City **JACKSON** State **CA** Zip Code **95642**

FEC ID number of contributing federal political committee. C

Name of Employer **N/A** Occupation **NOT EMPLOYED**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1157.00

Date of Receipt MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** INC.A.71161

Amount of Each Receipt this Period 350.00

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

**B.** Full Name (Last, First, Middle Initial)  
**ROGER W. NIELLO**

Mailing Address **2020 FULTON AVE.**

City **Sacramento** State **CA** Zip Code **95825**

FEC ID number of contributing federal political committee. C

Name of Employer **STATE OF CALIF.** Occupation **ASSEMBLYMAN**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1350.00

Date of Receipt MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** INC.A.71162

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)  
**CAMILLE G. SWOBODA**

Mailing Address **8337 LAKELAND DR.**

City **Granite Bay** State **CA** Zip Code **95746**

FEC ID number of contributing federal political committee. C

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 293.00

Date of Receipt MM / DD / YYYY  
02 / 14 / 2008

**Transaction ID:** INC.A.71157

Amount of Each Receipt this Period 108.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... 1458.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 43
	<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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) HAROLD A. TRITCH		Date of Receipt
	Mailing Address 8133 GLEN ALTA WAY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 4 / 2 0 0 8
	City	State	Zip Code
	Citrus Heights	CA	95610
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71158
		Amount of Each Receipt this Period	
		<input type="text"/> 28.00	
Name of Employer NONE		Occupation NONE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 217.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) HENRY C. WALTHER		Date of Receipt
	Mailing Address 6845 RANCHO LOS PAVOS		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 1 9 / 2 0 0 8
	City	State	Zip Code
	Granite Bay	CA	95746
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71172
		Amount of Each Receipt this Period	
		<input type="text"/> 350.00	
Name of Employer CASE		Occupation PHYSICIAN	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 700.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) HENRY VAN MOURIK		Date of Receipt
	Mailing Address 23 GOLFWOOD CT.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 2 / 2 0 / 2 0 0 8
	City	State	Zip Code
	ROSEVILLE	CA	95678
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71187
		Amount of Each Receipt this Period	
		<input type="text"/> 108.00	
Name of Employer self		Occupation sales	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text"/> 215.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 486.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>



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

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

FOR LINE NUMBER: PAGE 9 / 43  
(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)  
**JOHN T. DOOLITTLE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**CARROLL BROCK**

Mailing Address **4474 WANDERLUST LOOP**

City **ROSEVILLE** State **CA** Zip Code **95747**

FEC ID number of contributing federal political committee. C

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 272.00

Date of Receipt 02 / 21 / 2008  
**Transaction ID: INC.A.71169**

Amount of Each Receipt this Period 108.00

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

**B.** Full Name (Last, First, Middle Initial)  
**ROBERT J. CREEDON**

Mailing Address **10660 WILTON ROAD**

City **Elk Grove** State **CA** Zip Code **95624**

FEC ID number of contributing federal political committee. C

Name of Employer **SENATOR FORD** Occupation **AUTO DEALER**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2000.00

Date of Receipt 02 / 21 / 2008  
**Transaction ID: INC.A.71175**

Amount of Each Receipt this Period 500.00

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

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

Mailing Address **13005 CREEKVIEW CT.**

City **Auburn** State **CA** Zip Code **95603**

FEC ID number of contributing federal political committee. C

Name of Employer **SELF** Occupation **INVESTOR**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 02 / 21 / 2008  
**Transaction ID: INC.A.71167**

