Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	ı ink.	Possynarker on 10/1/08	COVER PAGE CALIFORNIA 460 FORM
SEE INSTRUCTIONS ON REVERSE	Statement covers period	Date of election if applicable: (Month, Day, Year)	2008 OCT -7 /	Page 1 of 37    Of 57 Official Use Only
General Purpose Committee  Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4.  rimarily Formed Ballot Measure ommittee ) Controlled ) Sponsored  so Complete Part 6)  rimarily Formed Candidate/ fficeholder Committee  so Complete Part 7)	2. Type of Statement:    Preelection Statement     Semi-annual Statement     Termination Statement (Also file a Form 410 Te	ermination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
3. Committee Information  COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  Diane Harkey for Assembly  STREET ADDRESS (NO P.O. BOX)  30151 Tomas  CITY STATE ZIP COD	NUMBER 1294082	Treasurer(s)  NAME OF TREASURER  Betty Presley MAILING ADDRESS  30151 Tomas CITY  Rancho Santa Margarita	, CA 92688	IP CODE AREA CODE/PHONE 949-858-7448
Rancho Santa Margarita, CA 92688  MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BC  20843 Del Prado, #284  CITY STATE ZIP COE  Dana Point, CA 92629  OPTIONAL: FAX / E-MAIL ADDRESS  949-858-6807	949-858-7448 OX	NAME OF ASSISTANT TREASUR  MAILING ADDRESS  CITY  OPTIONAL: FAX / E-MAIL ADDRE	STATE ZI	P CODE AREA CODE/PHONE
Verification   I have used all reasonable diligence in preparing and reviewing to under penalty of perjury under the laws of the State of California      Executed on	By Signature of Con	Signature of Treasurer & Assistant Tr	reasurer onent or Responsible Officer of Spon le Measure Proponent	

NAME OF OFFICE IOLDER OF THE	mmittee	<ol><li>Primarily Formed B</li></ol>	allot Measur	e Committee	
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE			
Diane Harkey			•		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS State Assembly Person Assembly District : 73	TRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICT	ION	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) 76 Ritz Cove Monarch Beach, CA 92629	CITY STATE ZIP	Identify the controlling	officeholder, c	andidate, or state measu	re proponent, if a
		NAME OF OFFICEHOLDER,			
Related Committees Not Included in this not included in this statement that are controlled by y contributions or make expenditures on behalf of your	IOU or are primarily forms it is	OFFICE SOUGHT OR HELD		DISTRICT N	O. IF ANY
COMMITTEENAME Digne Harkey for Dana Point City Council	I.D. NUMBER 1264652	•	·		
NAME OF TREASURER Betty Presley	CONTROLLED COMMITTEE?  YES NO	7. Primarily Formed Ca officeholder(s) or candidate	andidate/Offi le(s) for which th	ceholder Committee ils committee is primarily fo	List names of
COMMITTEE ADDRESS STREET ADDRESS (NO P.C		·			
30151 Tomas	D. BOX)	NAME OF OFFICEHOLDER C	R CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT
CITY STATE ZI	D. BOX)  IP CODE AREA CODE/PHONE				SUPPORT
CITY STATE ZI		NAME OF OFFICEHOLDER O		OFFICE SOUGHT OR HELI	SUPPORT OPPOSE
CUTY STATE ZI Kancho Sta Margarita, CA 92688	P CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER O	r candidate		SUPPORT
CITY STATE ZI Kancho Sta Margarita, CA 92688 COMMNITEENAME	P CODE AREA CODE/PHONE 949-858-7448		r candidate		SUPPORT OPPOSE  SUPPORT OPPOSE  SUPPORT
SULDI Fomas	IP CODE AREA CODE/PHONE 949-858-7448  I.D. NUMBER  CONTROLLED COMMITTEE?	NAME OF OFFICEHOLDER O	R CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE
CITY STATE ZI Kancho Sta Margarita, CA 92688 COMMNITEENAME	IP CODE AREA CODE/PHONE 949-858-7448  I.D. NUMBER  CONTROLLED COMMITTEE?  YES NO	NAME OF OFFICEHOLDER O	R CANDIDATE	OFFICE SOUGHT OR HELI	SUPPORT OPPOSE OPPOSE OPPOSE OPPOSE OPPOSE

#### Campaign Disclosure Statement **Summary Page**

SEE INSTRUCTIONS ON REVERSE

Diame Harkey for Assembly

NAME OF FILER

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

SUMMARY PAGE Statement covers period CALIFORNIA 07/01/2008 **FORM** from \_ through \_

09/30/2008 Page  $\frac{3}{100}$  of  $\frac{37}{100}$ I.D. NUMBER 1294082

**Contributions Received** Column A Column B Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR (FROMATTACHED SCHEDULES) Running in Both the State Primary and General Elections 186,640.00 2. Loans Received ...... Schedule B, Line 3 1/1 through 6/30 0.00 7/1 to Date 0.00 SUBTOTAL CASH CONTRIBUTIONS ...... Add Lines 1 + 2 \$ \_\_\_\_ 66,123.00 20. Contributions 186,640.00 Nonmonetary Contributions ...... Schedule C, Line 3 Received 1,442.72 6,380.00 5. TOTAL CONTRIBUTIONS RECEIVED ...... Add Lines 3 + 4 \$ \_\_\_\_67,565.72 \$ \_\_\_\_ 21. Expenditures 193,020.00 \$\_\_\_\_\_ \$\_\_\_ Made Expenditures Made **Expenditure Limit Summary for State** Candidates 7. Loans Made ..... Schedule H, Line 3 0.00 0.00 8. SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ 22. Cumulative Expenditures Made\* 43,290.85 \$ \_\_\_\_309,319,51 9. Accrued Expenses (Unpaid Bills) ......Schedule F, Line 3 (If Subject to Voluntary Expenditure Limit) 5,640.67 7,985.82 Date of Election Total to Date 1,442.72 (mm/dd/yy) 6,380.00 **Current Cash Statement** To calculate Column B, add 13. Cash Receipts ...... Column A, Line 3 above 66,123.00 amounts in Column A to the 14. Miscellaneous Increases to Cash ...... Schedule I, Line 4 corresponding amounts 1,150.00 \*Amounts in this section may be different from amounts from Column B of your last 15. Cash Payments ...... Column A, Line 8 above reported in Column B. report. Some amounts in 43,290.85 16. ENDING CASH BALANCE ....... Add Lines 12 + 13 + 14, then subtract Line 15 \$ \_\_\_ Column A may be negative 59,228.74 figures that should be If this is a termination statement, Line 16 must be zero. subtracted from previous period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED ...... Schedule B, Part 2 \$ \_\_\_\_\_ 0.00 for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 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.

