

Recipient Committee  
Campaign Statement  
Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

CALIFORNIA  
FORM

460

Date Stamp

RECEIVED

2008 FEB -1 A 10:45

Page 1 of 52

For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period

from 07/01/2007

through 12/31/2007

Date of election if applicable:  
(Month, Day, Year)

06/03/2008

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- ☒ Officeholder, Candidate Controlled Committee  
☒ State Candidate Election Committee  
☐ Recall  
(Also Complete Part 5)

- ☐ General Purpose Committee  
☐ Sponsored  
☐ Small Contributor Committee  
☐ Political Party/Central Committee

- ☐ Primarily Formed Ballot Measure Committee  
☐ Controlled  
☐ Sponsored  
(Also Complete Part 6)

- ☐ Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

2. Type of Statement: CITY OF DANA POINT

- ☐ Preelection Statement  
☒ Semi-annual Statement  
☐ Termination Statement  
(Also file a Form 410 Termination)  
☐ Amendment (Explain below)

- ☐ Quarterly Statement  
☐ Special Odd-Year Report  
☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER

1294082

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Diane Harkey for Assembly

STREET ADDRESS (NO P.O. BOX)

30151 Tomas

CITY STATE ZIP CODE AREA CODE/PHONE

Rancho Santa Margarita, CA 92688 949-858-7448

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

10410 Del Prado, #284

CITY STATE ZIP CODE AREA CODE/PHONE

Dana Point, CA 92609

OPTIONAL: FAX / E-MAIL ADDRESS

949-858-6807

Treasurer(s)

NAME OF TREASURER

Betty Presley

MAILING ADDRESS

30151 Tomas

CITY STATE ZIP CODE AREA CODE/PHONE

Rancho Santa Margarita, CA 92688 949-858-7448

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 01/18/2008  
Date

Executed on 01/18/2008  
Date

Executed on  
Date

Executed on  
Date

By   
Signature of Treasurer or Assistant Treasurer

By   
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Recipient Committee  
Campaign Statement  
Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA  
FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Diane Harkey

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

State Assembly Person  
Assembly District : 73

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

75 Ritz Cove Monarch Beach, CA 92629

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME

Diane Harkey for Dana Point City Council

I.D. NUMBER

1264652

NAME OF TREASURER

Betty Presley

CONTROLLED COMMITTEE?

☒ YES ☐ NO

COMMITTEE ADDRESS

STREET ADDRESS (NO P.O. BOX)

30151 Tomas

CITY

STATE

ZIP CODE

AREA CODE/PHONE

Rancho Sta Margarita, CA 92688

949-858-7448

COMMITTEE NAME

I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE?

☐ YES ☐ NO

COMMITTEE ADDRESS

STREET ADDRESS (NO P.O. BOX)

CITY

STATE

ZIP CODE

AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER

JURISDICTION

☐ SUPPORT

☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD

DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD

☐ SUPPORT

☐ OPPOSE

Attach continuation sheets if necessary

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period from 07/01/2007 through 12/31/2007	<b>CALIFORNIA FORM 460</b> Page 3 of 52
I.D. NUMBER 1294082	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

## Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	\$ 112,619.00	\$ 263,691.00
2. Loans Received	Schedule B, Line 3	0.00	100,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 112,619.00	\$ 363,691.00
4. Nonmonetary Contributions	Schedule C, Line 3	1,167.58	4,635.08
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 113,786.58	\$ 368,326.08

## Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$	\$
21. Expenditures Made	\$	\$

## Expenditures Made

6. Payments Made	Schedule E, Line 4	\$ 54,032.08	\$ 84,902.75
7. Loans Made	Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	\$ 54,032.08	\$ 84,902.75
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	1,438.67	3,203.73
10. Nonmonetary Adjustment	Schedule C, Line 3	1,167.58	4,635.08
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 56,638.33	\$ 92,741.56

## Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

## Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 220,201.33
13. Cash Receipts	Column A, Line 3 above	112,619.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0.00
15. Cash Payments	Column A, Line 8 above	54,032.08
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 278,788.25

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED	Schedule B, Part 2	\$ 0.00
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## Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$ 0.00
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ 103,203.73

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

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

SCHEDULE A

Statement covers period from 07/01/2007 through 12/31/2007		<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 1294082		

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Hankey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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)
07/03/2007	Deff Meyers 14478 Caminito Lanza San Diego, CA 92127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate  St. Clair/Meyers	300.00	800.00	P 08 800.00
07/26/2007	George Andrews 256 N. Grand St. Orange, CA 92866	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director  OCGOP	100.00	100.00	P 08 100.00
07/26/2007	D. Ryan Johnson 28362 Paseo Estable San Juan Capistrano, CA 92675	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vetrinarian  Dana Niguel Vetrinary Hospital	200.00	200.00	P 08 200.00
07/26/2007	Crystal Kochendorfer 32562 Adriatic Dr. Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner  Children & Families Commission of OC	50.00	149.00	P 08 149.00
08/06/2007	David Lahnsen 539 Fullerton Avenue Newport Beach, CA 92663	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Financial Advisor  Morgan Stanley	1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				1,650.00		