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) ..... 958.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 43  
(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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
DOLORES A. RICHBAW  
Mailing Address 7500 SIERRA DR.  
City State Zip Code  
Granite Bay CA 95746  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 1700.00  
Date of Receipt: 02 / 21 / 2008  
Transaction ID: INC.A.71171  
Amount of Each Receipt this Period: 500.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
JACK S. TAYLOR  
Mailing Address 2005 PORT ALBANS CIR.  
City State Zip Code  
Newport Beach CA 92660  
FEC ID number of contributing federal political committee. **C**  
Name of Employer N/A Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 723.00  
Date of Receipt: 02 / 21 / 2008  
Transaction ID: INC.A.71170  
Amount of Each Receipt this Period: 108.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
JOANN SHEPHERD  
Mailing Address PO BOX 66  
City State Zip Code  
GEORGETOWN CA 95634  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation NONE  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 850.00  
Date of Receipt: 03 / 01 / 2008  
Transaction ID: INC.A.71191  
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) ..... ► 958.00  
**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 11 / 43
	<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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) JO ANN ALLRED		Date of Receipt
	Mailing Address 8781 ZUMWALT AVE.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Orangevale	CA	95662
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71180
Name of Employer NONE		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 28.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 221.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) LOELLEN R. BONSER		Date of Receipt
	Mailing Address 2590 NORTHRIDGE DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Placerville	CA	95667
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71181
Name of Employer N/A		Occupation NOT EMPLOYED	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 108.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 215.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) KENNETH B. NOACK		Date of Receipt
	Mailing Address 2740 LAUREL DR.		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Sacramento	CA	95825
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71185
Name of Employer NOACK AND DEAN		Occupation INSURANCE SALES	Amount of Each Receipt this Period
Receipt For: 2008		Election Cycle-to-Date ▼	<input type="text"/> 200.00
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General			<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
<input type="checkbox"/> Other (specify) ▼		<input type="text"/> 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 336.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 43  
(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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD H. PLAND

Mailing Address 11292 MCKIBBIN

City State Zip Code  
Jamestown CA 95327

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

Name of Employer Occupation  
FIBREBOARD VP

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

Amount of Each Receipt this Period  
108.00

Transaction ID: INC.A.71182

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

**B.**

Full Name (Last, First, Middle Initial)  
BONNIE WILLIAMS

Mailing Address 9260 WINDING OAK DR.

City State Zip Code  
Fair Oaks CA 95628

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

Name of Employer Occupation  
NONE housewife

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

Amount of Each Receipt this Period  
216.00

Transaction ID: INC.A.71183

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

**C.**

Full Name (Last, First, Middle Initial)  
BONNIE WILLIAMS

Mailing Address 9260 WINDING OAK DR.

City State Zip Code  
Fair Oaks CA 95628

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

Name of Employer Occupation  
NONE housewife

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

Amount of Each Receipt this Period  
700.00

Transaction ID: INC.A.71184

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1024.00**

**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 / 43  
(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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
JO ANN ALLRED  
Mailing Address 8781 ZUMWALT AVE.  
City Orangevale State CA Zip Code 95662  
FEC ID number of contributing federal political committee. **C**  
Name of Employer NONE Occupation RETIRED  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 221.00  
Date of Receipt 03 / 10 / 2008  
Transaction ID: INC.A.71189  
Amount of Each Receipt this Period 14.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**B.** Full Name (Last, First, Middle Initial)  
ELINOR BRADY  
Mailing Address 1410 LAKEHILLS DR.  
City El Dorado Hills State CA Zip Code 95762  
FEC ID number of contributing federal political committee. **C**  
Name of Employer none Occupation housewife  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 222.00  
Date of Receipt 03 / 10 / 2008  
Transaction ID: INC.A.71192  
Amount of Each Receipt this Period 108.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**C.** Full Name (Last, First, Middle Initial)  
PAUL SNIDER  
Mailing Address 5150 MADISON AVE.  
City Sacramento State CA Zip Code 95841  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SNIDER EXECUTIVE OFFICE Occupation OWNER  
Receipt For: 2008 Election Cycle-to-Date  
 Primary    General  
 Other (specify) ▼ 2300.00  
Date of Receipt 03 / 10 / 2008  
Transaction ID: INC.A.71200  
Amount of Each Receipt this Period 300.00  
 Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **422.00**  
**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 / 43  
(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)  
**JOHN T. DOOLITTLE FOR CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RENEE SNIDER**

