Recipient Committee COVER PAGE Type or print in ink. **Campaign Statement** Date Stamp **CALIFORNIA Cover Page FORM** (Government Code Sections 84200-84216.5) Statement covers period DECEIVED Date of election if applicable: (Month, Day, Year) of _26 05/18/2008 For Official Use Only SEE INSTRUCTIONS ON REVERSE 06/03/2008 06/30/2008 through 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. 2. Type of Statement: White was in the X Officeholder, Candidate Controlled Committee Primarily Formed Ballot Measure Preelection Statement State Candidate Election Committee Quarterly Statement Committee Semi-annual Statement Recall O Controlled Special Odd-Year Report Termination Statement (Also Complete Part 5) Sponsored Supplemental Preelection (Also file a Form 410 Termination) (Also Complete Part 6) Statement - Attach Form 495 General Purpose Committee Amendment (Explain below) Sponsored Primarily Formed Candidate/ Small Contributor Committee Officeholder Committee O Political Party/Central Committee (Also Complete Part 7) LD. NUMBER 3. Committee Information Treasurer(s) 1294082 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NAME OF TREASURER Diane Harkey for Assembly Betty Presley MAILING ADDRESS 30151 Tomas STREET ADDRESS (NO P.O. BOX) CITY ZIP CODE AREA CODE/PHONE 30151 Tomas Rancho Santa Margarita, CA 92688 CITY 949-858-7448 STATE ZIP CODE AREA CODE/PHONE NAME OF ASSISTANT TREASURER, IF ANY Rancho Santa Margarita, CA 949-858-7448 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX MAILING ADDRESS 24843 Del Prado, #284 STATE ZIP CODE AREA CODE/PHONE CITY STATE ZIP CODE AREA CODE/PHONE Dana Point, OPTIONAL: FAX / E-MAIL ADDRESS OPTIONAL: FAX / E-MAIL ADDRESS 949-858-6807 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 periury under the laws of the State of California that the foregoing is true of

. January and the oblige of Cambridge Inc	active long only is true an accorrect. / \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Executed on07/14/2008	By Catty Itally
Executed on07/16/2008	Signature of Neasurer or Assistant Areasurer Signature of Commolling Officeholder, Candidate, State Measure Proportion or Responsible Officer of Sponsor
Executed on	BySignature of Controlling Officeholder, Candidate, State Measure Proponent
Executed on	BySignature of Controlling Officeholder, Candidate, State Measure Proponent

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

COVER F	PAGE - PART 2
CALIFORNIA FORM	460
Page 2	of <u>26</u>

. Officeholder or Candidate Controlled Comm	ittee	6.	Primarily Formed Ballo	t Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
Diane Harkey						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC State Assembly Person Assembly District : 73	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	DN	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C. 76 Ritz Cove Monarch Beach, CA 92629	TY STATE ZIP		Identify the controlling office	ceholder, can	ndidate, or state meas	ure proponent, if any
			NAME OF OFFICEHOLDER, CANI	DIDATE, OR PR	OPONENT	
Related Committees Not Included in this Sta not included in this statement that are controlled by you contributions or make expenditures on behalf of your can	or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT	NO. IF ANY
COMMITTEE NAME Diane Harkey for Dana Point City Council	I.D. NUMBER 1264652					
NAME OF TREASURER Betty Presley	CONTROLLED COMMITTEE? X YES NO	7.	Primarily Formed Cand officeholder(s) or candidate(s)	idate/Offico	eholder Committee committee is primarily	List names of formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO 30151 Tomas)X)		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
CITY STATE ZIP Co	ODE AREA CODE/PHONE 949-858-7448		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HE	LD SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT OR HE	
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HE	SUPPORT
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BC	X)					OPPOSE
CITY STATE ZIP CO	DDE AREA CODE/PHONE		Attach	ontinuation	n sheets if necessary	