Statement covers period

california 4
FORM

460

SCHEDULE A

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

from \_\_\_07/01/2008 FORM FORM through \_\_09/30/2008 Page \_\_4 \_\_of \_\_37

I.D. NUMBER 1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  JA Professional Firefighters PAC (#744058)	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)	
07/02/2008	1780 Creekside Oaks, #200 Sacramento, CA 95833 Glaxo Smith Kline	☐IND ☐COM ☐OTH ☐PTY ⊠SCC		1,000.00	2,000.00	P 08 1,000 G 08 1,000	
	980 9th St., #2200 Sacramento, CA 95814 Western United Dairymen State PAC (#771500)	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.00	P 08 1,000 G 08 1,000	
	1315 K St. Modesto, CA 95354	□IND ⊠COM □OTH □PTY □SCC		750.00	750.00		0.00
	Western Manufactured Housing Communities Assn. PAC (#74 455 Capitol Mall, #800 Sacramento, CA 95814 Fireman's Fund	<sup>74</sup> ∰IND ⊠ COM □ OTH □ PTY □ SCC		1,000.00	1,000.00	P 08 1,000 G 08 1,000	1.00
	777 San Marin Dr. Novalo, CA 94998	□IND □COM ③OTH □PTY □SCC		300.00	300.00	G 08 300	).00
ARREA			SUBTOTAL\$	4,050.00			<del>-</del>

**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)

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period	CALIFORNIA ACO
from07/01/2008	FORM 46U
through <u>09/30/2008</u>	Page5 of37
	I.D. NUMBER
	1.304000

Diane Harkey for Assembly 1294082 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE IF AN INDIVIDUAL, ENTER TRUOMA CUMULATIVE TO DATE CONTRIBUTOR PER ELECTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR CODE \* TO DATE (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN, 1 - DEC, 31) (IF REQUIRED) OF BUSINESS) AT&T Inc. and its Affiliates 63/10/2008 []IND 1,000.00 3,000.00 1,000.00 COM 528 Market Street, Room 1908 G 08 2,000.00 XIOTH San Francisco, CA 94105 PTY □ SCC Fersonal Insurance Federation Of CA PAC (#910256) 07/10/2008 □IND 1,000.00 2.000.00 P 08 1,000.00 X COM 1215 K Street, Suite 970 1,000.00 ПОТН PTY Sacramento, CA 95814 SCC A Defense Commsel PAC (#850665) 07/16/2008 1,000.00 1,000.00 P 08 2,000.00 **X** COM 1127 11th St., #300 1,000.00 OTH Sacramento, CA 95814 □ PTY SCC ⊃omma J. MoGahey 97/16/2008 XIND Teacher 50.00 100.00 120.00 ПСОМ 14300 W. Bell Rd., #237 OTH Dysart Unified School Surprise, AZ 85374 PTY District SCC CA Mortgage Assu. PAC (#990462) 07/17/2008 3,000.00 3,000.00 P 08 1,000.00 X COM G 08 3,000.00 1127 11th St., #820 OTH PTY Sacramento, CA 95814 TISCC SUBTOTAL \$ 6,050.00

\*Contributor Codes

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

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

SCHEDULE A	(CONT.
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to whole dollars.	Statement covers period  from07/01/2008	california 460
m	through <u>09/30/2008</u>	Page6 of37
		I.D. NUMBER
		1294092

	CHILL HAME OTREET ARREST					74082	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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)		R ELECTION TO DATE REQUIRED)
07/21/2008	FG&E Corporation	□IND				<del> </del>	
	77 Beale Street, 52nd Floor	□COM ☑OTH		1,000.00	4,000.00	P 08 G 08	1,000.00 3,000.00
	San Francisco, CA 94105	□PTY □SCC					
07/25/2008	Uational Assn of Insurance & Financial Advisors/CA PAC		AUL - AU				
	(#743365) 1127 11th St., #300	⊠сом Потн		1,000.00	1,000.00	P 08 G 08	1,500.00 1,000.00
	Sacramento, CA 95814	□PTY □SCC					
07/28/2008	Ulsney Worldwide Services, Inc.						
		☐IND ☐COM		1,000.00	1,000.00	G 08	1,000.00
	Lake Buena Vista, FL 32830	☑OTH □PTY □SCC					
07/30/2008	CA Speech-Language-Hearing Assn PAC (#851683)						
,,	1127 11th St., #300	☐IND ※COM ☐OTH		500.00	500.00	G 08	500.00
	Sacramento, CA 95814	□PTY □SCC					
G8/01/2008	TA Cable & Telecommunications Assn. PAC (#745932)						
	360 22nd St., #750	☐IND ☑COM ☐OTH		500.00	1,000.00	P 08 G 08	1,900.00 500.00
	Oakland, CA 94612	□ PTY □ SCC					
			SUBTOTAL\$	4,000.00			

\*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 400
from <u>07/01/2008</u>	FORM 40U
through <u>09/30/2009</u>	Page 7 of 37
	I.D. NUMBER
	1294092

Diane Harkey for Assembly FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE IF AN INDIVIDUAL, ENTER AMOUNT CONTRIBUTOR CUMULATIVE TO DATE PER ELECTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR CODE \* TO DATE (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 ~ DEC, 31) (IF REQUIRED) OF BUSINESS) United Health Care Services, Inc. 00/01/2008 IND 1,000.00 1,000.00 0.08 2,500.00 □ COM 1201 K St., #1020 1,000.00 図 OTH ☐ PTY Sagramento, CA 95814 □scc Anthem Blue Cross 08/05/2008 IND 1,000.00 1,000.00 G 08 1,000.00 □ COM 2000 Corporate Center Dr. X OTH PTY Hewber: y Park, CA 91320 SCC 810com PAC (#963088) 08/05/2008 1,000.00 1,000.00 1,000,00 X COM 7185 Navajo Rd., Ste. L OTH San Diego, CA 92119 PTY □scc PG&E Corporation 68/06/2008 ☐ IND 1,000.00 4,000.00 1,000.00 COM 77 Beale Street, 32nd Floor **XOTH** San Francisco, CA 94105 PTY SCC Atheuser-Busch Cos., Inc. 08/07/2008 1,000.00 1,000.00 P 08 1,000.00 COM 1,000.00 1201 K St., #730 **∑**OTH □ PTY Sacramento, CA 95814 SCC SUBTOTAL \$ 5,000.00

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

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE A (CONT.	SCH	EDUL	EA (	CONT.
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	to whole dollars.	Statement covers period  from07/01/2008	california 460
NAME OF FILER		through <u>09/30/2008</u>	Page8 of37
Diane Harkey for Assembly	,		I.D. NUMBER
			1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)  THE Service Corporation	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
08/11/2008	7485 Rush River Drive, #710 Sacramento, CA 95831	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.00	G 08	1,000.00
08/13/2008	CA Credit Union League PAC (#760225)  9500 Cleveland Ave., #200  Rancho Cucamonga, CA 91730  Chevron Corporation	□IND ☑COM □OTH □PTY □SCC		1,000.00	2,000.00	G 08	2,000.00
GB/13/2008	1201 K St., #1910 Sagramento, CA 95814	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	2,000.00	G 08	2,000.00
087 (47.2008	Allergan  2525 Dupont Drive  [rvine, CA 92612  Alicen Ann Brazeau	□IND □COM ☑OTH □PTY □SCC		1,500.00	1,500.00	G 08	1,500.00
	9 Breakers Isle Monarch Beach, Ca 92629	□COM □OTH	Senior Care Aileen Ann Brazeau	1,000.00	1,000.00	P 08 G 08	250.00 1,000.00
			SUBTOTAL \$	5,500.00			- AMANAGA - TIMANAGA -

