Schedule	E
Payments	Made

SEE INSTRUCTIONS ON REVERSE

Burke Re-Election Committee

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from	CALIFORNIA 460
through	5 / 15
	I.D. NUMBER

1252858

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP CNS CTB CVC FIL FND IND LEG LIT	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)*	MTG OFC PET PHO POL POS PRO	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads		RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same VOT voter registration WEB information technology costs (internet, em	candidate/sponsor
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)			CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
	American Express	ID:		FND	,	281.36

_					AMOUNTTAID
	American Express	ID:	FND	* * - ·	281.36
4	California Community Newspapers	ID:	PRT		120.00
				*	
	City Club on Bunker Hill	ID:	OFC		197.00
		-			

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

1.	Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	25072.39
2.	Unitemized payments made this period of under \$100.	122.43
3.	Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	0.00
4.	Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	25194.82

Type or print in ink. Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from	FORM POU
through	6 / 15
	I.D. NUMBER

		o miore donaro.		from		1
SEE INSTRUCTIONS ON REVERSE				through	6	15
NAME OF FILER					I.D. NUME	BER
Burke Re-Election Committee						
00050 1/2 1/2 1/2					125285	8
CODES: If one of the following codes accurately describe	s the payment, you	may enter the	code. Otherwise	e, describe the payment.		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	OFC office expended per petition cire. PHO phone bar POL polling and POS postage, d	and appearances enses culating	nger services accounting)	RAD radio airtime and p RFD returned contribution SAL campaign workers' TEL t.v. or cable airtime TRC candidate travel, lo TRS staff/spouse travel, TSF transfer between contribution WEB information technological	ons salaries and production co dging, and meals lodging, and meal ommittees of the sa	s me candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	9	CODE OR	DES	CRIPTION OF PAYMENT	(AMOUNT PAID
Clear Channel Outdoor	ID:	PRT			Ť	300.00
Clear Channel Outdoor	ID:	PRT				12278.00
Connie Cole	ID:	PRO			· ·	175.00
* Payments that are contributions or independent expenditures mus	st also be summarized	on Schedule D.			SUBTOTAL \$	
Schedule E Summary	-				u u	
1. Payments made this period of \$100 or more. (Include a	II Schedule E subto	otals.)			\$	
2. Unitemized payments made this period of under \$100.						
3. Total interest paid this period on loans. (Enter amount f						
4. Total payments made this period. (Add lines 1, 2, and 3					W. Same	
parison and the poriod. (ridd inless 1, 2, and 3	. Line nere and 0	ii iile Suillinary	rage, Column A	۱, Line 6.)	. IOTAL \$	

Schedule E	
Payments Made	

Type or print in ink.
Amounts may be rounded

	SCHEDULE E
Statement covers period	CALIFORNIA 460
from	FORM CASU
through	7 / 15
	I.D. NUMBER

r ayments made	to whole dollars.			from	FORW STATE
SEE INSTRUCTIONS ON REVERSE				through	7 / 15
NAME OF FILER					I.D. NUMBER
Burke Re-Election Committee					
					1252858
CODES: If one of the following codes accurately describes	the payment, you	ı may enter the co	de. Otherwis	se, describe the payment.	
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	OFC office expr PET petition cir PHO phone bar POL polling and POS postage, of	and appearances enses rculating	r services ounting)	RAD radio airtime and pr RFD returned contribution SAL campaign workers': TEL t.v. or cable airtime TRC candidate travel, lost TRS staff/spouse travel, TSF transfer between convoter registration WEB information technology	ns salaries and production costs dging, and meals lodging, and meals emmittees of the same candidate/sponso
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	- D	CODE OR	DE	SCRIPTION OF PAYMENT	AMOUNT PAID
Connie Cole	ID:	PRO			175.00
Contra Contra					
County of Los Angeles	ID:	OFC			1300.00
Culver City Demo Club	ID:	PRT			100.00
* Payments that are contributions or independent expenditures must	also be summarized	d on Schedule D.			SUBTOTAL \$
Schedule E Summary					4 .
1. Payments made this period of \$100 or more. (Include all	Schedule E subt	otals.)			\$
2. Unitemized payments made this period of under \$100.					\$
3. Total interest paid this period on loans. (Enter amount fr	om Schedule B, F	Part 1, Column (e).)		\$
4. Total payments made this period. (Add lines 1, 2, and 3,	Enter here and o	on the Summary P	age. Column	A Line 6)	TOTAL \$