## Schedule A Summary

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 112,449.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 170.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 112,619.00

### \*Contributor Codes

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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Markey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
08/14/2007	Marsha E. Ilg 1713 Via Vicalia San Clemente, CA 92672	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Office Assistant  Niguel Home Center	250.00	250.00	P 08 250.00
08/14/2007	George A. Miller 24005 Alton Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	100.00	100.00	P 08 100.00
08/14/2007	Ivy M. Mooring 25432 Sea Bluffs Dr., #108 Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	100.00	200.00	P 08 200.00
08/14/2007	John Smead 18 Holier Dr. Coto de Caza, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	500.00	750.00	P 08 750.00
08/20/2007	CR & R Incorporated 11222 Western Ave. P.O. Box 125 Stanton, CA 90680	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,100.00	3,600.00	P 08 3,600.00

**SUBTOTAL \$**

2,050.00

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IND - Individual  
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 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from <u>07/01/2007</u>		
through <u>12/31/2007</u>		Page <u>6</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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)
08/20/2007	Patricia S. Douglas 640 BL James Rd. Newport Beach, CA 92661	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	VP, Government Relations  Pacific Life Insurance	500.00	500.00	P 08 500.00
08/20/2007	Robert J. Eichenberg 1 Collins Island Newport Beach, CA 92662	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business/Co-Owner  Ellison Ed. Eq., Inc.	2,000.00	2,000.00	P 08 2,000.00
08/20/2007	Juan Y. Forster 12345 Circula Panorama Santa Ana, CA 92795	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	200.00	650.00	P 08 650.00
08/20/2007	Scott A. Hart 23 Crooked Stick Drive Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Hart & Associates, LLC	1,000.00	1,000.00	P 08 1,000.00
08/20/2007	Robert W. Locken 730 Bluebird Cyn. Dr. Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney  Gibson, Dunn & Crutcher	1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				4,700.00		

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 (other than PTY or SCC)  
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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b> Page <u>7</u> of <u>52</u>
I.D. NUMBER 1294082	

NAME OF FILER

Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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)
08/30/2007	Witkin Productions 8105 Irvine Center Dr., #1170 Irvine, CA 92618	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	P 08 100.00
08/31/2007	Enterprise Rent-A-Car Co. PAC (#992324) 600 Corporate Park Dr. St. Louis, MO 63105	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
08/31/2007	Hayde Community Property Trust 27 Crooked Stick Dr. Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant/Philanthropist  Lynette Hayde	2,000.00	2,000.00	P 08 2,000.00
08/31/2007	Ivan M. Marks 21161 Poston Ln. Huntington Beach, CA 92646	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	200.00	600.00	P 08 600.00
08/31/2007	St. Clair Meyers Partners, LLC 8601 Research Dr. Irvine, CA 92618	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	P 08 2,000.00
<b>SUBTOTAL \$</b>				4,300.00		

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SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
 Diane Hatkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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)
08/01/2007	St. Clair Meyers Partners, LLC 8891 Research Dr. Irvine, CA 92618	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	P 08 2,000.00
08/03/2007	CA Defense Counsel PAC (#850665) 1127 11th St., #300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	P 08 2,000.00
08/23/2007	Western Manufactured Housing Communities Assn. PAC (#742422) 455 Capitol Mall, #800 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
08/24/2007	CA Beer & Beverage Distributors PAC (#761487) 1415 L Street, Suite 800 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
08/24/2007	Greenberg Traurig 1221 Brickell Avenue Miami, FL 33131	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				5,000.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from <u>07/01/2007</u>		
through <u>12/31/2007</u>		Page <u>9</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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)
08/24/2007	Adam Probolsky 23276 South Pointe Drive, #206 Laguna Hills, CA 92653	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Probolsky Research	1,000.00	1,000.00	P 08 1,000.00
08/27/2007	Anheuser-Busch Cos., Inc. 1201 K St., #730 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
08/27/2007	CA Building Industry Assn. PAC (#R90483) 1215 K St., #1200 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
08/27/2007	CA Cable & Telecommunications Assn. PAC (#745932) 360 22nd St., #750 Oakland, CA 94612	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1,400.00	P 08 1,400.00
08/29/2007	Elise Sheld of CA 50 Beale St. San Francisco, CA 94105	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				4,500.00		

**\*Contributor Codes**

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 (other than PTY or SCC)  
 OTH - Other (e.g., business entity)  
 PTY - Political Party  
 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM 460</b>
from <u>07/01/2007</u>	Page <u>10</u> of <u>52</u>	
through <u>12/31/2007</u>		I.D. NUMBER <u>1294082</u>