\*Contributor Codes

IND – Individual COM – Recipient Committee

(other than PTY or SCC)
OTH - Other (e.g., business entity)

PTY - Political Party

Type or print in ink.

to whole dollars.	Statement covers period  from07/01/2008	CALIFORNIA 460
	through <u>09/30/2008</u>	Page 9 of 37
		I.D. NUMBER
		1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
08/14/2008	Chevren Corporation  1201 K St., #1910  Sacramento, CA 95814	☐IND ☐COM 図OTH ☐PTY		1,000.00	2,000.00	G 08	2,000.00
Gä/11/2008	UR & R Incorporated	SCC IND COM		3,600.00	3,600.00	P 08 G 08	3,600.00 3,600.00
08/14/2008	P.O. Box 125 Stanton, CA 90680 Doctor's Ambulance Service	⊠OTH □PTY □SCC				3 00	3,600.00
	23091 Terra Dr. Laguna Hills, CA 92653	☐IND ☐COM ☑OTH ☐PTY		250.00	500.00	P 08 G 08	250.00 250.00
08/14/2008	Vargaret F. Harrison 34781 Doheny Place	COM	Homemaker	200.00	200.00	P 08 G 08	300.00 200.00
C8/14/2008	Capistiano Beach, CA 92624 The Irvine Company	SCC	None				
	550 Newport Genter Dr.	☐IND ☐COM ☑OTH ☐PTY		3,600.00	7,200.00	P 08 G 08	3,600.00 3,600.00
	Newport Heach, CA 92660	scc	SUBTOTAL\$	8,650.00		***************************************	

\*Contributor Codes

IND - Individual

NAME OF FILER

Diane Harkey for Assembly

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PTY - Political Party

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

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Statement covers period	CALIFORNIA ACC
from <u>07/01/2008</u>	FORM 460
through <u>09/30/2008</u>	Page 10 of 37
	I.D. NUMBER
	1004000

NAME OF FILER

Diane Harkey for Assembly

				1	1294082		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
00/15/2008	Solid Weste Assn of OC PAC (#1255640)	TIND	J. Joseph Co., T. Co.,				
	33% City Aivd. W., #705	⊠COM □OTH		500.00	500.00	G 08	500.00
***************************************	Otange, CA 92868	□ PTY □ SCC	į				
08/19/2008	CA Independent Oil Marketers PAC (#760982)	TIND					
	3831 N Freeway Blvd, #130	⊠COM □OTH		500.00	500.00	G 08	500.00
	Sacrattento, CA 95834	□ PTY □ SCC					
08/19/2008	A Metals Coalition PAC (#1264568)	□IND					
	2971 Warren Lane	☑COM □OTH		1,000.00	1,000.00	G 08	1,000.00
	El Dorado Hills, CA 95762	□PTY □SCC					
56/25/200a	AT&T Inc. and its Affiliates						
	525 Market Street, Room 1908	□IND □COM ⊠OTH		1,000.00	3,000.00	P 08 G 08	1,000.00 2,000.00
Au.	San Francisco, CA 94105	□ PTY □ SCC					
Md/25/2008	TA Assoc of Health Facilities PAC (#741816)	IND	mout manual manu				
	2201 K Street	⊠COM □OTH		1,000.00	1,000.00	G 08	1,000.00
Vacanta A.	Sacramento, CA 95816	□ PTY □ SCC					
WWW.A.A.			SUBTOTAL\$	4,000.00			4

\*Contributor Codes

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

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 4 CO
from <u>07/01/2008</u>	FORM 45U
through 09/30/2008	Page11_ of37
	I.D. NUMBER
	1294082

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR DATE IF AN INDIVIDUAL, ENTER AMOUNT CONTRIBUTOR CUMULATIVE TO DATE PER ELECTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED OCCUPATION AND EMPLOYER RECEIVED THIS CODE \* CALENDAR YEAR TO DATE (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) Associated General Contractors PAC (#890194) 08/26/2008 DIND 1,000.00 1,000.00 G08 1,000.00 X COM 3095 Beacon Blvd ПОТН West Sacramento, CA 95814 PTY SCC Bank of America PAC (#990697) 08/27/2008 MIND 1,000.00 1,000.00 P 08 X COM 1,000.00 600 Peachtree St., NE, 3rd Fl. G 08 1.000.00 OTH Atlanta, GA 30308 PTY □ SCC Farmers Employees & Agents PAC (#901422) 08/27/200B 2,500.00 2,500.00 G 08 2,500.00 X COM 591 Redwood Hwy #4000 ПОТН Mill Valley, CA 94941 **□PTY** SCC SMV Community Development 08/27/2008 1,500.00 2,250.00 COM 750.00 P.O. Box 9 X OTH San Juan Capistrano, CA 92693 PTY □ SCC Diane M. Birtcher 09/03/2008 XIND Homemaker 250.00 250.00 G 08 250.00 COM 32192 Cook Lane OTH None ☐ PTY San Juan Capsitrano, CA 92675 □ SCC SUBTOTAL \$ 6,250.00

\*Contributor Codes

IND - Individual

NAME OF FILER

Diane Harkey for Assembly

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

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	to whole dollars.	Statement covers period  from07/01/2008	california 460
AME OF FILER		through <u>09/30/2008</u>	Page of
iane Harkey for Assembly			I.D. NUMBER
, washing y			1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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 FO DATE REQUIRED)
09/03/2008	22201 Seal Brach Blvd. Seal Beach, CA 90740	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,000.00	1,000.00	P 08	1,000.00 1,000.00
0.970.37.2008	Richard Kruse 34392 Starboard Lantern Dana Poins, CA 92629	☑IND □COM □OTH □PTY □SCC	President Kruse Feed & Supply	2,500.00	2,500.00	G 08	2,500.00
U-17 U37 ZUUB	Ivan M. Marks 21161 Foston Ln. Buntington Beach, CA 92646	□COM □OTH	Retired	200.00	600.00	P 08 G 08	1,000.00
	Namesy J. Baumann/dLa Mancy J. Baumann, CPA 24681 La Plaza, #350 Dana Point, CA 92629	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1,500.00	1,500.00	P 08 G 08	1,000.00
	Scripta Energy 101 Ash St. San Diego, CA 92101	□IND □COM ဩOTH □PTY □SCC		1,000.00	1,000.00	G 08	1,000.00
			SUBTOTAL\$	6,200.00			

\*Contributor Codes

IND-Individual

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(other than PTY or SCC)

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

PTY - Political Party

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

SCHEDULE A	CONT.)
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		from07/01/2008	FORM 460	
NAME OF FILER		through <u>09/30/2008</u>	Page 13 of 37	
Diane Harkey for Assembly			I.D. NUMBER	
			1294082	

