

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

(ENDORSED) Date Stamp <b>FILED</b> JUL 30 2009 JULIEL RODEWALD COUNTY CLERK BY ABAUTISTA DEPUTY CLERK	<b>CALIFORNIA FORM 460</b> Page _____ of _____ For Official Use Only
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Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	Date of election if applicable: (Month, Day, Year) <u>JUNE 8, 2010</u>
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SEE INSTRUCTIONS ON REVERSE

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

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee  |
| <input type="checkbox"/> State Candidate Election Committee                      | <input type="checkbox"/> Controlled   |
| <input type="checkbox"/> Recall<br><small>(Also Complete Part 5)</small>         | <input type="checkbox"/> Sponsored<br><small>(Also Complete Part 6)</small>   |
| <input type="checkbox"/> General Purpose Committee                               | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><small>(Also Complete Part 7)</small> |
| <input type="checkbox"/> Sponsored   |   |
| <input type="checkbox"/> Small Contributor Committee                             |   |
| <input type="checkbox"/> Political Party/Central Committee                       |   |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><small>(Also file a Form 410 Termination)</small> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
26-4420366

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

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

STREET ADDRESS (NO P.O. BOX)

4618 POINSETTIA

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>SAN LUIS OBISPO</u>	<u>CA</u>	<u>93401</u>	<u>805-801-7328</u>

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

3940-7 BROAD STREET, P.O. BOX 165

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>SAN LUIS OBISPO</u>	<u>CA</u>	<u>93406</u>	<u>805-801-7328</u>

OPTIONAL: FAX / E-MAIL ADDRESS

IANPARKINSON@YMAIL.COM

**Treasurer(s)**

NAME OF TREASURER

RONALD A. MAININI

MAILING ADDRESS

615 CLARION COURT, SUITE 1

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>SAN LUIS OBISPO</u>	<u>CA</u>	<u>93401</u>	<u>805-544-7094</u>

NAME OF ASSISTANT TREASURER, IF ANY

N/A

MAILING ADDRESS

N/A

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>N/A</u>			

OPTIONAL: FAX / E-MAIL ADDRESS

RON@SLOTAX.COM

**4. Verification**

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

Executed on 7-30-09  
Date

By [Signature]  
Signature of Treasurer or Assistant Treasurer

Executed on 7-30-09  
Date

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

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

<b>CALIFORNIA FORM 460</b>
Page _____ of _____

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE				
IAN PARKINSON				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
SHERIFF - SAN LUIS OBISPO COUNTY				
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP	
4618 POINSETTIA	SAN LUIS OBISPO, CA		93401	

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

COMMITTEE NAME	I.D. NUMBER
N/A	
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
N/A	
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE		
N/A/N/A		
BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT	
OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

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

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
N/A		
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>MARCH 10, 2009</u>	<b>CALIFORNIA FORM 460</b>
through <u>JUNE 30, 2009</u>	
Page _____ of _____	
I.D. NUMBER 26-4420366	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ <u>43,356.66</u>	\$ <u>43,356.66</u>
2. Loans Received ..... <i>Schedule B, Line 3</i>	<u>9,000.00</u>	<u>9,000.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ <u>52,356.66</u>	\$ <u>52,356.66</u>
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	<u>2,707.61</u>	<u>2,707.61</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ <u>55,064.27</u>	\$ <u>55,064.27</u>

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ <u>N/A</u>	\$ <u>N/A</u>
21. Expenditures Made	\$ <u>N/A</u>	\$ <u>N/A</u>

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... <i>Schedule E, Line 4</i>	\$ <u>6,622.65</u>	\$ <u>6,622.65</u>
7. Loans Made ..... <i>Schedule H, Line 3</i>	<u>N/A</u>	<u>N/A</u>
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ <u>6,622.65</u>	\$ <u>6,622.65</u>
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	<u>N/A</u>	<u>N/A</u>
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	<u>N/A</u>	<u>N/A</u>
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>6,622.65</u>	\$ <u>6,622.65</u>