Campaign Disclosure Statement Summary Page

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

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly 1294082 Column A Contributions Received Column B Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) General Elections 1. Monetary Contributions Schedule A, Line 3 \$ ___ 21,400.00 120,517.00 2. Loans Received Schedule B, Line 3 1/1 through 6/30 7/1 to Date -100,000.00 0.00 SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ -78,600.00 120,517.00 20. Contributions Received 3,100.00 4,937.28 21. Expenditures TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ ____ -75,500.00 125,454.28 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made Schedule E, Line 4 \$ Candidates 7. Loans Made Schedule H, Line 3 0.00 0.00 SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 22. Cumulative Expenditures Made* 54,558.36 266,028.66 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 -36,066.13 2,345.01 Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 (mm/dd/yy) 3,100.00 4.937.28 **Current Cash Statement** To calculate Column B. add 13. Cash Receipts Column A, Line 3 above amounts in Column A to the -78,600.00 corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts 1,970.00 from Column B of your last reported in Column B. report. Some amounts in 54,558.36 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ _ 35,246.59 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B. Pert 2 \$ _____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if 18. Cash Equivalents See instructions on reverse \$ FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS O	N REVERSE
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NAME OF FILER

Diane Harkey for Assembly

LD. NUMBER 1294082

			i			
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)
05/19/2008	DMB Ladera, LLC P.O. Box 9	□IND □COM ⊠OTH		750.00	750.00	P 08 750.00
WARRANI WARRAN	San Juan Capistrano, CA 92693	□PTY □SCC				
05/19/2008	Tom O'Keefe	⊠IND □COM	President	100.00	160.00	P 08 150, Co
	35531 Camino Capistrano San Clemente, CA 92672	□OTH □PTY □SCC	O'Keefe Realty			
05/19/2008	John Phelps 33132 Scalion Dr. Dana Point, CA 92629	⊠IND □COM □OTH □PTY □SCC	Retired None	200.00	200.00	P 08 000,00
	RMV Community Development P.O. Box 9 San Juan Capistrano, CA 92693	☐IND ☐COM ☑OTH ☐PTY ☐SCC		750.00	750.00	P 0R /50,50
(3) 200	Scott Anderson 17625 E. Railroad St. Rowland Heights, CA 91748	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Executive Zenith Specialty Bag Co.	300.00	300.00	P 08 300.00

Schedule A Summary

- 2. Amount received this period unitemized monetary contributions of less than \$100\$

*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)

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

monetary contributions received	to whole dollars.	Statement covers period	CALIFORNIA 460		
		from <u>05/18/2008</u>	FORM 40U		
		through <u>06/30/2008</u>	Page5_ of26		
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 ENTERED 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)		RELECTION TO DATE REQUIRED)
05/26/2008	David Brown 18 Shooting Star Irvine, CA 92604	⊠IND □COM □OTH □PTY □SCC	President Affiliations Unlimited, Inc.	500.00	500.00	P 08	500.00
06/02/2008	Associated Builders & Contractors PAC of Southern CA (#1282257) 7185 Navajo Rd., Ste. L San Diego, CA 92119	□IND □COM □OTH □PTY □SCC		100.00	100.00	P 08	100.00
06/02/2008	Ganahl Lumber Co. 1220 E. Ball Rd. Anaheim, CA 92805	□IND □COM 図OTH □PTY □SCC		250.00	500.00	80 역	400.09
06/02/2008	Pechanga Band of Mission Indians P.O. Box 1477 Temecula, CA 92593	□IND □COM ⊠OTH □PTY □SCC		3,600.00	3,600.00	P 08	3,600.00
06/02/2008	Picoco, LLC 660 Newport Center Dr., #650 Newport Beach, CA 92660	□IND □COM ☑OTH □PTY □SCC		2,100.00	2,100.00	G 08	3,600.00 2,100.60
			SUBTOTAL\$	6,550.00		<u> </u>	

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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)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

le dollars.	Statement covers period	CALIFORNIA A CO
	from05/18/2008	FORM 460
	through <u>06/30/2008</u>	Page 6 of 26
		I.D. NUMBER
		1294082