Mailing Address **8933 MACKEY RD.**

City **Elk Grove** State **CA** Zip Code **95624**

FEC ID number of contributing federal political committee. C

Name of Employer **N/A** Occupation **NOT EMPLOYED**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 03 / 10 / 2008  
**Transaction ID: INC.A.71201**  
 Amount of Each Receipt this Period 200.00

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

**B.** Full Name (Last, First, Middle Initial)  
**BONNIE WILLIAMS**

Mailing Address **9260 WINDING OAK DR.**

City **Fair Oaks** State **CA** Zip Code **95628**

FEC ID number of contributing federal political committee. C

Name of Employer **NONE** Occupation **housewife**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 2199.00

Date of Receipt 03 / 10 / 2008  
**Transaction ID: INC.A.71190**  
 Amount of Each Receipt this Period 28.00

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

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

Mailing Address **3180 LAZURITE**

City **Rescue** State **CA** Zip Code **95672**

FEC ID number of contributing federal political committee. C

Name of Employer **NONE** Occupation **NONE**

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Election Cycle-to-Date ▼ 321.00

Date of Receipt 03 / 12 / 2008  
**Transaction ID: INC.A.71197**  
 Amount of Each Receipt this Period 122.00

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: PAGE 15 / 43  
(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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
CRAIG LEDBETTER

Mailing Address 1416 IRIS DR. APT 4

City State Zip Code  
LODI CA 95242

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

Name of Employer Occupation  
N/A RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 12 / 2008

**Transaction ID:** INC.A.71214

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)  
JASON LEINEKE

Mailing Address 4001 BUCHANAN DR.

City State Zip Code  
Fair Oaks CA 95628

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

Name of Employer Occupation  
JOAN LEINEKE CATERING CATERER

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

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 12 / 2008

**Transaction ID:** INC.A.71199

Amount of Each Receipt this Period  
350.00

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

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

Mailing Address 8337 LAKELAND DR.

City State Zip Code  
Granite Bay CA 95746

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

Name of Employer Occupation  
NONE RETIRED

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

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 12 / 2008

**Transaction ID:** INC.A.71194

Amount of Each Receipt this Period  
7.00

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

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1357.00**

**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 / 43  
(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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
JOHN R. VANDENBERG

Mailing Address 10210 TIMBERLAND DR.

City State Zip Code  
GRASS VALLEY CA 95949

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

Name of Employer none Occupation retired

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 1100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 12 / 2008

Transaction ID: INC.A.71198

Amount of Each Receipt this Period  
500.00

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

**B.** Full Name (Last, First, Middle Initial)  
ROBERT GALLAGHER

Mailing Address 3999 Bear River

City State Zip Code  
Rio Oso CA 95674

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

Name of Employer N/A Occupation NOT EMPLOYED

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 17 / 2008

Transaction ID: INC.A.71208

Amount of Each Receipt this Period  
150.00

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

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

Mailing Address 9715 WEDGEWOOD PLACE

City State Zip Code  
Granite Bay CA 95746

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

Name of Employer LYON REALTY Occupation REALTOR

Receipt For: 2008 Election Cycle-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 17 / 2008