**Expenditure Limit Summary for State  
Candidates**

22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	
Date of Election (mm/dd/yy)	Total to Date
<u>    /    /    </u>	\$ <u>N/A</u>
<u>    /    /    </u>	\$ <u>          </u>

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

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ <u>0</u>
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	<u>52,356.66</u>
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	<u>32.28</u>
15. Cash Payments ..... <i>Column A, Line 8 above</i>	<u>6,622.65</u>
16. ENDING CASH BALANCE ..... <i>Add Lines 12 + 13 + 14, then subtract Line 15</i>	\$ <u>45,766.29</u>

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

17. LOAN GUARANTEES RECEIVED ..... <i>Schedule B, Part 2</i>	\$ <u>N/A</u>
--	---------------

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... <i>See instructions on reverse</i>	\$ <u>N/A</u>
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column B above</i>	\$ <u>9,000.00</u>

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

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
Page _____ of _____	I.D. NUMBER 26-4420366

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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)
	SEE ATTACHED EXCEL SPREADSHEET LISTING ALL DETAIL INFORMATION REQUIRED.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>						

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>39,984.66</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>3,372.00</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$ <u>43,356.66</u></b>

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

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

SCHEDULE A (CONT.)

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
Page _____ of _____	I.D. NUMBER 26-4420366

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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)
	SEE ATTACHED EXCEL SPREADSHEET LISTING ALL DETAIL INFORMATION REQUIRED.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>						

\*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 B – Part 1  
Loans Received**

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

SCHEDULE B - PART 1

Statement covers period  
from MARCH 10, 2009  
through JUNE 30, 2009

**CALIFORNIA FORM 460**

Page \_\_\_\_\_ of \_\_\_\_\_

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

I.D. NUMBER

26-4420366

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
IAN PARKINSON 4618 POINSETTIA STREET SAN LUIS OBISPO, CA 93401  † <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	POLICE OFFICER CITY OF SAN LUIS OBISPO, CA	\$ 0.00	\$ 9,000.00	<input type="checkbox"/> PAID \$ N/A <input type="checkbox"/> FORGIVEN \$ N/A	\$ 9,000.00  06/30/10 DATE DUE	4.0 % RATE  N/A	\$ 9,000.0  06/30/09 DATE INCURRED	CALENDAR YEAR \$ 10000.00 PER ELECTION** \$ 10000.00
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____  DATE DUE	_____% RATE	\$ _____  DATE INCURRED	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
<b>SUBTOTALS</b>		\$ 9,000.00	\$ N/A	\$ 9,000.00	\$ N/A			

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

**Schedule B Summary**

- Loans received this period ..... \$ 9,000.00  
(Total Column (b) plus unitemized loans of less than \$100.)
- Loans paid or forgiven this period ..... \$ N/A  
(Total Column (c) plus loans under \$100 paid or forgiven.)  
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ 9,000.00  
Enter the net here and on the Summary Page, Column A, Line 2.  
(May be a negative number)

†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

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

**Schedule B – Part 2  
Loan Guarantors**

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

SCHEDULE B - PART 2

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
	Page _____ of _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

I.D. NUMBER

26-4420366

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE	BALANCE OUTSTANDING TO DATE
N/A	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
<b>SUBTOTAL \$</b>				N/A	Enter on Summary Page, Line 17 only.	