185 Greenwood Rd. Napa, CA 9458  G0/16/2308  Exxor Mebli Corp.  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  1,000.00  SUBTOTAL \$						12.7	4002	
17117 S. Broarbay   Cardena, CA 90748   Cardena, Ca	RECEIVED	(IF COMMITTEE, ALSO ENTER I D. NUMBER)	COMPRESION	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR		TO DATE
17117 S. Broarbay   Cardena, CA 90248   Cardena, CA 90249   Card	09/04/2008	PRINTER A. Moore Living Trust.	. –		3,600.00	3 600 00	6.08	3 600 00
SSCC		17117 S. Broadway		_	,	3, 333.00	0 00	3,600.00
The Catol Audrey Durst Trust		Gardena, CA 90248	<u> </u>	Owner/Mutual Propane Co				
12 Tirremta Dr.	09/04/2008	The Carol Audrey Durst Trust		Carol Audrey/Truston	100000			
Dana Point, CA 92629		12 Tirremia Dr.	∐ COM	outor Madrey/frasces	125.00	250.00		
N789 Aubrun Folsom Road, Suite C-318	WA. AMILIANA MANAGAMA		□ PTY	Executive/Mechanical Beltings & Drives				
## 1789 Aubrun Folsom Road, Suite C-318	09/08/2008	Insurance Brokers & Agents Candidate PAC (#743103)			1 000 00	1.000.01		
Op/11/2008   The Destars Company PAC/DOC PAC (#923140)   IND   I		8789 Asbrun Folsom Road, Suite C-318			1,000.00	1,000.00	G 08	1,000.00
09/11/2008 The Doctor's Company PAC/DOC PAC (#923140)		Granite Bay, CA 95746	☐ PTY					
185 Greenwood Rd. Najia, CA 94858  09/16/2308	09/11/2008	The Doctors Company PAC/DOC PAC (#923140)		, man 1	+ 000 00			
Napa, CA 94558		185 Greenwood Rd.			1,000.00	1,000.00	G 08	1,000.00
09/16/2308		Napa, CA 94558	☐ PTY					
1201 K St., #1920 Sactamento, CA 95814 SUBTOTAL S	09/16/2008	Ewxon Mobil Corp.			3 000 00		****	
SUBTOTAL \$		1201 K St., #1920	⊠oth		1,000.00	1,000.00	G 08	1,000.00
SUBTOTAL\$ 6.725.00		Sacramento, CA 95814						
	Advances in the control of the contr			SUBTOTAL\$	6,725.00		170,000	

\*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 to whole dollars.

SCHEDULE A (CONT.)
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Statement covers period	CALIFORNIA 400
from07/01/2008	FORM 45U
through _09/30/2008	Page 14 of 37
	I.D. NUMBER

						1294082		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. 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)		R ELECTION TO DATE REQUIRED)	
09/23/2008	Robert A. Alter	∑IND	Executive Chairman	050.00				
	903 Calle Amanece:	□сом		250.00	1,750.00	P 08 G 08	1,750.00 250.00	
	San Clemente, CA 92673	□OTH □PTY □SCC	Sunstone Hotels					
09/23/2008	Associated Builders & Contractors of CA PAC (#780059)							
	1127 11th St., #390	⊠COM □OTH		1,000.00	1,000.00	G 08	1,000.60	
Name of the second seco	Saciamento, CA 95814	□PTY □SCC						
6972372008	Gary G. Capata	∏IND	Owner					
	28232 Cabot Rd., #305	СОМ	Owilet	100.00	100.00	G 08	100.00	
	Laguna Niguel, CA 92677	□OTH □PTY □SCC	Capata & Co.					
09/23/2008	Feter T. Crowhurst							
	39 St. Michael	СОМ	Retired	200.00	200.00	G 08	200.00	
	Laua Point, CA 92629	□PIY	None					
04/23/2008	SVR, Inc.	SCC						
	32172 Camino Capiatrano, Ste. C	☐IND ☐COM □XIOTH		100.00	100.00	G 08	100.00	
	San Guan Capistrano, CA 92675	□PTY □SCC						
			SUBTOTAL \$	1,650.00				

\*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period	CALIFORNIA 400
from <u>07/01/2008</u>	FORM 45U
through _09/30/2008	Page 15 of 37
	I.D. NUMBER

NAME OF FILER

Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)  Strian, Dunn	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)		R ELECTION TO DATE REQUIRED)
09/23/2008	26973 Del Condo Rd. Capistrano Beach, CA 92624	⊠IND □COM □OTH □PTY	Executive Vintage Marina Partners	3,600.00	3,600.00	P 08 G 08	1,500.00 3,600.00
09/23/2008	Elizabeth Anderson Fitzgerald	SCC	LP Realtor				
	24341 Cortes Dr. Dana Point, CA 92629	□COM □OTH □PTY	Elizabeth Anderson Fitzgerald	100.00	199.00	P 08 G 08	199.00 100.00
09/23/2008	Patricia A. Harris 21892 Montbury Dr.	⊠IND □COM	Manager	125.00	125.00	G 08	125.00
<sup>34</sup> /23/2008	Lake Forest, CA 92630 Redney J. Howorth	OTH PTY SCC	Rancho Sierra Vista Equestrian Center				
≥	34041 Silver Lantern-A Dana Point, CA 92629	□COM □OTH	Consultant Rodney J. Howorth	75.00	199.00	80 g 80 g	374.00 75.00
3/23/2008	Estricia B. MacDonald	SCC	Retired	125.00			-
	32687 Caspian Sea Dr. Monarch Beach, CA 92629	□COM □OTH □PTY □SCC	None	123.00	225.00	P 08 G 08	200.00 125.00
**************************************			SUBTOTAL \$	4,025.00			

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

Type or print in ink.

SCHEDULE A (CONT.)

wonetary Contributions Received	Amounts may be rounded to whole dollars.	Statement covers period  from07/01/2008	CALIFORNIA 460
AME OF FILER		through <u>09/30/2008</u>	Page16 of37
lane Harkey for Assembly		4	I.D. NUMBER
			1294082

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)  Seorgetina Olivera	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)	T-	ELECTION O DATE EQUIRED)
09/23/2008	24901 Danafi: Dana Point, CA 92629	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	125.00	150.00	P 08 G 08	25.00 125.00
	John R. Saunders  4046 MacArthur Blvd., #300  Newport Beach, CA 92660	⊠IND □COM □OTH □PTY □SCC	Property Investment Saunders Property	125.00	125.00	P 08 G 08	900.00 125.00
2.77.372108	James B. Weling 687 C. Mountain St. Glendale, CA 91207	□COM □OTH	Traffic Commissioner City of Glendale	125.00	125.00	G 08	125.00
D3/73/2004	Wild Horse Group 32021 Paseo Amante San Juan Capistrano, CA 92675	□IND □COM ☑OTH □PTY □SCC		100.00	100.00	G 08	100.00
	Rohald Young 44 Tortuga Cay Aliso Viejo, CA 92656	□COM □OTH	Retired	125.00	125.00	P 08 G 08	150.00 125.00
Water State of State			SUBTOTAL\$	600.00	100000000000000000000000000000000000000		