Transaction ID: INC.A.71207

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) ..... ► 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) JOSEPH E. DORR	Date of Receipt MM / DD / YYYY 03 / 20 / 2008
	Mailing Address 910 SUNRISE AVE., NO. A1	<b>Transaction ID:</b> INC.A.71242
	City State Zip Code Roseville CA 95661	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES E. BOPP	Date of Receipt MM / DD / YYYY 03 / 24 / 2008
	Mailing Address 8013 MESA OAK WAY	<b>Transaction ID:</b> INC.A.71210
	City State Zip Code Citrus Heights CA 95610	Amount of Each Receipt this Period 108.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N/A	Occupation RETIRED	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 836.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) HELEN DORR	Date of Receipt MM / DD / YYYY 03 / 24 / 2008
	Mailing Address 1920 VISTA CREEK DR.	<b>Transaction ID:</b> INC.A.71215
	City State Zip Code Roseville CA 95661	Amount of Each Receipt this Period 350.00
	FEC ID number of contributing federal political committee. <b>C</b>	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer N/A	Occupation NONE	
Receipt For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>808.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 19 / 43
	(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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JAMES MESNIER		Date of Receipt
	Mailing Address 5209 CAMPCREEK LP		<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	ROSEVILLE	CA	95747
	FEC ID number of contributing federal political committee.		Transaction ID: INC.A.71211
	Amount of Each Receipt this Period		<input type="text" value="122.00"/>
Name of Employer N/A		Occupation NOT EMPLOYED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2008		Election Cycle-to-Date ▼	
<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="text" value="243.00"/>	
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="122.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="10836.00"/>

# SCHEDULE A (FEC Form 3 ) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 / 43  
(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)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF BRUCE KRANZ

Mailing Address P.O. BOX 352

City State Zip Code  
MEADOW VISTA CA 95722

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

Name of Employer Occupation

Receipt For: 2008  
 Primary  General  
 Other (specify) ▼

Election Cycle-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2008

Transaction ID: INC.A.71160

Amount of Each Receipt this Period  
350.00

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

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	350.00



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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) JULIA DOOLITTLE <hr/> Mailing Address 10531 MEREWORTH LN. <hr/> City State Zip Code Oakton VA 22124 <hr/> Purpose of Disbursement CANDY Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXP.B.71147 Date of Disbursement 02 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 32.49 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) JULIA DOOLITTLE <hr/> Mailing Address 10531 MEREWORTH LN. <hr/> City State Zip Code Oakton VA 22124 <hr/> Purpose of Disbursement PARKING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXP.B.71152 Date of Disbursement 02 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 18.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) JULIA DOOLITTLE <hr/> Mailing Address 10531 MEREWORTH LN. <hr/> City State Zip Code Oakton VA 22124 <hr/> Purpose of Disbursement CAB FARE Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: EXP.B.71143 Date of Disbursement 02 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 21.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	71.49
<b>TOTAL</b> This Period (last page this line number only) .....	







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

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

FOR LINE NUMBER: (check only one)

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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b> COMPLETE CAMPAIGNS Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.71188 Date of Disbursement 02 / 25 / 2008
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 8.10
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
<b>B.</b> COMPLETE CAMPAIGNS Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.71176 Date of Disbursement 02 / 25 / 2008
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 37.50
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
<b>C.</b> FIRST CARD Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Office Sought: State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EXP.B.71177 Date of Disbursement 03 / 03 / 2008
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 11120.86
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001

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

11166.46

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) ALL AMERICAN STORAGE	Transaction ID: PDT.B.892 Date of Disbursement 01 / 03 / 2008
	Mailing Address 3070 TAYLOR RD.	Amount of Each Disbursement this Period 366.00
	City ROSEVILLE State CA Zip Code 95678	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement STORAGE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) APPLE COMPUTER	Transaction ID: PDT.B.885 Date of Disbursement 01 / 03 / 2008
	Mailing Address 1 INFINITE LOOP	Amount of Each Disbursement this Period 51.45
	City CUPERTINO State CA Zip Code 95014	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement SOFTWARE Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHARLIE PALMER STEAKHOUSE	Transaction ID: PDT.B.889 Date of Disbursement 01 / 03 / 2008
	Mailing Address 101 CONSTITUTION AVE. NW	Amount of Each Disbursement this Period 312.55
	City WASHINGTON State DC Zip Code 20001	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
	Purpose of Disbursement MEETING Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
GRANITE BAY POSTAL

Mailing Address 4120 DOUGLAS BLVD.