					14. day 14.	4082
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, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
06/02/2008	Santa Ana Police Officers PAC (#841683) 1607 N Sycamore Santa Ana, CA 92701	□IND ☑COM □OTH □PTY □SCC		250.00	250.00	PU8 750.
06/02/2008	Southern Wine & Spirits of America, Inc. 2400 SW 145th Ave., #300 Miramar, FL 33027	□IND □COM ☑OTH □PTY □SCC		3,000.00	3,000.00	P 08 3,600.
06/09/2008	Los Alamitos Race Course 4961 Katella Ave. Los Alamitos, CA 90720	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.00	G 08 1,550.
06/10/2008	Marcia Milchiker 261320 Oroville Pl. Laguna Hills, CA 92653	⊠IND □COM □OTH □PTY □SCC	Community College Trustee SOC Community College District	500.00	500.00	G 08 560.
0071772606	Cal PT PAC (#780079) 2880 Gateway Oaks Dr., #140 Sacramento, CA 95833	□IND ⊠COM □OTH □PTY □SCC		500.00	500.00	G 08 55/0.4
			SUBTOTAL\$	5,750.00		J

*Contributor Codes

IND - Individual

NAME OF FILER

Diane Harkey for Assembly

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)

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

SCHEDULE A (CONT.)

,	to whole dollars.	Statement covers period	CALIFORNIA A CO		
		from 05/18/2008	FORM 460		
VAME OF EUED		through <u>06/30/2008</u>	Page7 of?6		
NAME OF FILER		<u> </u>	I.D. NUMBER		
Diane Harkey for Assembly			1294082		

						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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		ER ELECTION TO DATE REQUIRED)	
06/17/2008	Physicians for the Group Fractice of Medicine (#992303) 332 Sheridan Ave. Piedmont, CA 94611	□IND ☑COM □OTH □PTY		1,500.00	1,500.0	0 G 08	1,500,00	
06/20/2008	CA Building Industry Assn. PAC (#890463)	□SCC □IND ☑COM		500.00	500.0	P 08	1,000.00	
	1215 K St., #1200 Sacramento, CA 95814	□OTH □PTY □SCC				6.08	56U.Gr	
06/20/2008	CA Chamber of Commerce PAC (#950352) 1215 K St., #1400 Sacramento, CA 95814	□IND INCOM □OTH □PTY □SCC		1,000.00	1,000.0	80 g	1,000.00 1,000.00	
06/20/2008	PG&E Corporation 77 Beale Street, 32nd Floor San Francisco. CA 94105	□IND □COM ☑OTH □PTY □SCC		1,000.00	2,090.0) P 08	1,650.68 1,655.63	
06/26/2008	CA Credit Union League PAC (#760225) 9500 Cleveland Ave., #200 Rancho Cucamonga, CA 91730	□IND 図 COM □ OTH □ PTY □ SCC		1,000.00	1,000.0	G 08	1,000.00	
			SUBTOTAL\$	5,000.00				

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from _____05/18/2008

				through <u>06/30/2</u>	008	Page.	88	of <u>26</u>	
NAME OF FILER Diane Harkey	tor 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 CALENDAR Y (JAN. 1 - DEC	EAR		RELECTION TO DATE REQUIRED)	
06/30/2008	California Motor Car Dealers Association PAC (#741623) 455 Capital Mall, Suite 801 Sacramento, CA 95814	□IND ⊠COM □OTH □PTY □SCC		1,000.00	3,00	00.00	80 9 80 9	2,000.00 1,000.00	
06/30/2008	Cooperative of American Physicians State PAC (#760951) 333 S. Hope St., 8th F1. Los Angeles, CA 90071	□IND ③COM □OTH □PTY □SCC		1,000.00	1.00	30.00	G 08	1,600.0	
		□IND □COM □OTH □PTY □SCC				······			
		□IND □COM □OTH □PTY □SCC							
***************************************		□IND □COM □OTH □PTY □SCC					many specific major and a second of a second second		
***************************************			SUBTOTAL\$	2,000.00					