NAME OF FILER  
 Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
08/31/2007	Patrick J. Dirk 990 Bayside Cove W. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO  Troy Group, Inc.	1,200.00	2,450.00	P 08 2,450.00
08/31/2007	Diane M. Ferguson 15225 Beach Rd. Capistrano Beach, CA 92624	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	1,000.00	1,600.00	P 08 1,600.00
08/31/2007	Robert B. Ferguson 23072 Lake Center Dr., #205 Lake Forest, CA 92630	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Oil Executive  Bob Ferguson - Independent	1,000.00	1,500.00	P 08 1,500.00
08/31/2007	Mel W. Trudell 5420 E. La Palma Ave. Anaheim, CA 92807	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner  Custom Comfort Mattress	1,000.00	1,000.00	P 08 1,000.00
09/05/2007	Gladys Smith Kline 950 9th St., #2200 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				5,200.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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)
02/06/2007	CA Assn. of Professional Liability Insurers PAC (#891271) 1127 11th St., #300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
09/10/2007	Picoco, LLC 660 Newport Center Dr., #650 Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	3,600.00	P 08 3,600.00
09/14/2007	CA Mortgage Assn. PAC (#990462) 1127 11th St., #820 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
09/18/2007	Paul G. Glab 14 Halsey Ave. Laguna Niguel, CA 92677	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Mayor Pro Tem  City of Laguna Niguel	150.00	150.00	P 08 150.00
09/25/2007	United Health Care Services, Inc. 1201 E St., #1020 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,500.00	P 08 2,500.00
<b>SUBTOTAL \$</b>				5,150.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Diane Harkley for Assembly	I.D. NUMBER 1294082
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
10/04/2007	Buyer 1201 K St., #1030 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
10/04/2007	Delta Partners, LLC 17541 17th St. Tustin, CA 92780	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00	2,000.00	P 08 2,000.00
10/04/2007	Fletcher Jones Motorcars 3300 Jambores Rd. Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,500.00	2,500.00	P 08 2,500.00
10/04/2007	Ivan M. Marks 21161 Poston Ln. Huntington Beach, CA 92646	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	200.00	600.00	P 08 600.00
10/04/2007	Orco Block Co. P.O. Box E 11100 Beach Blvd. Stanton, CA 90680	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150.00	3,600.00	P 08 3,600.00
<b>SUBTOTALS</b>				5,850.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Diane Hatkey for Assembly		I.D. NUMBER 1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER ID 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)
10/23/2007	William H. Crosby 1821 Lakeside Cir. Santa Ana, CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney  Boiner & Crosby	250.00	250.00	P 08 250.00
10/23/2007	Paul F. Folino 23201 Fradera Rd. Coto de Caza, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Chairman  Emulex Corporation	900.00	4,500.00	P 08 3,600.00 G 08 900.00
10/23/2007	Paul F. Folino 23201 Fradera Rd. Coto de Caza, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Chairman  Emulex Corporation	1,600.00	4,500.00	P 08 3,600.00 G 08 900.00
10/23/2007	James Lindsey 1102 Faren Dr. Santa Ana, CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	1,000.00	1,000.00	P 08 1,000.00
10/23/2007	Howard Rich 73 Spring St., Rm. 408 New York, NY 10012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Rich & Rich	3,600.00	6,000.00	P 08 3,600.00 G 08 2,400.00
<b>SUBTOTAL \$</b>				7,350.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
 Diane Hankey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
10/23/2007	Howard Rich 73 Spring St., Rm. 408 New York, NY 10012	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Rich & Rich	2,400.00	6,000.00	P 08 3,600.00 G 08 2,400.00
10/23/2007	John Gmead 16 Joliet Dr. Coto de Caza, CA 92679	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	250.00	750.00	P 08 750.00
11/01/2007	Dwight Decker 4000 MacArthur Blvd. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman  Conexant Systems	500.00	3,600.00	P 08 3,600.00
11/01/2007	DTS Investment Ltd. N. 3 Hughes Irvine, CA 92618	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	P 08 500.00
11/01/2007	Juan Y. Forster 12245 Ciruela Panorama Santa Ana, CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	250.00	650.00	P 08 650.00
<b>SUBTOTAL \$</b>				3,900.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from <u>07/01/2007</u>		
through <u>12/31/2007</u>		Page <u>15</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Harkay for Assembly		1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
11/01/2007	Granite Investment Group 2 Park Plaza, #800 Irvine, CA 92614	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,600.00	4,600.00	P 08 3,600.00 G 08 1,000.00
11/01/2007	Granite Investment Group 2 Park Plaza, #800 Irvine, CA 92614	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	4,600.00	P 08 3,600.00 G 08 1,000.00
11/01/2007	Inland Group, Inc. 1501 Jambores Rd., South Tower, #606 Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	3,500.00	P 08 3,500.00
11/01/2007	Crystal Kochendorfer 32562 Adijatic Dr. Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner  Children & Families Commission of OC	99.00	149.00	P 08 149.00
11/01/2007	Denise Mamey Mainero 22 Drake's Bay Dr. Corona Del Mar, CA 92625	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker  Denise Mamey Mainero	250.00	250.00	P 08 250.00
<b>SUBTOTAL \$</b>				4,949.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
11/01/2007	Ivan H. Marks 21161 Poston Ln. Huntington Beach, CA 92646	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	200.00	600.00	P 08 600.00
11/01/2007	Dean D. McCormick, Jr. 12212 Afton Ln. North Tustin, CA 92705	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Partner  Rail Excursions	300.00	550.00	P 08 550.00
11/01/2007	Ivy M. Mooring 25432 Sea Bluffs Dr., #102 Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired  None	100.00	200.00	P 08 200.00
11/01/2007	Tim Faeno 2465 N. San Miguel Dr. Orange, CA 92667	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney  Manatt, Phelps & Phillips	250.00	250.00	P 08 250.00
11/01/2007	John R. Saunders 4040 MacArthur Blvd., #100 Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Investment  Saunders Property	250.00	900.00	P 08 900.00
<b>SUBTOTAL \$</b>				1,100.00		