City GRANITE BAY State CA Zip Code 95746

Purpose of Disbursement  
POSTAGE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: PDT.B.900  
Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

90.00

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

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)  
J2 GLOBAL COMMUNICATIONS

Mailing Address 6922 HOLLYWOOD BLVD. #500

City HOLLYWOOD State CA Zip Code 90028

Purpose of Disbursement  
FAX SVC.

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: PDT.B.886  
Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

15.00

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
PUBLIC STORAGE

Mailing Address 11334 LEE HWY

City FAIRFAX State VA Zip Code 22030

Purpose of Disbursement  
STORAGE

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: PDT.B.893  
Date of Disbursement

01 / 03 / 2008

Amount of Each Disbursement this Period

3516.00

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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

**A.** Full Name (Last, First, Middle Initial)  
ROSEVILLE CARVERS

Mailing Address EUREKA RD.

City Roseville State CA Zip Code 95661

Purpose of Disbursement MEETINGS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: PDT.B.888  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
ROSEVILLE PARKS AND REC

Mailing Address 330 VERNON ST.

City ROSEVILLE State CA Zip Code 95678

Purpose of Disbursement FACILITY RENTAL

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: PDT.B.895  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
SEE'S CANDIES

Mailing Address 1825 DOUGLAS BLVD.

City Roseville State CA Zip Code 95661

Purpose of Disbursement CANDY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: District:

Transaction ID: PDT.B.887  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

[MEMO ITEM]

**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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) THE CONGRESSIONAL INSTITUTE, INC. <hr/> Mailing Address 316 PENNSYLVANIA AVE., #403 <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement CONFERENCE Candidate Name _____ Category/Type <b>002</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: PDT.B.899 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2668.00 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) UNITED AIRLINES <hr/> Mailing Address SACRAMENTO INT'L AIRPORT <hr/> City Sacramento State CA Zip Code 95838 <hr/> Purpose of Disbursement AIRFARE Candidate Name _____ Category/Type <b>002</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: PDT.B.898 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 749.09 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
C.	Full Name (Last, First, Middle Initial) UPS STORE <hr/> Mailing Address 970 SUNRISE AVE. #125 <hr/> City ROSEVILLE State CA Zip Code 95661 <hr/> Purpose of Disbursement SHIPPING Candidate Name _____ Category/Type <b>001</b> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: PDT.B.896 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 647.10 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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





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

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

FOR LINE NUMBER:  
(check only one)

PAGE 32 / 43

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>COMPLETE CAMPAIGNS</b>  Mailing Address 610 GATEWAY CENTER WAY #K  City SAN DIEGO State CA Zip Code 92102  Purpose of Disbursement MERCHANT FEE Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: EXP.B.71243 Date of Disbursement 03 / 20 / 2008  Amount of Each Disbursement this Period 26.25  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>COMPLETE CAMPAIGNS</b>  Mailing Address 610 GATEWAY CENTER WAY #K  City SAN DIEGO State CA Zip Code 92102  Purpose of Disbursement MERCHANT FEE Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: EXP.B.71217 Date of Disbursement 03 / 20 / 2008  Amount of Each Disbursement this Period 25.75  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FEDEX</b>  Mailing Address P. O. BOX 7221  City PASADENA State CA Zip Code 91109  Purpose of Disbursement SHIPPING Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼  State: District:	Transaction ID: EXP.B.71220 Date of Disbursement 03 / 25 / 2008  Amount of Each Disbursement this Period 53.74  <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

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

105.74

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



# SCHEDULE B (FEC Form 3 ) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
FIRST CARD

Mailing Address P. O. BOX 94014

City PALATINE State IL Zip Code 60094

Purpose of Disbursement  
CREDIT CARD STATEMENT

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71221  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

1217.60

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

B.