*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 B – Part 1 Loans Received

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

	SC	ŀΕDU	JLE	В-	PART 1
--	----	------	-----	----	--------

CALIFORNIA A CO

Statement covers period

	Jano Nedelyeu		rs.		from05/18	3/2008	FORM 400	
SEE INSTRUCTIONS ON REVERSE					through06/30)/2008	Page 9	of 26
NAME OF FILER					ougn		, 490	of
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	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIE OR FORGIVEN	CLOSE OF THIS	(e) INTEREST PAID THIS	(f) ORIGINAL AMOUNT OF	(g) CUMULATIVE CONTRIBUTIONS
Diane Harkey	Councilwoman	PERIOD		THIS PERIOD	PERIOD	PERIOD	LOAN	TO DATE
76 Ritz Cove Monarch Beach, CA 92629	City of Dana Point			▼ PAID 50,000.00 \$ ☐ FORGIVEN	\$	0.00%, RATE	\$	\$000.000.00
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$	5	\$0.00	DATE DUE	\$	01/17/2007 DATE INCURRED	PERELECTION** POR 1.96+.64 \$
Diane Harkey 76 Ritz Cove	Councilwoman			PAID 50,000.00	s 0.00	0.00%	50,000.00	CALENDAR YEAR S = -180, ergineri
Monarch Beach, CA 92629	City of Dana Point	50,000.00	Q.00 s	FORGIVEN 0.00		RATE 0.00	06/29/2007	PERELECTION **
TEND COM OTH PTY SCC					DATE DUE	3	DATE INCURRED	\$
† IND COM OTH PTY SCC		SUBTOTALS \$	5	PAID \$ FORGIVEN \$	S	0% % RATE	\$DATE INCURRED	S PERELECTION **
Sahadula D C		SUBTUTALS \$	0.00 \$	100,000.00	0.90	\$ 0.00 (Enter (e) on	W MARKET	
Schedule B Summary 1. Loans received this period	o of long them (\$400.)		*****************	\$	0.00	Schedule E, Line 3)		
 Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that 	paid or forgiven.) are also itemized on Sched	ule A.)				INI CC OT	ontributor Codes D – Individual M – Recipient Co (other than F H – Other (e.g., I Y – Political Party	PTY or SCC) business entity)
3. Net change this period. (Subtract Line Enter the net here and on the Summary	2 from Line 1.) Page, Column A, Line 2.	***************************************	***************************************	NET \$	-100,000.00 ay be a negalive number)	sc	C – Small Contrib	utor Committee
*Amounts forgiven or paid by another party also r ** If required.	nust be reported on Schedule A.						5000 F	400 (1 /05)

Schedule C **Nonmonetary Contributions Received**

Type or print in ink. Amounts may be rounded

SCHEDULE C Statement covers period **CALIFORNIA FORM** 05/18/2008 through 06/30/2008 I.D. NUMBER 1294082

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly CUMULATIVE TO IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND AMOUNT/ CONTRIBUTOR **DESCRIPTION OF** PER ELECTION DATE OCCUPATION AND EMPLOYER DATE ZIP CODE OF CONTRIBUTOR FAIR MARKET CODE * TO DATE RECEIVED GOODS OR SERVICES (IF SELF-EMPLOYED, ENTER CALENDAR YEAR (IF COMMITTEE, ALSO ENTER LD. NUMBER) VALUE NAME OF BUSINESS) (IF REQUIRED) (JAN 1 - DEC 31) 05/27/2008 Adam Probolsky President XIND Polling Services 3,100.00 3,135.00 P 08 3,600.00 ПСОМ G 98 535,00 Probolsky Research 23276 South Pointe Drive, #206 OTH PTY Laguna Hills, CA 92653 SCC СОМ □OTH PTY SCC COM □OTH PTY

□scc Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 3,100.00

Schedule C Summary

. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$ 3,100.00
Amount received this period – unitemized nonmonetary contributions of less than \$100	
Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	\$ 3,100.00

□SCC COM ПОТН PTY

*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

Schedule E **Payments Made**

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

	SCHEDULE E
Statement covers period	CALIFORNIA / CO
from05/18/2008	FORM 400
through06/30/2008	Page 11 of 26
	I.D. NUMBER
	1294002

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly 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 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 candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense 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 Gilliard Blanning Associates Inc. PHO 2921.87 921 11th Street, Suite 400 Sacramento, CA 95R14 Gilliard Blanning Associates Inc. CNS 5,000,00 921 11th Street, Suite 400 Sacramento, CA 95814 Gilliard Blanning Associates Inc. POS 19,73 921 11th Street, Suite 400 Sacramento, CA 95814 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 5,312,60 Schedule E Summary 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)......\$