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

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

SCHEDULE A (CONT.)
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Statement covers period	CALIFORNIA 400
from07/01/2008	FORM 450
through <u>09/30/2008</u>	Page <u>17</u> of <u>37</u>
	I.D. NUMBER

Diane Harkey for Assembly

NAME OF FILER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)		R ELECTION TO DATE REQUIRED)
09/29/2008	31441 Peseo Caliz	⊠IND □COM	Council Member	250.00	250.00	G 08	250.00
The Control of the Co	San Guan Capistrano, CA 92675	□OTH □PTY □SCC	City of San Juan Capistrano				
09/29/2008	A Retailers Assn Good Govt Council (#890593)			1,000.00	3,000,00		
	980 9th 55., #2100	⊠COM □OTH		.,000.00	1,000.00	G 08	1,000.00
A	Sacramento, CA 95814	☐ PTY ☐ SCC					
64/29/2008	'A Veterinary Medical Assn FAC (#771044)	□IND		500.00			
	1400 River Park Dr., #100	⊠COM □OTH		300.00	1,500.00	P 08 G 08	1,000.00 500.00
	Sacramento, CA 95915	□ PTY □ SCC					
09/29/2008	Kevin Stalmeister	p	Executive				
	225 Borrego Ct.	□ COM		500.00	500.00	G 08	500.00
	Oceanside, CA 92057	□ PTY □ SCC	Federal Health Sign Co				
09/29/2008	The Carol Audrey Durst Trust		Carol Audrey/Trustee				
	12 Tirremia Dr.	COM		125.00	250.00	P 08 G 08	275.00 250.00
	icana Point, CA 92629		Executive/Mechanical Beltings & Drives				
			SUBTOTAL\$	2,375.00			

\*Contributor Codes

IND-Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

#### Schedule C Nonmonetary Contributions Received

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

SCHEDULE C Statement covers period **CALIFORNIA FORM** 07/01/2008 from \_\_\_ through 09/30/2008 I.D. NUMBER 1294082

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)  Faintcenter Financial, Inc.	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)
	7 Argonaut Aliso Viejo, CA 92656 Fointcenter Financial, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Printing Costs	72.50	997.71	G 08 997.7
	7 Atgenaut Aliso Viejo, CA 92656 Faintcenter Financial, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Printing Costs	72.50	997.71	G 08 997.7
	7 Argenaut Nliso Viejo, CA 92656 Pointeenter Financial, inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Printing Costs	72.50	997.71	G 08 997.7
	/ Argonaut Aliso Viejo, CA 92656	□IND □COM ⊠OTH □PTY □SCC		Printing Costs	124.74	997.71	G 08 997.71

#### Schedule C Summary

1.	Amount received this period – itemized nonmonetary contributions.  (Include all Schedule C subtotals.)	
	S	1,442.72
2.	Amount received this period – unitemized nonmonetary contributions of less than \$100\$	0.00
J,	Total normonetary contributions received this period	
	(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	1,442.72

\*Contributor Codes

IND-Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

#### Schedule C Nonmonetary Contributions Received Continuation Sheet

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

| SCHEDULE C | Statement covers period | FORM | 460 | | SCHEDULE C | SCHEDULE C | SCHEDULE C | | SCHEDULE C | SCHEDULE C

SEE INSTRUCTIONS ON REVERSE 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)  Ledintcenter Financial, Inc.	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 ELE TO D. (IF REQI	ATE
	7 Argonaut Alise Viejo, CA 92656	☐IND ☐COM ⑤OTH ☐PTY		Printing Costs	217.50	997.71	G 08	997.7
-	Pointcenter Financial, Inc.	□SCC □IND □COM		Printing Costs	83.16	997.71	G 08	997.7
	7 Atgonaut Aliso Viejo, CA 92656	☑OTH □PTY □SCC						
	ointeenter Financial, Inc. 7 Argonaut Aliso Viejo, CA 92656	☐IND ☐COM ☑OTH ☐PTY		Printing Costs	50.61	997.71	G 08	997.7
	Parducci's Capistrano Depot	☐SCC ☐IND ☐COM		Catering Costs	445.01	445.01	G 08	445.0
5	San Juan Capistrano, CA 92675	⊠OTH □PTY □SCC						
Attach add	itional information on appropriately lab	eled continuatio	on sheets.	SUBTOTAL \$	796.28	The state of the s		

#### Schedule C Nonmonetary Contributions Received **Continuation Sheet**

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

SCHEDULE C Statement covers period **CALIFORNIA** FORM \_07/01/2008 through 09/30/2008 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly 1294082

							129408	2.2
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	CUMULATI DATE CALENDAR (JAN 1 - DI	E ! YEAR	PER ELECTION TO DATE (IF REQUIRED)
	Fointcenter Financial, Inc. 7 Argonauc Aliso Viejo, CA 92656	□IND □COM ⊠OTH □PTY □SCC		Printing & Envelope Costs	304.20		997.71	G 08 99
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						The control of the co
		□IND □COM □OTH □PTY □SCC				.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Attach addi	tional information on appropriately labe	led continuatio	on sheets.	SUBTOTAL \$	304.20			

Schedule E
Payments Made

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

Statement covers period	SCHEDULE E
from07/01/2008	FORM 45U

Page \_\_\_\_21 of \_\_\_37

SEE	INSTR	UCTIONS	ON	REV	ERS
	7.1				

NAME OF FILER

Diane Harkey for Assembly

I.D. NUMBER
1294082

through <u>09/30/</u>2008

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.  CMP campaign paraphernalia/misc.  campaign consultants  contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FIND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  LEG legal defense  LT campaign paraphernalia/misc.  MBR member communications meetings and appearances office expenses  MBR member communications meetings and appearances office expenses  SAL campaign workers' salaries campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor print ads  NEB  TRS  TRS  TRS  TRS  TRS  TRS  TRS  TR	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 LTC campaign literature and mailings  MTG meeting of file of policy of the policy of policy of policy of policy of policy of policy of postage profession print ad	radio airtime and production costs and appearances spenses reculating radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs campaign workers' salaries t.v. or cable airtime and production costs tandidate travel, lodging, and meals transfer between committees of the same candidate/sponsive voter registration
--	---	---

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PARTY.	
Mitchell Land improvement Co, Inc.		DESCRIPTION OF PAYMENT	AMOUNT PAID
24901 Dana Point Harbor Drive #200	OFC		4,000.00
Dana Point, CA 92629			
betty Presley & Associates, Inc.			
30151 Yemas	PRO		900.00
Rancho Sta Margarita, CA 92688			
Sank of Americand			
ayment Center/PO Box 15715	OFC		313.00
Wilmington, DE 19886			
Payments that are contributions or independent expenditures must be			

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

SUBTOTAL\$ 5,213.80

### Schedule E Summary

Itemized payments made this period. (Include all Schedule E subtotals.)  Unitemized payments made this period of under \$100.  \$\$	
2. Unitemized payments made this period of under \$100  3. Total interest paid this period on loans. (Enter amount from Schodulo B. Banda G. I	43,180.21
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)  4. Total payments made this period. (Add Lines 1, 2, and 3, Enter have 1, 2, 3, 5, 5, 7).	110.64
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	0.60
TOTAL \$	43,290.85