Full Name (Last, First, Middle Initial)  
CAPITAL GRILLE

Mailing Address 601 PENN AVE., NW

City Washington State DC Zip Code 20004

Purpose of Disbursement  
FUNDRAISING EXP.

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EDT.B.1237  
Date of Disbursement

01 / 26 / 2008

Amount of Each Disbursement this Period

112.40

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

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
GREENBRIER

Mailing Address 300 W. MAIN ST.

City WHITE SULPHUR State WV Zip Code 24986

Purpose of Disbursement  
FUNDRAISING EXP.

Candidate Name

003  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EDT.B.1236  
Date of Disbursement

01 / 26 / 2008

Amount of Each Disbursement this Period

245.52

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

[MEMO ITEM]

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

1217.60

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

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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A.</b> Full Name (Last, First, Middle Initial) <b>OFFICE DEPOT</b> Mailing Address 11119 FOLSOM BLVD. City Rancho Cordova State CA Zip Code 95670 Purpose of Disbursement FUNDRAISING SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EDT.B.1239 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 8
	Amount of Each Disbursement this Period 209.94 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>B.</b> Full Name (Last, First, Middle Initial) <b>GRANITE BAY POSTAL</b> Mailing Address 4120 DOUGLAS BLVD. City GRANITE BAY State CA Zip Code 95746 Purpose of Disbursement BOX RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EDT.B.1241 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 8
	Amount of Each Disbursement this Period 13.72 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

<b>C.</b> Full Name (Last, First, Middle Initial) <b>ROSEVILLE PARKS AND REC</b> Mailing Address 330 VERNON ST. City ROSEVILLE State CA Zip Code 95678 Purpose of Disbursement FACILITY RENTAL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: EDT.B.1243 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 8
	Amount of Each Disbursement this Period 411.50 <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 35 / 43

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.	Full Name (Last, First, Middle Initial) POSTMASTER	Transaction ID: EDT.B.1242 Date of Disbursement
	Mailing Address 1039 SUNRISE AVE.	<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City Roseville State CA Zip Code 95661	Amount of Each Disbursement this Period
	Purpose of Disbursement POSTAGE Candidate Name	<input type="text" value="123.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>[MEMO ITEM]</b>
B.	Full Name (Last, First, Middle Initial) SUREWEST COMMUNICATIONS	Transaction ID: EXP.B.71232 Date of Disbursement
	Mailing Address P. O. BOX 30697	<input type="text" value="03"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City LOS ANGELES State CA Zip Code 90030	Amount of Each Disbursement this Period
	Purpose of Disbursement PHONE SVC. Candidate Name	<input type="text" value="251.75"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**251.75**

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

**19183.07**

# 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 checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
JONG CHEN

Mailing Address 3941 J STREET

City State Zip Code  
SACRAMENTO CA 95819

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71218  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

800.00

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

B.

Full Name (Last, First, Middle Initial)  
ROBERT DAWSON

Mailing Address 1214 KEY DRIVE

City State Zip Code  
ALEXANDRIA VA 22302

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71219  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

800.00

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

C.

Full Name (Last, First, Middle Initial)  
ROGER GWINN

Mailing Address 504 IVY CIRCLE

City State Zip Code  
Alexandria VA 22302

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71223  
Date of Disbursement

03 / 25 / 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) ..... ▶

2600.00

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

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
Mr. Richard Marriott

Mailing Address 10400 Fernwood Rd. Dept 901

City State Zip Code  
Bethesda MD 20817

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71225  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

2300.00

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

B.

Full Name (Last, First, Middle Initial)  
WILLIAM H. MULLIN

Mailing Address 685 OAKHAVEN RD.

City State Zip Code  
Auburn CA 95603

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71226  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

500.00

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

C.

Full Name (Last, First, Middle Initial)  
THOMAS R. OLLER

Mailing Address P.O. BOX 370

City State Zip Code  
SAN ANDREAS CA 95249

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71227  
Date of Disbursement

03 / 25 / 2008

Amount of Each Disbursement this Period

400.00

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

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

3200.00

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 39 / 43

<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 checked="" type="checkbox"/>	20c	<input type="checkbox"/>	21

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

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

A.