SEE INSTRUCTIONS ON REVERSE

Diane Harkey for Assembly

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDU	HE		(CONT.)
SUPER	ノレビ	⊏.	IUUNIII

e rounded	Statement covers period	CALIFORNIA 460		
ollars,	from05/18/2008	FORM 400		
	through06/30/2008	Page12 of36		
		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 airlime 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 meats independent expenditure supporting/opposing others (explain)* ND 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
Gilliard Blanning Associates Inc.			
921 11th Street, Suite 400	LIT		
Sacramento, CA 95814	13.1.1		1,775.00
Brienne Girard			
34023 Copper Lantern	OFC		3,127.22
Dana Point, CA 92629	Or C		Ser F. B. C. F.
Lauryn Picciano			***************************************
33791 Violet Lantern Street, #B	OFC		163.00
Dana Point, CA 92629			
Political Data Inc.			
PO Box 1706			362,29
Eurbank, CA 91507	LIT		***
The Monaco Group, Inc.			
14352 Franklin Ave., Unit B	LIT		8,290.99
Tustin, CA 92780			
14352 Franklin Ave., Unit B	LIT		8,290.9

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

SUBTOTAL \$

13,729.20

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

SCHEDU	Ħ	F	Ε.	(CONT.)

CALIFORNIA A CO

Statement covers period

Payments Made	to whole dollars.	from	05/18/2008	FORM 40U
EEE INSTRUCTIONS ON REVERSE NAME OF FILER		through	06/30/2008	Page13of26
Diane Harkey for Assembly				I.D. NUMBER
CODES: If one of the following codes accurately describes the				1294082

COL	res. If one of the following codes accurately described.	oes the	payment	Volumay enter	the code	Othonuina	donerile H
CNS CTB CVC FIL FND IND LEG	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR MTG OFC PET PHO POL POS	member or meetings a office exp petition cir phone bar polling and postage, o	ommunications and appearances enses culating	nger services	RAD RFD SAL TEL TRC TRS TSF VOT	describe the payment. radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration 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
The Monaco Group, Inc.			THE SHITT ALL
14352 Franklin Ave., Unit B	LIT		12,524.83
Tustin, CA 92780			
Federal Express			
Payment Center	DOG		37.05
Memphis, TN 38101	POS		
DMI/Dynamic Marketing Inc.			
1145 West Collins Ave			
	FND		872.62
Orange, CA 92867			
Lauryn Picciano			
33791 Violet Lantern Street, #B			
Dana Point, CA 92629	CNS		2,590.60
Aim Point, Inc.			
	077		
1201 K Street, #970	OFC		49.10
Sacramento, CA 95814			
	<u> </u>		

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

SCHEDU) I E	E .	CONT	١
300000	ノレロ		IUADINE	ł

State	ment covers period	CALIFORNIA / CO			
from	05/18/2008	FORM 400			
through	06/30/2008	Page 14 of 26			
		I.D. NUMBER			
		1204002			

	HOIH	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	through06/30/2008	Page14 of
Diane Harkey for Assembly		I.D. NUMBER
		1294082

CODES: If one of the following codes accurately described CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS professional services (legal, accounting) PRT print ads	RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT AMOUNT PAID
Aim Point, Inc.		

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Aim Point, Inc.			
1201 K Street, #970	CNS		
Sacramento, CA 95814	Carlo		2,377.5%
Betty Presley & Associates, Inc.			
30151 Tomas	PRO		900.en
Rancho Sta Margarita, CA 92688	1110		
Brichne Girard			
34023 Copper Lantern	OFC		790,40
Dana Point, CA 92629			
Norcal Associates			
10419 White Rock Road			243.00
Rancho Cordova, CA 95670	FND		€er TA • '•
Political Data Inc.			V
PO Box 1706	LIT		233.33
Burbank, CA 91507			

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

SUBTOTAL \$

4,553.33

Schedule E (Continuation Sheet)

Wilmington, DE 19886

Betty Presley & Associates, Inc.

921 11th Street, Suite 400

Type or print in ink. Amounts may be rounded

SCH	EDUL	Æ E	(CONT.)

(Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA 4 O O	
Payments Made	to whole dollars.	from05/18/2008	FORM 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 06/30/2008	Page15 of26	
Diane Harkey for Assembly			I.D. NUMBER	
CODES. If any of the fill			1294082	

							129408	15
CODES: If one of the following codes accurately described campaign paraphernalia/misc campaign consultants contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	es the MBR MTG OFC PET PHO POL POS PRO PRT	member com meetings and office expen petition circu phone banks polling and s postage, deli	munication d appearar ses lating survey rese very and r	s nces	RAD RFD SAL TEL TRC TRS		costs duction costs d meals and meals s of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I D NUMBER)			CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Federal Express								
Payment Center			POS					
Memphis, TN 38101								74.17
Bank of Americard								
PO Box 15715			FND					1.886.75
Wilmington, DE 19886			FND					(,000)
Bank of Americard								
PO Box 15715			FND					700 00

30151 Tomas 997.99 PRO Rancho Sta Margarita, CA 92688

Gilliard Blanning Associates Inc. PHO

Sacramento, CA 95814

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

SUBTOTAL \$

4,001.92

815,00

229,09

Type or print in ink.

Amounts may be rounded to whole dollars.

COLLEGE			(00 to 1 to 1
SCHEDU	JLI	- E	(CON1)

Statem	ent covers period	CALIFORNIA / CO
from	05/18/2008	FORM 400
through _	06/30/2008	Page16 of26
		I.D. NUMBER
		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

COL	ES: If one of the following codes accurately describes	s the	payment, you may enter the code.	Otherwise,	describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
	contribution (explain nonmonetary)*		office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meats
ND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponso
	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
Diane Harkey			
76 Ritz Cove	FIL		1,160.08
Monarch Beach, CA 92629			4, 404.100
Wendy Warfield & Associates			A STATE OF THE STA
921 11th St., #701	OFC		4.16
Sacramento, CA 95814			
Wendy Warfield & Associates			10 10 10 10 10 10 10 10 10 10 10 10 10 1
921 lith St., #701	CNS		1,000.00
Sacramento, CA 95814			
Brienne Girard			
34023 Copper Lantern			2,500.00
Dana Point, CA 92629	CNS		
Brienne Girard			
34023 Copper Lantern	CNS		2,500.00
Dana Point, CA 92629			

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

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

SCHE	DUIL	FF	(C	ONTY

Statement covers period	CALIFORNIA ACO
from05/18/2008	FORM 400
through 06/30/2008	Page 17 of 26
	LD, NUMBER
	1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEG legal defense

Diane Harkey for Assembly

campaign literature and mailings

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.	
campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs	4
CRD returned contributions MIG meetings and appearances RFD returned contributions	
CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations FET petition circulating	
Fill condidate filing/hallet fees	
FND fundraising events POL polling and survey research TRS staff(spouse traylor) ledging, and mean	ilS neale
IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the	he same candidate/sponsor

postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

VOT voter registration

WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD NUMBER) CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID Norcal Associates 10419 White Rock Road FND 243.00 Rancho Cordova, CA 95670 JC-Evans Inc. 11230 Gold Express Drive, #310-325 840.24 FND Gold River, CA 95670 Federal Express Payment Center POS 33.21 Memphis, TN 38101 Lauryn Picciano 33791 Violet Lantern Street, #B 2,500.00 CNS Dana Point, CA 92629

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

SUBTOTAL \$

3,616.55

Schedule F Accrued Expenses (Unpaid Bills)

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

Statement covers period	CALIFORNIA / CO
from05/18/2008	FORM 400
through06/30/2008	Page 18 of 26
	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 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 candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* ND postage, delivery and messenger services transfer between committees of the same candidate/sponsor LEG legal defense 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 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
Diane Harkey	FIL	1,162.08	0.00	1,162.08	0.00
76 Ritz Cove					
Monarch Reach, CA 92629					
DMI/Dynamic Marketing Inc.	FND	879.62	0.00	879.62	(· 'UU
1145 West Collins Ave					
Orange, CA 92867					
Brienne Girard	CNS	2,500.00	0.00	2,500.00	0.00
34023 Copper Lantern					
Dana Point, CA 92629					
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	4,541.70	0.00\$	4,541.70\$	Ø.(0

Schedule F Summary

i. Iotal a	crued expenses incurred this period. (include all Schedule F, Column (b) subtotals for		
accrue	expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	OTALS \$	2,345.03

- 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on
- 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

 NET \$ -36,066.13

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statem	ent covers period	CALIFORNIA / CO
from	05/18/2008	FORM 400
through _	06/30/2008	Page 19 of 26
		I.D. NUMBER
		1294082

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 returned contributions CTB contribution (explain nonmonetary)* OFC office expenses campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals

FND fundraising events POL independent expenditure supporting/opposing others (explain)*

IND legal defense POS polling and survey research POS postage, delivery and messenger services postage.