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (C	ONT.)
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Statem	ent covers period	CALIFORNIA 1 CO
from	07/01/2008	FORM 40U
through _	09/30/2008	Page 22 of 37
		I.D. NUMBER
		1294082

Diana 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 meetings and appearances returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses CVC civic donations SAL campaign workers' salaries PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees РНО phone banks TRC 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)\* TRS IND postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) VOT voter registration 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
Sex Communications			AWOUNT PAID
Fayment Center/PO Box 53280			
Thoenix, AZ 85072	orc		167.04
Lauryn Picciano			
33/91 Violet Lantern Street, #B	0.00		
Para Point, CA 92629	OFC		195.34
Planinum Advisors LLC			
1215 K St., #1159	0.774	Refund of Erroneous Deposit	
Sacramento, CA 95814	OFC		€00.00
Orange County Registrar of Voters			
1300 S Grand Avenue			
Santa Ana, CA 92705	FIL		3,127.00
Sanrym Picciano			
33791 Violet Lantern Street, #B	CNS		3 500 00
Pans Point, CA 92629			2,500.00

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

SUBTOTAL \$

6,589.38

SEE INSTRUCTIONS ON REVERSE

Diane Harkey for Assembly

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 4 CO
from	07/01/2008	FORM 46U
through	09/30/2008	Page23 of37
		I.D. NUMBER
		1294082

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications CNS campaign consultants RAD radio airtime and production costs MTG meetings and appearances CTB contribution (explain nonmonetary)\* RFD returned contributions OFC office expenses CVC civic donations SAL campaign workers' salaries PET petition circulating FIL candidate filing/ballot fees t.v. or cable airtime and production costs РНО phone banks fundraising events TRC candidate travel, lodging, and meals POL. polling and survey research independent expenditure supporting/opposing others (explain)\* IND staff/spouse travel, lodging, and meals TRS postage, delivery and messenger services POS LEG transfer between committees of the same candidate/sponsor legal defense TSF professional services (legal, accounting) LIT campaign literature and mailings VOT voter registration 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	y costs (internet, e-mail)
Bolty Presley & Associates, Inc.		DESCRIPTION OF PAYMENT	AMOUNT PAID
30151 Temas			
kancho Sta Margarita, CA 92688	PRO		900.00
Mitchwil Land Improvement Co, Inc.			
24901 Data Point Harbor Drive #200			
land foirt, CA 92629	OFC		2,000.00
Bank of Americard			
Fayment Center/FO Box 15715	077		
Wilmington, DE 19896	OFC		630.61
Betty Presley & Associates, Inc.			
00151 Tomas			
Rancho Sta Margarita, CA 92688	PRO		356.00
Silliard Blanning Associates Inc.			
921 11th Street, Suite 400	CMP	Outdoor Signs	
Sacramento, CA 35814			4,346.60
Payments that are contributions or independent expenditures must also be su			

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

SUBTOTAL \$ 8,233.21

SEE INSTRUCTIONS ON REVERSE

Diane Harkey for Assembly

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA ACO
from 07/01/2008	FORM 400
through 09/30/2008	Page 24 of 37
	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 CTB contribution (explain nonmonetary)\* returned contributions office expenses OFC CVC civic donations SAL campaign workers' salaries PET petition circulating candidate filing/ballot fees TEL. t.v. or cable airtime and production costs FIL PHO phone banks candidate travel, lodging, and meals FND TRC fundraising events POL polling and survey research independent expenditure supporting/opposing others (explain)\* TRS IND staff/spouse travel, lodging, and meals postage, delivery and messenger services POS TSF transfer between committees of the same candidate/sponsor LEG legal detense professional services (legal, accounting) VOT campaign literature and mailings voter registration PRT print ads 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.			AIMOUNT PAID
921 11th Street, Suite 400			
Satramento, CA 95814	CNS		1,500.00
Continuing the Republican Revolution (#590041)			
1300 Biratol Street North #100		Slate Card	
Newpoint Beach, CA 92660	LIT		800.00
CC-Evans Inc.			
11330 Gold Express Drive, #310-325	LIT		
Gold River, CA 956/0	1111		840.34
Official Non-Partisan Voter Guide (#1277947)			
921 11th Street, Suite 400		Slate Card	
Servemento, CA 95814	LIT		1,150.00
Fuller Communications Inc.			
410 Jericho Turmpike, Suire 300	FND		
Toricho, NY 11753			121.88

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

SUBTOTAL \$

4,412.22

### Schedule E (Continuation Shoot)

Type or print in ink.

SCHEDULE	E (CONT.)
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Payments Made	Amounts may be rounded to whole dollars.	Sta	tement covers period	CALIFORNIA 460	
The made		from_	07/01/2008	FORM TOU	
EE INSTRUCTIONS ON REVERSE AME OF FILER		throug	h 09/30/2008	Page25 of37	
Diane Harkey for Assembly				I.D. NUMBER	
ODES: If any of the following to				1294082	
MP campaign paraphemalia/misc.	ately describes the payment, you may enter the code. O	Otherwise, c	lescribe the payment		
NS campaign consultants TB contribution (explain nonmonetary)*	MBR member communications MTG meetings and appearances	RAD r	adio airtime and production eturned contributions		

C C OFC office expenses CVC civic donations SAL campaign workers' salaries petition circulating PET FIL candidate filing/ballot fees TEL t.v. or cable airtime and production costs PHO phone banks FND fundraising events candidate travel, lodging, and meals TRC POL polling and survey research independent expenditure supporting/opposing others (explain)\* IND staff/spouse travel, lodging, and meals TRS POS postage, delivery and messenger services LEG legal defense TSF transfer between committees of the same candidate/sponsor PRO professional services (legal, accounting) campaign literature and mailings LIT VOT voter registration 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 Wartield & Associates 921 11th St., #701 FND Satiamento, CA 95814 1,279.66

Wendy Warfield & Associates 921 lith St., #701 CNS 1,025.68 Sacramento, CA 95014 Merdy Warfield & Associates 901 11th St., #701 CNS 1,096.69 Satramento, CA 95814 bamily Research Council 11311 James Street 950.00 CVC Holland, MI 49424 Sauryn Picciano OFC 33791 Violet Lantern Street, #B 704.10 Daha Point, CA 92629

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 5,056.13

campaign literature and mailings

independent expenditure supporting/opposing others (explain)\*

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

candidate filing/ballot fees

LEG legal defense

FND fundraising events

FIL

IND

Type or print in ink.