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FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Diane Harkey for Assembly		I.D. NUMBER 1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
11/01/2007	The Law Offices of Kirk F. Lapple 4012 Katella Ave., #201 Los Alamitos, CA 90720	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	P 08 250.00
11/01/2007	Theodore J. Caliendo, M.D. A Medical Corp. 27800 Medical Center Rd., #204 Mission Viejo, CA 92691	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	2,000.00	P 08 2,000.00
11/01/2007	Wood & Brown 721 S. Parker, #300 Orange, CA 92668	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	P 08 500.00
11/05/2007	United Health Care Services, Inc. 1201 K St., #1020 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,500.00	P 08 2,500.00
11/06/2007	Judy Lloyd 4637 Chabot Dr., #102 Pleasanton, CA 94588	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President  Altamont Solutions, Inc.	250.00	250.00	P 08 250.00
<b>SUBTOTAL \$</b>				2,500.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from <u>07/01/2007</u>		
through <u>12/31/2007</u>		Page <u>18</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Hatkey for Assembly		1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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)
11/25/2007	Alan Wickstrom 25251 Perch Dr. Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO/President  Building Online Inc.	250.00	250.00	P 08 250.00
11/26/2007	CA Chamber of Commerce PAC (#950352) 1215 K St., #1400 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
11/28/2007	CA Hospital Assn. PAC (#790773) 1215 K St., #800 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,400.00	P 08 1,400.00
11/28/2007	Kenneth L. Khachigian 501 W. Dolos Marinos San Clemente, CA 92672	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney  Kenneth L. Khachigian, Esq.	250.00	750.00	P 08 750.00
11/28/2007	National Assn of Insurance & Financial Advisors/CA PAC (#743365) 1127 11th St., #300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00	1,500.00	P 08 1,500.00
<b>SUBTOTAL \$</b>				4,000.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Diagne Harkey for Assembly		I.D. NUMBER 1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
11/28/2007	Picoco, LLC 660 Newport Center Dr., #650 Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,600.00	3,600.00	P 08 3,600.00
11/28/2007	T.D. Service Company 1820 E. First St., #300 Santa Ana, CA 92705	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,600.00	3,600.00	P 08 3,600.00
11/29/2007	CA Grocers Assn PAC (#760914) 1415 L St., #410 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
11/29/2007	CAAFAC/CA Apartment Assn PAC (#745208) 980 Ninth St., #200 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
11/29/2007	Anna C. Campbell 57 Blue Heron Irvine, CA 92603	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	3,200.00	3,200.00	P 08 3,200.00
<b>SUBTOTAL \$</b>				9,400.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Hickey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
11/22/2007	Darryl T. Smith 1601 Dove Street, #145 Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Investor  MHI Real Company	1,000.00	1,000.00	P 08 1,000.00
11/30/2007	Allstate Insurance Company PAC (#830297) 2775 Sanders Rd., Ste. A5 Northbrook, IL 60062	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	P 08 500.00
11/30/2007	CA Independent Petroleum PAC (#622237) 50151 Tomas St. Bucho Santa Margarita, CA 92688	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
11/30/2007	CA Psychiatric PAC (#790281) 1127 11th St., #300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00	250.00	P 08 250.00
12/10/2007	Hoping 23261 Seal Beach Blvd. Seal Beach, CA 90740	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				3,750.00		

**\*Contributor Codes**

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
12/10/2007	Mary Dirk 990 Bayside Cove W. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President  Troy Group	1,250.00	1,250.00	P 08 1,250.00
12/10/2007	Patrick J. Dirk 990 Bayside Cove W. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO  Troy Group, Inc.	1,250.00	2,450.00	P 08 2,450.00
12/12/2007	CA Defense Counsel PAC (#R50665) 1127 11th St., #300 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	P 08 2,000.00
12/12/2007	Dwight Decker 4000 MacArthur Blvd. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman  Conexant Systems	3,100.00	3,600.00	P 08 3,600.00
12/17/2007	David L. Horowitz 37241 LaPar Rd., Ste. B Laguna Niguel, CA 92677	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Horowitz Group	1,500.00	1,500.00	P 08 1,500.00
<b>SUBTOTAL \$</b>				8,100.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
**FORM 460**