G legal defense PRO professional services (legal, accounting) VOT voter registration 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
The Monaco Group, Inc.	LIT	12,524.83	0.00	12,524.83	0.00
14352 Franklin Ave., Unit B					
Tustin CA 92780					
Bank of Americard	FND	1,886.25	0.00	1,886.25	n _i ch
PO Box 15715					
Wilmington DE 19886					
Gilliard Blanning Associates Inc.					1000
921 11th Street, Suite 400	CNS	5,000.00	0.00	5,000.00	0.03
Sacramento CA 95814					
Brienne Girard	CNIC				THE STATE OF THE S
34023 Copper Lantern	CNS	2,500.00	0.00	2,500.00	0.00
Dana Point CA 92629					
	SUBTOTALS S	21,911.08	0.00 \$	21,911.08	0.00

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

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMEDULE FILIONES	EDULE F (CON'	TΈ
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Staten	ent covers period	CALIFORNIA / CO
from	05/18/2008	FORM TOU
through_	06/30/2008	Page 20 of 26
		I.D. NUMBER
		1204002

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 returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events

FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals nidependent 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 print ads

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 LD 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
The Monaco Group, Inc.	LIT	8,290.99	0.00	8,290.99	8,00
14352 Franklin Ave., Unit B					
Tustin CA 92780					
Political Data Inc.	LIT	362.99	0.00	362.99	0.00
PO Box 1706					
Burbank CA 91507					
Brienne Girard	OFC	2 425 00			
34023 Copper Lantern	Orc	3,137.22	0.00	3,137.22	0.00
Dana Point CA 92629					
Lauryn Picciano		· · · · · · · · · · · · · · · · · · ·			
33791 Violet Lantern Street, #B	OFC	163.00	0.00	163.00	0.00
Dana Point CA 92629					
	SUBTOTALS !	\$ 11,954.20 \$	0.00	11,954.20	○ (33)

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	CALIFORNIA / CO
from05/18/2008	FORM TOU
through 06/30/2008	Page 21 of 26
	I.D. NUMBER
	1294082

transfer between committees of the same candidate/sponsor

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 petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals

independent expenditure supporting/opposing others (explain)*

POS postage, delivery and messenger services

PRO professional sequences (legal, executation)

legal defense PRO professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology.

of 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 LD. 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
Fuller Communications Inc.	FND	0.00	121.88	0.00	121.88
410 Jericho Turupike, Suite 300					
Jericho NY 11753		÷			
Wendy Warfield & Associates	FND	0.00	1,279.66	0.00	1,079.66
921 11th St., #701			T make		
Sacramento CA 95814					
Bank of Americard					
FO Box 15715	OFC	0.00	943.47	0.00	949.43
Wilmington DE 19886					
	1/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4/4	1000			
^	SUBTOTALS S	0.00	2,345.01 \$	0.00\$	2,345.01

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE G
Staten	nent covers period	CALIFORNIA ACO
from	05/18/2008	FORM 46U
through_	06/30/2008	Page22 of26
		LD. NUMBER
		1294092

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank of Americard

CO	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		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
California Republican Assembly	PRT		209,00
801 Riverside Avenue Surte 100			
Roseville CA 95678			
Hyatt Regency Sacramento	TRC	DHarkey: 6/24-6/26 Lodging	630.47
1209 L Street			
Sacramento CA 95814			
Southwest Airlines	TRC	DHarkey: 6/24 SNA-SMF 6/26 SNA-SMF	312.00
PO Box 36649			
Dallas TX 95235			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

1,172.47

^{*} 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.