Type or print in ink.
Amounts may be rounded

Statement covers period	CALIFORNIA 460
through	8 / 15
	I.D. NUMBER
	4050050

ayments made	to whole dollars.			from		FORM TOO	
SEE INSTRUCTIONS ON REVERSE				through	8	3 / 15	
NAME OF FILER				1	I.D. NUN	MBER	
Burke Re-Election Committee					40500		
					12528	58	
CODES: If one of the following codes accurately describes	the payment, you	may enter the	code. Otherwis	se, describe the paymer	nt.		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)*	MBR member co MTG meetings at OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de	nd appearances uses ulating s survey research elivery and messe	nger services	TRC candidate trav TRS staff/spouse tr TSF transfer between	ibutions kers' salaries irtime and production of rel, lodging, and meals ravel, lodging, and meals ren committees of the s		
LEG legal defense LIT campaign literature and mailings	PRO professiona PRT print ads	Il services (legal,	accounting)	VOT voter registrat	ion chnology costs (interne	ot amail)	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	The state of the s	CODE OR	DE	SCRIPTION OF PAYMENT	critiology costs (interne	AMOUNT PAID	
L. A. Co. Democratic Party	ID: 741777	MTG				100.00	
L. A. Coalition/End Hunger/Homelessness	ID:	PRT				400.00	
L. A. Watts Times	ID:	PRT				792.00	
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule D.			SUBTOTAL S	<u> </u>	
Schedule E Summary							
1. Payments made this period of \$100 or more. (Include all	Schedule E subto	tals.)			\$		
Unitemized payments made this period of under \$100.							
3. Total interest paid this period on loans. (Enter amount fro							

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E
CALIFORNIA 460
FUNN
9 / 15
I.D. NUMBER

1252858

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Burke Re-Election Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponsor VOT voter registration WEB information technology costs (internet, email)
--	--	--

NAME AND ADDRES (IF COMMITTEE, A	S OF PAYEE OR CREDITOR LSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Patricia Miller	ID:		Seminar	321.00
Printco Graphics	ID:	OFC		3528.95
Miriam Simmons	ID:	OFC		281.70

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

- Payments made this period of \$100 or more. (Include all Schedule E subtotals.)
 Unitemized payments made this period of under \$100.
 Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE E
Statement covers period	CALIFORNIA 460
through	10 / 15
	I.D. NUMBER
	1252858

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Burke Re-Election Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP	campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
	campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB	contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC	civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
	fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger service	s TSF transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO professional services (legal, accounting)	
LIT	campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAY (IF COMMITTEE, ALSO ENTER I		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Toyo Photography	ID:	OFC		378.80
US Postmaster	ID:	FND		555.00
Jan Wasson	ID:	PRO		2288.58

\$ ____

SUBTOTAL \$

- 2. Unitemized payments made this period of under \$100.
- 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

^{*} Payments that are contributions or independent expenditures must also be summarized on Schedule D.

Schedule	E
Payments	Made

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA 460
from	FORM 400
through	11 / 15
	I.D. NUMBER

1252858

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Burke Re-Election Committee

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CNS car CTB cor CVC civi FIL car FND fun IND ind LEG lega	campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense	ants MTG meetings and appearances office expenses PET petition circulating phone banks POI polling and suppeyresearch		RFD SAL TEL TRC TRS TSF TSF	TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals			
LIT can	mpaign literature and mailings		rint ads		rogar, accounting		voter registration information technology costs (intern	et. email)
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION O		AMOUNT PAID

NAME AND ADDRESS OF PAYEE ((IF COMMITTEE, ALSO ENTER I.D. NU	DR CREDITOR MBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wave Community Newspapers	ID:	PRT		1500.00
C. C				

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

25072.39

1.	Payments made this period of \$100 or more. (Include all Schedule E subtotals.)
2.	Unitemized payments made this period of under \$100.
3.	Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)
4.	Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)