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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
12/17/2007	Chris Martin 25931 Rapid Falls Rd. Laguna Hills, CA 92653	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive  Feed Barn	3,600.00	3,600.00	P 08 3,600.00
12/17/2007	Frank Tucker 34262 Sea Island Dr. Dana Point, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive  A&A Building Material Co.	200.00	200.00	P 08 200.00
12/19/2007	Kelly Miller 501 N. El Camino Real, #200 San Clemente, CA 92672	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker  None	250.00	250.00	P 08 250.00
12/20/2007	Diane E. Hall 26411 Palisade Dr. Capistrano Beach, CA 92624	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management  Hall and Associates, Inc.	750.00	1,000.00	P 08 1,000.00
12/20/2007	Kerry E. Reynolds P.O. Box 12370 Zephyr Cove, NV 89448	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor  Kerry E. Reynolds	500.00	500.00	P 08 500.00
<b>SUBTOTAL \$</b>				5,300.00		

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FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b> Page <u>23</u> of <u>52</u>
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I.D. NUMBER 1294082	

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
12/31/2007	Thomas V. McFerman, Jr. 1070 Fallen Leaf Rd. Alcudia, CA 91096	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO  Automobile Club of Southern California	3,600.00	3,600.00	P 08 3,600.00
12/26/2007	CA Cable & Telecommunications Assn. PAC (#745932) 160 27th St., #750 Oakland, CA 94612	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1,400.00	P 08 1,400.00
12/27/2007	Western United Dairymen State PAC (#771500) 1315 K St. Modesto, CA 95354	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	P 08 500.00
12/28/2007	Jeff Meyers 14378 Caminito Lazanja San Diego, CA 92127	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate  St. Clair/Meyers	500.00	800.00	P 08 800.00
12/28/2007	Thomas Tucker 1 Upper Newport Plaza Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO  Pennhill Properties	1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				6,100.00		

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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period

from 07/01/2007

through 12/31/2007

**CALIFORNIA**  
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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
12/31/2007	Associated Builders & Contractors PAC (#822138) 14825 Kirkham Way Poway, CA 92064	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
12/31/2007	Bank of America PAC (#920697) 600 Peachtree St., NE, 3rd Fl. Atlanta, GA 30308	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	P 08 1,000.00
12/31/2007	John R. Drake 317 Robin Hood Ln. Costa Mesa, CA 92627	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President  Bob Drake Bail Bonds, Inc.	250.00	250.00	P 08 250.00
12/31/2007	Fieldstead & Company P.O. Box 19061 Irvine, CA 92623	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,600.00	3,600.00	P 08 3,600.00
12/31/2007	William Lyon 4490 VonKarman Ave. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman of the Board/CEO  William Lyon Homes, Inc.	1,000.00	1,000.00	P 08 1,000.00
<b>SUBTOTAL \$</b>				6,850.00		

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FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (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)
12/31/2007	Fred Minagai 12 Sierra Vista Laguna Niguel, CA 92677	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman/Planning Commissioner  City of Laguna Niguel	100.00	100.00	P 08 100.00
12/31/2007	Orco Block Co.  P.O. Box F 11100 Beach Blvd. Stanton, CA 90680	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,450.00	3,600.00	P 08 3,600.00
12/31/2007	Paskenta Band of Nomlaki Indians  1012 South St. Orland, CA 95963	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		3,600.00	3,600.00	P 08 3,600.00
12/31/2007	The Hayde Family Trust  8 Executive Cir. Irvine, CA 92614	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Michael K. Hayde, Trustee  CEO/Western National Group	3,600.00	3,600.00	P 08 3,600.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				10,750.00		

## \*Contributor Codes

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SCC - Small Contributor Committee

# Schedule B – Part 1 Loans Received

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

SCHEDULE B - PART 1

Statement covers period  
from 07/01/2007  
through 12/31/2007

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Diane Harkey for Assembly	I.D. NUMBER 1294082
--	------------------------

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Diane Harkey 76 Ritz Cove Monarch Beach, CA 92629  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Councilwoman  City of Dana Point	\$ 50,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 50,000.00  DATE DUE	0.00% RATE \$ 0.00	\$ 50,000.00  01/17/2007 DATE INCURRED	CALENDAR YEAR \$ 101,961.65 PER ELECTION** FOR 101,961.65
Diane Harkey 76 Ritz Cove Monarch Beach, CA 92629  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Councilwoman  City of Dana Point	\$ 50,000.00	\$ 0.00	<input type="checkbox"/> PAID \$ 0.00 <input type="checkbox"/> FORGIVEN \$ 0.00	\$ 50,000.00  DATE DUE	0.00% RATE \$ 0.00	\$ 50,000.00  06/29/2007 DATE INCURRED	CALENDAR YEAR \$ 101,961.65 PER ELECTION** FOR 101,961.65
   † <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$	\$	<input type="checkbox"/> PAID \$ <input type="checkbox"/> FORGIVEN \$	\$  DATE DUE	0% RATE \$	\$  DATE INCURRED	CALENDAR YEAR \$ PER ELECTION** \$
SUBTOTALS \$		0.00	\$	0.00	\$	100,000.00	\$	0.00

## Schedule B Summary

(Enter (e) on  
Schedule E, Line 3)

- Loans received this period ..... \$ 0.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ 0.00  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ 0.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

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IND – Individual  
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(other than PTY or SCC)  
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PTY – Political Party  
SCC – Small Contributor Committee

\*Amounts forgiven or paid by another party also must be reported on Schedule A.  
\*\* If required.