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE (
State	ment covers period	CALIFORNIA A CO
from	05/18/2008	FORM 400
through	06/30/2008	Page of
		I.D. NUMBER
		1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Gilliard Blanning Associates 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.
CNS campaign consultants

CTB contribution (explain nonmonetary)*
CVC civic donations

FIL candidate filing/ballot fees FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LEG legal defense

LIT campaign literature and mailings

MBR member communications

MTG meetings and appearances

OFC office expenses
PET petition circulating
PHO phone banks

OL polling and survey research

POS postage, delivery and messenger services PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging, and meals staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

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 (#F COMMITTEE, ALSO ENTER D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Light Graphics	LIT		1,77-,00
R221 Old Ranch Road			
Citrus Heights CA 95610			
Ndvantage Inc.	РНО		81%.5
300 Clarendon Blvd			
Arlington VA 22201			
·			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

2,596.00

^{*} 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.

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

			S	CHEDULE G
Statem	ent covers period	CALIE	ORNIA	dea
from	05/18/2008	F®)RM	400
through	06/30/2008	Page	24 of	26
		I.D. NUM 12940		**************************************

SEE INSTRUCTIONS ON REVERSE	through <u>06/30/2008</u>	Page24 of26
NAME OF FILER		I.D. NUMBER
Diane Harkey for Assembly		1294082
		1274002
NAME OF AGENT OR INDEPENDENT CONTRACTOR		
Brienne Girard		

	man and the second seco				
CO	DES: If one of the following codes accurately describe	s the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.		member communications		radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances		returned contributions
		OFC	office expenses		campaign workers' salaries
CVC	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*		postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO			voter registration
LΠ	campaign literature and mailings	PRT	print ads		information technology costs (internet, e-mail)
	•		F	**LD	intornation 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 LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster	POS		226.00
Main Station			
Mission Viejo CA 92692	,		
Laguna Niguel Military Support Foundation	CVC		200,01
27801 La Paz Road			
Laguna Niguel CA 92677			
The Shirt Factory	CMP		306.,37
25270 Marguerite Pkwy			
Mission Viejo CA 92692			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} 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.

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

				SCH	IEDULE (
State	ment covers period	CARLE		MANUFACTOR OF	0.000
from	05/18/2008	FO	ORNI RM	A /	(50)
through	06/30/2008	Page	25	of	21 F.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER	through06/30/2008	Page25 of26
Diane Markey for Assembly		I.D. NUMBER 1294082
NAME OF AGENT OR INDEPENDENT CONTRACTOR		1234082
Norcal Associates		

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.					
Over campaign paraphemalia/misc,	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO print ads	RAD radio airlime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airlime and production costs TRC candidate travel, lodging, and meals TRS staff/snouse travel, lodging, and meals			

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 LD NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster	POS		
Main Station	A		161.7
Assion Viejo CA 92692			
3 Postmaster	FND		3.7.
ain Station			101.7
hission Viejo CA 92692			
			110000000

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

^{*} 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 I Miscellaneous Increases to Cash

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from __05/18/2008 CALIFORNIA FORM FORM

	ns on reverse		through 05/30/2008	Page 26 of 26 ID. NUMBER 1294082
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I D. NUMBER)	DE	SCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
05/27/2008	Republican Vote-by-Mail Voter Guide 1299481	Refund of Slate		
	9321 Silverbend Lane Elk Grove, CA 95624			1, 370.0
06/02/2020	Platinum Advisors LLC			
1215	1215 K St., #1150	Deposited in Err 7/17/2008 with (cor - Refund Made on Check #1202	(:' b. ?
	Sacramento, CA 95814			
Asset I ATALON MAN AND AND AND AND AND AND AND AND AND A				
Attach addit	tional information on appropriately labeled continuation sheets.		CUDTOTAL	
Schedule I			SUBTOTAL	1,970.00
			•	
1. Itemized increases to cash this period. \$\frac{1,970}{0}\$.				
3. IOtal of all interest received this period on loans made to others. (Schodula II, Oct. 1997)				
 lotal misce 	ellaneous increases to cash this period. (Add Lines 1, 2, and 3. Page, Line 14.)	Entor house and the		