Schedule A	Type or print in ink.			SCHEDULE A		
Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement cove		CALIEOPNIA ACO		
SEE INSTRUCTIONS ON REVENSE		through 06-3	80-05 Page	4 of 20		
CONMITTEE TO Suppost	LA Courty Soul Olas	MARCE -		UMBER 7280		
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CO	ONTRIBUTOR CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
-7-05 TEN It bight.	□IND □COM □PTY □SCC	200.00				
-25-05 DUANE BUR KLEY	COM CATALON PETINES PTY SCC	30.00				
-405 RICHARD SCHILL	COM COTH COTY	100.00				
-25.05 DOROHY Smith	COM DEFINET.	3000				
7505 DENISE JOHNSON	COM CALFOR	100.00				
	SUBTOTAL	\$ 1200				
Schedule A Summary 1. Amount received this period – itemized monetary cont (Include all Schedule A subtotals.)	\$£	21, 300,0 59325				
 Amount received this period – unitemized monetary co Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary F 	· · · · · · · · · · · · · · · · · · ·		PTY-Politic			

Schedule A (Continuation Sheet) Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement cove	SCHEDULE A (CONT.) IFORNIA 460 ORM	
NAME OF FILER				through 06-3	Page	<i>\bullet</i>
COMMI	HEE to SUPPORT L.	4 County	/ JEAL OR	DUNTAL	6 12	67280
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRI (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
12405	ChEPLE W. BENNO	COM COM PTY SCC	Retireis	250.00	250.00	
-14-05	SVEN B SVENDS	□COM □OTH □PTY □SCC	RETROD	100.00	100.00	
-15-05	Republican Chib	IND COM PTY SCC		100.00	100.00	
-2/05	DANIET EVANGETIS	COM OTH PTY SCC	US military	100.00	100.00	
1-24-05	TOM HANSON	□IND □COM □OTH □PTY □SCC	RESINES	10000	100.00	
			SUBTOTAL	: 1050M		

IND-Individual

COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party

SCC - Small Contributor Committee

Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		SCHEDULE A (CONT.) Statement covers period from 0.30-05 through 0.30-05 Page of 19			
DMM OF FILER	notice to Suppor	-6A	IF AN INDIVIDUAL ENTER	AMOUNT	MANNE LZ	67280	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
-28.05	Aut 2 2,61502	□INB □COM □OTH □PTY □SCC	LETINES	100.00	100.00		
-28-05	DORIAN DUNLAVEY	□COM □OTH □PTY SCC	REFINED	100.00	100.00		
1-1-05	WILLIAM ZELENKA	DIND COM OTH PTY SCC	Refined	100.00	100.00	444	
9-1-05	LICHARD HAMER.	ZHND COM OTH PTY SCC	AHOMEY	1,00000	1,000.00		
2-3-05	G. DARK.	COM COTH PTY SCC	DEFINES	500.00	5000		
			SUBTOTAL	s/800.d			

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Schedule A (Continuation Sheet)	Type or print in ink.	SCHEDULE A (CONT.)			
Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period CALIFORNIA FORM 460			
NAME OF FILER		through 06-30-05 Page 7 of 20			
Committee to Sup	sost LA County a	SAL MARKO 1267280			
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CO	ONTRIBUTOR CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) PER ELECTION TO DATE (IF REQUIRED)			
3-1-05 John HORNBURG	COM DEFINES SCC	100.00 100.00			
4.2705 GDON QUICK	COM OTH PTY SCC	100.00 100.00			
41905 MENHOUST Church	□IND □COM □PTY □SCC	100.00 100.00			
5-16-05 ROZA KING,	COM OTH PTY SCC	100.00			
573-05 SIQUE CORD'	□IND □COM □PTY □SCC	15,000 15,000			
	SUBTOTAL	\$/5/1/00.00			

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Schedule A (Continuation Sheet) Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period		SCHEDULE A (CONTINUE A CONTINUE A			
<i>a</i>	NAME OF FILE			/		through 06-3	b-05	Page 6	8_ of 10
0	MMAHE	EE to SUPPOR	at LAC	OUNTY	I DON UN	MANC	6	120	57280
	DATE RECEIVED	FULL NAME, STREET ADDRESS AND Z (IF COMMITTEE, ALSO ENTE	ZIP CODE OF CONTRIBUTOR (R.I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
5-	13-05	CAI-YAF	DAC.	□IND □COM- □OTH □PTY □SCC		1500	1,500	9	
6-	7-05	VA ADIMIR VI	ACYMBAL.	COM COM OTH PTY	Losnes.	100.00	100.	00	
6	1-05	RICHARD, 3	chilf_	COM COM OTH PTY SCC	netrece.	100.00	200.0	00	
6	.21-05	MARCIA J.	BOLES	COM COM OTH PTY		10000	100.8	0	
6	21-05	-SCREPUBL	CAN WOMEN	□IND □COM ■OTH		17000	2500	වර	

□ PTY □ SCC

*Contributor Codes

IND - Individual

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OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

25000 25000 subtotal\$ 20590

Schedule A (Continuation Sh		Type or prin				SCHEDULE A (CONT.)	
Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement coverage of the statement coverage		CALIFORNIA 460	
				through <u>06.30</u>	0-05 Page _	9 of 20	
NAME OF FILER ON MITTER	apport.	LA-Clas	noty Sext (DROWA	WCG /Z	67380	
DATE RECEIVED FULL NAME, STREET ADDRESS A		CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
-10-05 METhodist	The UNITED	IND COM E-OTH PTY SSC		100.00	200.00		
1-27.05 PichARD.	Schilf	IZIND □COM □OTH □PTY □SCC		100.00	300.00		
		□IND □COM □OTH □PTY □SCC					
• .		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
		□IND □COM □OTH □PTY □SCC					
	=====================================		SURTOTAL	5 10000			

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