# Schedule C Nonmonetary Contributions Received

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

SCHEDULE C

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
11/15/2007	Diane Harkey  76 Fitz Cove Monarch Beach, CA 92629	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Councilwoman  City of Dana Point	Meet & Greet Costs	1,167.58	101,961.65	P 08 101,961.65
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$** 1,167.58

## Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions.

(Include all Schedule C subtotals.) ..... \$ 1,167.58

2. Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 0.00

3. Total nonmonetary contributions received this period.

(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL \$** 1,167.58

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# Schedule E Payments Made

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

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CompleteCampaigns.com 610 Gateway Center Way, Suite K San Diego, CA 92102	OFC		174.38
Federal Express Payment Center Memphis, TN 38101	POS		16.03
CompleteCampaigns.com 610 Gateway Center Way, Suite K San Diego, CA 92102	OFC		97.50

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

**SUBTOTAL \$** 287.91

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 54,032.08
2. Unitemized payments made this period of under \$100	\$ 0.00
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.)	<b>TOTAL \$</b> 54,032.08

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
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Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER ID NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Betty Presley & Associates, Inc.  36151 Tomas  Fandho Sta Margarita, CA 92688	PRO			850.00
Family Faith & Freedom Association (#1270781)  9421 Silverbend Lane  Elk Grove, CA 95624	LIT		Slate Card	1,000.00
Gillfield Blanning Associates Inc.  921 11th Street, Suite 400  Sacramento, CA 95814	CNS			5,000.00
Brienne Girard  34023 Copper Lantern  Dana Point, CA 92629	OFC			154.86
JC-Evans Inc.  11430 Gold Express Drive, #310 325  Gold River, CA 95670	LIT			856.50

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

**SUBTOTAL \$** 7,861.36

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

Type or print in ink.  
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to whole dollars.

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
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Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Paula Consulting, Inc.  40335 Winchester Rd E-165 Temecula, CA 92591	OFC		110.20
Paula Consulting, Inc.  40335 Winchester Rd E 165 Temecula, CA 92591	CNS		500.00
Paula Consulting, Inc.  40335 Winchester Rd E-165 Temecula, CA 92591	CNS		1,000.00
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	CNS		1,000.99
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC		7.50

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

**SUBTOTAL \$** 2,618.69

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	Page 31 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
UT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Morgan Associates  10119 White Rock Road  Rancho Cordova, CA 95670	FND		301.48
Berry Presley & Associates, Inc.  30151 Tomas  Rancho Sta Margarita, CA 92688	PRO		850.00
CompleteCampaigns.com  610 Gateway Center Way, Suite K  San Diego, CA 92102	OFC		75.00
Brienne Girard  34023 Copper Lantern  Dana Point, CA 92629	CNS		1,000.00
Aim Point, Inc.  925 University Avenue  Sacramento, CA 95825	CNS		500.00

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

**SUBTOTAL \$** 2,726.48

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page <u>32</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
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IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Aim Point, Inc.  925 University Avenue Sacramento, CA 95825	CNS		1,000.00
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	CNS		1,000.00
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	POS		41.00
Federal Express  Payment Center Memphis, TN 38101	POS		52.85
CRA Voter Guide (#1271601)  PO Box 276101 Sacramento, CA 95827	LIT	Slate Card	1,000.00

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

**SUBTOTAL \$** 3,093.85



**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	Page 33 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC			75.00
Betty Presley & Associates, Inc.  30151 Tomas Rancho La Margarita, CA 92688	PRO			850.00
DMI Dynamic Marketing Inc.  1145 West Collins Ave Orange, CA 92667	FND			477.40
DNT Dynamic Marketing Inc.  1145 West Collins Ave Orange, CA 92667	FND			1,433.00
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	CNS			1,000.00

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

**SUBTOTAL \$** 3,835.40

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page 34 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

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

CVP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	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
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	FND			846.70
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	CNS			1,000.00
Aim Point, Inc.  925 University Avenue Sacramento, CA 95825	FND			4,080.05
CA Taxpayer Protection Committee (#1299482)  9301 Silverbend Elk Grove, CA 95624	LIT		Slate Card	1,000.00
Federal Express  Payment Center Memphis, TN 38101	POS			74.18

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

**SUBTOTAL \$** 7,000.93

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page 35 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Non Partisan Candidate Evaluation Council Inc. (#588002)  12881 Knott Street, #105  Garden Grove, CA 92841	LIT		Slate Card	2,500.00
Republican Vote-by-Mail Voter Guide (#1299481)  9321 Silverbend Lane  Elk Grove, CA 95624	LIT		Slate Card	1,000.00
Aim Point, Inc.  925 University Avenue  Sacramento, CA 95825	CNS			1,000.00
Bank of Americard  PO Box 15715  Wilmington, DE 19886	OFC			477.20
Brienne Girard  34023 Copper Lantern  Dana Point, CA 92629	CNS			1,000.00