PHO

POL

POS

PRT

phone banks

print ads

polling and survey research

postage, delivery and messenger services

professional services (legal, accounting)

		(CONT.)
31.4	ロートルル	 

Payments Made	Amounts may be rounded to whole dollars.	from 07/01/2008	FORM 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 09/30/2008	- Page <u>26</u> of <u>37</u>	
Diane Harkey for Assembly			1294082	
CODES: If one of the following codes accura CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations	ately describes the payment, you may enter the code.  MBR member communications  MTG meetings and appearances  OFC office expenses  PET petition circulating	Otherwise, describe the paymer  RAD radio airtime and product  RFD returned contributions  SAL campaign workers' salari	nt. ion costs	

TRC

TRS

TSF

VOT

TEL t.v. or cable airtime and production costs

candidate travel, lodging, and meals

voter registration

staff/spouse travel, lodging, and meals

transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OR DESCRIPTION OF PAYMENT AMOUNT PAID Lauryn Ficciano 33791 Violet Lantern Street, #B CNS 2,500.00 Pana Point, CA 92629 Lauryn Ficciano 33791 Violet Lantern Street, #B POS 252.00 fasa Koist, CA 92629 Sex Cerstanications Paymont Center/PO Bax 53280 OFC 710.10 Phechix, AZ 85072 CompleteCampaigns.com 3625 Ruffin Rd., 3rd Fl. 187.50 OFC San Diego, CA 92123 Deluxe Business Systems Printing OFC 3680 Victoria St N 100.30 Shoreview, MN 55126

3,749.90

SUBTOTAL \$

SEE INSTRUCTIONS ON REVERSE

Diame Harkey for Assembly

NAME OF FILER

SCHEDULE E (CONT.)

Amounts may be rounded	Statement covers period	CALIFORNIA A CO
to whole dollars.	from 07/01/2008	FORM 46U
	through 09/30/2008	Page 27 of 37
	A STATE OF THE STA	I.D. NUMBER
		1294082

CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events	MTG meetings and appearances RFD OFC office expenses SAL PET petition circulating TEL PHO phone banks	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs
CVC civic donations FIL candidate filing/ballot fees	OFC office expenses SAL PET petition circulating TEL PHO phone banks TRC POL polling and survey research TRS POS postage, delivery and messenger services TSF PRO professional services (legal, accounting) VOT	campaign workers' salaries t.v. or cable airtime and production costs

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	
Bank of Americand		DESCRIPTION OF PATMENT	AMOUNT PAID
Payment Genter/FO Box 15715 Wilmington, DE 19886	TRC	8/5 Travel SNA-SMF B/6 SMF-SNA for Fundraiser	903.43
Betty Presley & Associates, Inc.			
30151 Tomas	DDs		
Perchu Sta Masgaifta, CA 92688	PRO		900.00
Tilliard Blasning Associates Inc.			
921 11th Street, Suite 400			
Sacramento, CA 95814	CNS		1,500.00
Pacific Sign Center			
24422 Uel Frado, Suite 2			
Dena Point, CA 92629	СМР		463.35
Werdy Warfield & Associates			
921 11th St., #201	CNS		1.053.53
Sacramento, CA 95814			1,053.31
Payments that are contribution			

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 4,820.09

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE (	E (CONT.)
------------	-----------

Statement covers period		CALIFORNIA ACO
from	07/01/2008	FORM 40U
through	09/30/2008	Page28 of37
		I.D. NUMBER
		1.294082

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

PRT print ads		WEB information technology cos	ts (internet, e-mail)
CODE	OR		
			AMOUNT PAID
CMP			975.00
Appendix App			
			***************************************
POS			168.00
204			
100			491.40
OFC			309.38
CNS			3 000 00
			3,000.00
	CODE  CMP  POS  POS  OFC	CODE OR  CMP  POS  POS  OFC	CODE OR DESCRIPTION OF PAYMENT  CMP  POS  POS  OFC

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

SUBTOTAL \$

4,943.78

# Schedule E

campaign literature and mailings

LIT

Type or print in ink.

SCHEDULE E (CONT.)

Payments Made	Amounts may be rounded to whole dollars.	Statement covers period  from 07/01/2008	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through09/30/2008	Page 29 of 37
Diane Harkey for Assembly			I.D. NUMBER
CODES: If one of the following godge account to the			1294082
CODES: If one of the following codes accurately describ  CMP campaign paraphernalia/misc.  CTB 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	es the payment, you may enter the code. Other MBR member communications meetings and appearances office expenses petition circulating phone banks POL polling and survey research postage, delivery and messenger services professional services (legal, accounting)	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, ar TRS staff/spouse travel, lodging.	n costs duction costs id meals

PRO professional services (legal, accounting)

PRT

print ads

VOT voter registration

compagnitional and mailings	PRT print ads	•	g-i, accounting)	WEB information technology costs (i	nternet e mail)	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTION OF PAYMENT		
Political Data Inc.				DESCRIPTION OF PAYMENT	AM	OUNT PAID
PO 85% 1706						
outang, CA 91507		LIT				125.0
CompleteCampaigns.com						
C25 Reffin Rd., 31d Fl.						
an Ulego, CA 92123		OFC				37.50
					:	
			1			
ayments that are contributions or independent expenditures must	also be summarized on S	chedule D	The same state of the same sta			
				SUBT	DTAL \$	162.50

162.50

SC	H	Fr	וור	11	=	ļ.

#### Schedule F Accrued Expenses (Unpaid Bills)

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

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

OFC

MBR member communications

office expenses

MTG meetings and appearances

Statement covers period 07/01/2008

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

CALIFORNIA **FORM** 

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)\*

CNS campaign consultants

CVC civic donations

through \_\_\_\_09/30/2008 Page \_\_\_\_30\_\_ of \_\_37\_\_

I.D. NUMBER

1294082

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	PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	messenger services	SAL campaign workers' salaries  TEL t.v. or cable airtime and producandidate travel, lodging, and staff/spouse travel, lodging, a transfer between committees voter registration  WEB information technology costs (		meals nd meals of the same candidate/sponsor	
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)  Filler Communications Inc.	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	
410 Jericho Turmpike, Swite 300	FND	121.88	0.00	121.88	0.00	
Jerlate, NY 11753						
Westig Warfield & Associates	FND	1,279.66				
921 (1ch St., #70)		1,2/9.00	0.00	1,279.66	0.00	
Shiramonto, CA 95814						
Bank of Americard	OFC	943.61	0.00			
Poyment Conter/PO Box 15715		545.61	0.00	943.61	0.00	
Wilmington, DE 19886						
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	2 345 18	0.70			
		2,345.15	0.00\$	2,345.15 <b>\$</b>	0.00	

#### Schedule F Summary

1	lotal 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.)	

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 \$ 5,640.67

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

NAME OF FILER

Diane Harkey for Assembly

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 460
from07/01/2008	FORM 400
through 09/30/2008	Page 31 of 37
	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.

CNS campaign consultants

MBR member communications

RAD radio airtime and production costs.