Full Name (Last, First, Middle Initial)  
UPSPAC

Mailing Address 55 GLENLAKE PARKWAY, N.E.

City Atlanta State GA Zip Code 30328

Purpose of Disbursement  
REFUND

Candidate Name

010  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: EXP.B.71233  
Date of Disbursement

03 / 25 / 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) ..... ►

1000.00

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

1000.00

**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)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> JULIA DOOLITTLE			Nature of Debt (Purpose): CAB FARE
Mailing Address 10531 MEREWORTH LN.			
City Oakton	State VA	ZIP Code 22124	

Outstanding Balance Beginning This Period <input type="text" value="21.00"/>		<b>Transaction ID: PAY:D:71127</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="21.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> JULIA DOOLITTLE			Nature of Debt (Purpose): TRAVEL EXPENSE
Mailing Address 10531 MEREWORTH LN.			
City Oakton	State VA	ZIP Code 22124	

Outstanding Balance Beginning This Period <input type="text" value="5.00"/>		<b>Transaction ID: PAY:D:71128</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> JULIA DOOLITTLE			Nature of Debt (Purpose): CANDY
Mailing Address 10531 MEREWORTH LN.			
City Oakton	State VA	ZIP Code 22124	

Outstanding Balance Beginning This Period <input type="text" value="32.49"/>		<b>Transaction ID: PAY:D:71129</b>	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="32.49"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>	

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



**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> JULIA DOOLITTLE			Nature of Debt (Purpose): TRAVEL EXPENSES
Mailing Address 10531 MEREWORTH LN.			
City Oakton	State VA	ZIP Code 22124	

Outstanding Balance Beginning This Period 458.47		<b>Transaction ID: PAY:D:71131</b>	
Amount Incurred This Period 0.00	Payment This Period 458.47	Outstanding Balance at Close of This Period 0.00	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> SIERRA DOMINION FINANCIAL SOLUTIONS, INC.			Nature of Debt (Purpose): FUNDRAISING SERVICES
Mailing Address 10531 MEREWORTH LN.			
City OAKTON	State VA	ZIP Code 22124	

Outstanding Balance Beginning This Period 31471.20		<b>Transaction ID: PAY:D:69971</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 31471.20	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WILLIAMS MULLEN			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 8270 GREENSBORO DR. #700			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 69392.45		<b>Transaction ID: PAY:D:71117</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 69392.45	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	100863.65
<b>2) TOTALS</b> This Period (last page this line number only).....	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	

**SCHEDULE D (FEC Form 3 )**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
JOHN T. DOOLITTLE FOR CONGRESS

<b>A. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WILLIAMS MULLEN			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 8270 GREENSBORO DR. #700			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 14251.62		<b>Transaction ID: PAY:D:71118</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14251.62	

<b>B. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WILLIAMS MULLEN			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 8270 GREENSBORO DR. #700			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 14532.23		<b>Transaction ID: PAY:D:71119</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14532.23	

<b>C. Full Name (Last, First, Middle Initial) of Debtor or Creditor</b> WILLIAMS MULLEN			Nature of Debt (Purpose): LEGAL FEES
Mailing Address 8270 GREENSBORO DR. #700			
City MCLEAN	State VA	ZIP Code 22102	

Outstanding Balance Beginning This Period 23204.65		<b>Transaction ID: PAY:D:71120</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 23204.65	

<b>1) SUBTOTALS</b> This Period This Page (optional).....	51988.50
<b>2) TOTALS</b> This Period (last page this line number only).....	152852.15
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
<b>4) ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	152852.15

Image# 28931514020

Form/Schedule: **F3A**

3rd party payments on Sch. D

Transaction ID:

\*\*\*\*\*