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

**SUBTOTAL \$** 5,977.20

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page 36 of 52
		I.D. NUMBER 1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
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IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Betty Fienley & Associates, Inc.  30151 Tomas  Rancho Sta Margarita, CA 92686	PRO			850.00
Brienne Girard  34053 Copper Lantern  Dana Point, CA 92629	CNS			1,000.00
Bieber Communications  3609 W MacArthur Blvd, Suite 812  Santa Ana, CA 92704	LIT			301.70
Aim Point, Inc.  925 University Avenue  Sacramento, CA 95825	CNS			1,000.00
CompleteCampaigns.com  610 Gateway Center Way, Suite K  San Diego, CA 92102	OFC			262.50

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

**SUBTOTAL \$** 3,414.20

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	Page 37 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkay for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkay for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC			45.00
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	POS			492.00
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	OFC			34.82
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	CNS			1,000.00
Iconstituent  12121 Wilshire Blvd, Suite 750 Los Angeles, CA 90025	WEB			875.00

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

**SUBTOTAL \$** 2,446.82

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page <u>38</u> of <u>52</u>
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Betty Presley & Associates, Inc.  30141 Tomas  Rancho Sta Margarita, CA 92688	PRO		850.00
CompleteCampaigns.com  610 Gateway Center Way, Suite K  San Diego, CA 92162	OFC		18.75
Bank of Americard  PO Box 15715  Wilmington, DE 19886	TRC		495.60
Aim Point, Inc.  925 University Avenue  Sacramento, CA 95825	CNS		1,000.00
Notical Associates  10419 White Rock Road  Rancho Cordova, CA 95670	FND		301.47

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

**SUBTOTAL \$** 2,665.82

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SCHEDULE E (CONT.)

<b>Statement covers period</b>		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	<b>Page</b> 39 <b>of</b> 52
NAME OF FILER Diane Harkey for Assembly		<b>I.D. NUMBER</b> 1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER ID NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	OFC			51.27
Wendy Warfield & Associates  921 11th St., #701 Sacramento, CA 95814	CNS			1,000.00
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC			18.75
Aim Point, Inc.  925 University Avenue Sacramento, CA 95825	CNS			1,000.00
Bank of Americard  PO Box 16715 Wilmington, DE 19886	FND			4,283.20

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

**SUBTOTAL \$** 6,353.22

**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
from	07/01/2007	
through	12/31/2007	Page 40 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Betty Presley & Associates, Inc.  30151 Tamar  Rancho Sta Margarita, CA 92666	PRO			900.00
Brienne Girard  34023 Copper Lantern  Dana Point, CA 92629	OFC			60.20
Brienne Girard  34023 Copper Lantern  Dana Point, CA 92629	CNS			1,000.00
Wendy Warfield & Associates  921 11th St., #701  Sacramento, CA 95814	CNS			1,002.99
JC-Evans Inc.  11430 Gold Express Drive, #310-325  Gold River, CA 95670	FND			856.50

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

**SUBTOTAL \$** 3,819.69



**Schedule E**  
**(Continuation Sheet)**  
**Payments Made**

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

SCHEDULE E (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	Page 41 of 52
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE ALSO ENTER ID NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC		397.50
Gilliard Blanning Associates Inc.  921 11th Street, Suite 400 Sacramento, CA 95814	OFC		75.76
Brienne Girard  34023 Copper Lantern Dana Point, CA 92629	POS		41.00
Partisan Media Group LLC  17541 17th Street Tustin, CA 92780	WEB		1,300.00
CompleteCampaigns.com  610 Gateway Center Way, Suite K San Diego, CA 92102	OFC		116.25

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

**SUBTOTAL \$** 1,930.51

# Schedule F Accrued Expenses (Unpaid Bills)

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

SCHEDULE F

Statement covers period from 07/01/2007 through 12/31/2007		CALIFORNIA FORM <b>460</b>
Page 42 of 52		
NAME OF FILER Diane Markey for Assembly		I.D. NUMBER 1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Markey for Assembly

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Paula Consulting, Inc. 40335 Winchester Rd E-165 Temecula, CA 92591	CNS	1,000.00	0.00	1,000.00	0.00
Paula Consulting, Inc. 40335 Winchester Rd E-165 Temecula, CA 92591	OFC	110.20	0.00	110.20	0.00
Paula Consulting, Inc. 40335 Winchester Rd E-165 Temecula, CA 92591	CNS	500.00	0.00	500.00	0.00
<b>* Payments that are contributions or independent expenditures must also be summarized on Schedule D.</b>		<b>SUBTOTALS \$</b>	<b>1,610.20 \$</b>	<b>0.00 \$</b>	<b>1,610.20 \$</b>
					<b>0.00</b>

## Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 3,203.73
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 1,765.06
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** 1,438.67  
May be a negative number

**Schedule F**  
**(Continuation Sheet)**  
**Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F (CONT.)

Statement covers period from 07/01/2007 through 12/31/2007	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Diane Bailey for Assembly

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Brienne Girard 34023 Copper Lantern Dana Point CA 92622	OFC	154.86	0.00	154.86	0.00
Wendy Warfield & Associates 921 11th St., #701 Sacramento CA 95814	CNS	0.00	1,026.79	0.00	1,026.79
Wendy Warfield & Associates 921 11th St., #701 Sacramento CA 95814	FND	0.00	893.18	0.00	893.18
Bank of Americard PO Box 15715 Wilmington DE 19886	TRS	0.00	283.76	0.00	283.76
<b>SUBTOTALS \$</b>		154.86 \$	2,203.73 \$	154.86 \$	2,203.73

**Schedule F**  
**(Continuation Sheet)**  
**Accrued Expenses (Unpaid Bills)**

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

SCHEDULE F (CONT.)

Statement covers period from <u>07/01/2007</u> through <u>12/31/2007</u>		<b>CALIFORNIA</b> <b>FORM</b> <b>460</b>
Page <u>44</u> of <u>52</u>		
NAME OF FILER Diana Harkley for Assembly		I.D. NUMBER 1294082

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Aim Point, Inc.  925 University Avenue  Sacramento CA 95825	CNS	0.00	1,000.00	0.00	1,000.00
<b>SUBTOTALS \$</b>		0.00	\$ 1,000.00	\$ 0.00	1,000.00

# Schedule G

## Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2007	
through	12/31/2007	Page 45 of 52

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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Am Point, Inc.

**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
CNS	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
FND	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 services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Dawn Dias 4000 Innovator Drive, #35104 Sacramento CA 95834	FND		250.00
Staples 33059 Doherty Park Road San Juan Capistrano CA 92675	OFC		106.15
The Ritz 880 Newport Center Drive Newport Beach CA 92660	FND		3,723.90

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 4,080.05

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

SCHEDULE G

Statement covers period from 07/01/2007		CALIFORNIA FORM <b>460</b>
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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank of Americard

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Alaska Airlines P.O. Box 68000-SEAE0 Seattle WA 98168	TRC	DHarkey: 9/7 SMF-PalmSprings	214.40
Southwest Airlines PO Box 36649 Dallas TX 95235	TRC	DHarkey: 9/13 SNA-FM-SNA	262.80
Southwest Airlines PO Box 36649 Dallas TX 95235	TRC	DHarkey: 10/15 SNA-SMF 10/16 SMF-SNA	262.80
Southwest Airlines PO Box 36649 Dallas TX 95235	TRC	DHarkey: 10/23 SNA-SMF-SNA	232.80

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 972.80

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FPPC Form 460 (January/05)  
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**Schedule G****Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period

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**CALIFORNIA  
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NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER

1294082

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank of America

**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
CNS	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
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Island Hotel 690 Newport Center Drive Newport Beach CA 92660	FND			3,990.40
Southwest Airlines PO Box 36649 Dallas TX 95235	TRC		DHarkey: 11/27 SNA-SMF 11/28 SMF-SNA	292.80
Hyatt Regency Sacramento 1209 L Street Sacramento CA 95814	TRC		DHarkey: 11/27 Lodging & Meeting Costs	283.76

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 4,566.96

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

SCHEDULE G

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

EMI Dynamic Marketing Inc.

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster Main Station Mission Viejo CA 92692	FND		102.50

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 102.50

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)



**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

Type or print in ink.  
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 to whole dollars.

SCHEDULE G

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NAME OF FILER

Diane Bailey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Erienne Girard

**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
CNS 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
FND 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 services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster  Main Station  Mission Viejo CA 92692	POS		492.00

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$ 492.00**

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**Schedule G****Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**Type or print in ink.  
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SCHEDULE G

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Diane Hatkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

JC-Evans Inc.

**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
CNS	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
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
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LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Norcal Associates 10419 White Rock Road Rancho Cordova CA 95670	LIT			515.00
Norcal Associates 10419 White Rock Road Rancho Cordova CA 95670	LIT			515.00

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 1,030.00

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

**Schedule G**  
**Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**

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

SCHEDULE G

Statement covers period		<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Morcal Associates

**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
CNS 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
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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster Main Station Mission Viejo CA 92692	POS		229.19
US Postmaster Main Station Mission Viejo CA 92692	POS		301.47

Attach additional information on appropriately labeled continuation sheets.

**TOTAL\* \$** 530.66

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

**Schedule G****Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)**Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE G

Statement covers period

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1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Wendy Warfield &amp; Associates

**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
CNS	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
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LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Pyramid Alehouse 1029 K Street Sacramento CA 95814	FND			826.44
Pyramid Alehouse 1029 K Street Sacramento CA 95814	FND			826.44

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ 1,652.88

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

FPPC Form 460 (January/05)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)