CNS campaign consultants
CTB contribution (explain nonmonetary)\*
CVC civic donations

RAD radio airtime and production costs

OFC office expenses

OFC office expenses

SAL campaign workers' salaries

FIL candidate filing/ballot fees
FND fundraising events

PET petition circulating
PHO phone banks
PHO phone banks
TRC candidate travel, lodging, and meals

FND fundraising events politing and survey research postage, delivery and messenger services legal defense professional continuous fundraising events

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

tegal delense

PRO professional services (legal, accounting)

PRT print ads

PRO professional services (legal, accounting)

VOT voter registration

WEB information technology costs (internet, e-mail)

<sup>\*</sup> 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)  E. eler Communications	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
3600 W MacAithur Blvd, Suite 812	LIT	0.00	181.63	0.00	181.63
Saura Ama CA 92704					
Wesdy Warfield & Associates					
921 lith St., #701	FND	0.00	1,304.19	0.00	1,304.19
Sacramento CA 95814					
Adam Probolsky					
2:076 South Pointe Drive, #206	POL	0.00	6,500.00	0.00	6,500.00
Laguna Hills CA 92653					
	SUBTOTALS \$	0.00 \$	7,985.82	0.00\$	7,985.82

# 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	. (
State	ment covers period	CALIFORNIA 1 CC	٦
from	07/01/2008	FORM 490	
through	09/30/2008	- Page32 of37	

I.D. NUMBER

1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Harkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Bank of Americand

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

Fill candidate filing/hallet foce.

MBR

MTG

OFC

PET

FIL candidate filing/ballot fees
FND fundraising events

IND independent expenditure supporting/opposing others (explain)\* LEG legal defense

LIT campaign literature and mailings

MBR member communications
MTG meetings and appearances

OFC office expenses
PET petition circulating

PHO phone banks
POL polling and survey research

POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals

F transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

<sup>\*</sup> 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
Sheraton Grand Sacramento	TRC		
1230 J Street		DHarkey: 8/5 Lodging after Fundraiser	277.43
Saltamento CA 95814			
Gurnwest Airlines	FI > 2		
PO BUX 36645	TRC	DHarkey: 8/5 Travel SNA-SMF 8/6 SMF-SNA for Fundraiser	313.00
Dallan CX 95235	!		
Sentawest Airlines	TRC	DI	
O Hox 36649	100	DHarkey: 8/20 Travel SNA-SMF-SNA for Fundraiser	313.00
willas TX 95235			
			A CONTRACTOR OF THE PROPERTY O
4			1

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

903.43

<sup>\*</sup> 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

SCHEDULE G Statement covers period CALIFORNIA

ontractor (on Benail of This Committee)	to whole dollars.	from07/01/2008	FORM 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 09/30/2008	Page33 of37
Dialo Harkny for Assembly			I.D. NUMBER
NAME OF AGENT OR INDEPENDENT CONTRACTOR			1294082
Alliard Blanning Associates inc.			
CODES: If one of the following codes accurately describes the			

CODES: If one of the following codes accurately describes the	
FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings  TEL petitor including FND phone banks FND polling and survey research FNO postage, delivery and messenger services FNO professional services (legal, accounting)	oradio 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

ependent 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 PANALES	
20058 85JUNE		DESCRIPTION OF PAYMENT	AMOUNT PAID
3209 S Main Street	СМР		4,346.60
alda Ana CA 92707			
opact Clascment			
2431 Astonio Pkwy	CMP		975.00
Rancho Sta Margarita CA 92686			
		**************************************	

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

5,321.60

<sup>\*</sup> 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

Type or print in ink. Amounts may be rounded

	SCHEDULE G
Statement covers period	CALIFORNIA ACO
from <u>07/01/2008</u>	FORM 40U
through 09/30/2008	Page 34 of 37

Contractor (on Behalf of This Committee)	to whole dollars.	from <u>07/01/2008</u>	FORM 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through 09/30/2008	Page34 of37
Diane Harkey for Assembly		, , , , , , , , , , , , , , , , , , ,	I.D. NUMBER
NAME OF AGENT OR INDEPENDENT CONTRACTOR		***************************************	1294082

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	AMOUNTS
Bairal Associates	LIT	TOTAL TAINEN	AMOUNT PAID
10419 Write Rock Road	147 7		500.0
Renono Cordova CA 95670			
			VALUE
			THE RELIEF CO. S. C.

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

500.00

<sup>\*</sup> 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.

Statement covers period 07/01/2008 from

**CALIFORNIA FORM** 

SCHEDULE G

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diare Raikey for Assembly

through \_\_\_\_ 09/30/2008

I.D. NUMBER 1294082

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Listyn Licciano

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc.

PET

PRO

PRT

office expenses

phone banks

print ads

petition circulating

polling and survey research

postage, delivery and messenger services

professional services (legal, accounting)

CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations candidate filing/ballot fees

fundraising events independent expenditure supporting/opposing others (explain)\* IND LEG legal defense

campaign literature and mailings

member communications RAD radio airtime and production costs meetings and appearances OFC

returned contributions SAL campaign workers' salaries

t.v. or cable airtime and production costs 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)

<sup>\*</sup> 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	DEGODISTION	
Starving Students Inc		DESCRIPTION OF PAYMENT	AMOUNT PAID
1850 Sawtello Blvd, #300	OFC		195.3
on Abgeles CA 90025			
S Postmaster			
air Starion	Pos		168.0
Hasion Viejo CA 92692			
ttach additional information on appropriately let all the second			

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

363.34

<sup>\*</sup> 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	CALIFORNIA ACO
from07/01/2008	FORM 40U
through 09/30/2008	Page36 of37
	I.D. NUMBER

1294082

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Warkey for Assembly

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Wendy Warfield & Associates

CODES If one of the	following and a market to the	-4 44			-
GODEO. II ONE OF DE	From the codes accurately descr	ibes the navmen	Wou may enter the sade	o Othonisia alimentina si	
		man min balling	d you may critici the coul	e. Otherwise, describe the paymen	ŧ.
<ul> <li>CMP campaign paraphernal</li> </ul>	ia/misc	\$400 manufacture		,	• •

CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations candidate filing/ballot fees

FND fundraising events

independent expenditure supporting/opposing others (explain)\* IND legal defense LEG

campaign literature and mailings

MBR member communications

MTG meetings and appearances OFC office expenses

petition circulating PET PHO phone banks

POL polling and survey research postage, delivery and messenger services PRO professional services (legal, accounting)

PRT print ads RAD radio airtime and production costs

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

transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

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

CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FND		
		1,304.19
	100000000000000000000000000000000000000	
		-
		17 17 17 17 17 17 17 17 17 17 17 17 17 1

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

1,304.19

<sup>\*</sup> 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.

		SCHEDULE
Sta	tement covers period	CALIFORNIA ACO
from	07/01/2008	FORM 40U
through 09/30/2008		Page37 of37
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Harkey for Assembly I.D. NUMBER 1294082 DATE FULL NAME AND ADDRESS OF SOURCE RECEIVED (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF RECEIPT AMOUNT OF Official Non-Partisan Voter Guide 1277947 INCREASE TO CASH 09/30/2008 Refund of Slate Deposit 1,150.00 921 11th Street, Suite 400 Sacramento, CA 95814 Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,150.00 Schedule I Summary 2. Unitemized increases to cash of under \$100 this period......\$ 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ......\$\_\_\_\_\_\_\$ 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the 

			*