**Schedule C  
Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>MARCH 10, 2009</u>	<b>CALIFORNIA FORM 460</b>
through <u>JUNE 30, 2009</u>	
Page _____ of _____	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

26-4420366

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
	SEE ATTACHED EXCEL SPREADSHEET LISTING ALL DETAIL INFORMATION REQUIRED.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) ..... \$ 2,337.34
- Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 370.27
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL \$** 2,707.61

**\*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 D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULED

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
Page _____ of _____	I.D. NUMBER 26-4420366

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	N/A	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>						

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... \$           N/A
- Unitemized contributions and independent expenditures made this period of under \$100 ..... \$           N/A
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$**           N/A

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
	Page _____ of _____

NAME OF FILER <b>COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010</b>	I.D. NUMBER <b>26-4420366</b>
---	----------------------------------

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	N/A  <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	  <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	  <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	  <input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
<b>SUBTOTAL \$</b>				<b>N/A</b>		

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
Page _____ of _____	I.D. NUMBER 26-4420366

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
SEE ATTACHED EXCEL SPREADSHEET LISTING ALL DETAIL INFORMATION REQUIRED.			

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

**SUBTOTAL \$**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .....	\$	6,421.58
2. Unitemized payments made this period of under \$100 .....	\$	201.07
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .....	\$	N/A
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .....	<b>TOTAL \$</b>	<b>6,622.65</b>

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

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

SCHEDULE E (CONT.)

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
N/A			

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

SUBTOTAL \$ N/A

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

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

SCHEDULE F

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER 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
N/A					
<b>SUBTOTALS \$</b>		N/A	\$	N/A	\$
		N/A	\$	N/A	\$
		N/A	\$	N/A	\$

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

**Schedule F Summary**

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

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

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

SCHEDULE F (CONT.)

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

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

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

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
N/A					
<b>SUBTOTALS \$</b>		N/A \$	N/A \$	N/A \$	N/A

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

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

SCHEDULE G

Statement covers period from <u>MARCH 10, 2009</u>	<b>CALIFORNIA FORM 460</b>
through <u>JUNE 30, 2009</u>	
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I.D. NUMBER 26-4420366	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010
NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
N/A				

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$ N/A

\* 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 H  
Loans Made to Others\***

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

SCHEDULE H

Statement covers period  
from MARCH 10, 2009  
through JUNE 30, 2009

**CALIFORNIA  
FORM 460**

Page \_\_\_\_\_ of \_\_\_\_\_

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

I.D. NUMBER

26-4420366

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID	<input type="checkbox"/> FORGIVEN				
N/A		\$ _____	\$ _____	\$ _____	DATE DUE	_____ % RATE	\$ _____	\$ _____	DATE INCURRED
		\$ _____	\$ _____	\$ _____	DATE DUE	_____ % RATE	\$ _____	\$ _____	DATE INCURRED
		<b>SUBTOTALS</b>	\$ N/A	\$ N/A	\$ N/A	\$ N/A			

\*Loans that are contributions to another candidate or committee must also be summarized on Schedule D. Loans forgiven must also be reported on Schedule E.

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

**Schedule H Summary**

- Loans made this period ..... \$ N/A  
(Total Column (b) plus unitemized loans of less than \$100.)
- Payments received on loans ..... \$ N/A  
(Total Column (c) plus unitemized payments of less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.) ..... NET \$ N/A  
(Enter the net here and on the Summary Page, Column A, Line 7.)

**\*\*If Required**



**Schedule I  
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period from <u>MARCH 10, 2009</u> through <u>JUNE 30, 2009</u>	<b>CALIFORNIA FORM 460</b>
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010

I.D. NUMBER

26-4420366

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
06/19/2009	SAN LUIS TRUST BANK 1001 MARSH STREET SAN LUIS OBISPO, CA 93401	INTEREST INCOME	23.95
06/18/2009	PAYPAL 1840 EMBARCADERO ROAD PAL ALTO, CA 94303	ACCOUNT TEST FEES TO SEE IF NEW ACCOUNT WAS PROPERLY WORKING	8.33

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 32.28**

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$	N/A
2. Unitemized increases to cash of under \$100 this period. ....	\$	32.28
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$	N/A
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$</b>	<b>32.28</b>

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010  
 MONETARY CONTRIBUTIONS RECEIVED (FORM 460 SHCHEDULE A)  
 PERIOD: MARCH 10, 2009 THROUGH JUNE 30, 2009

DATE REC'D	(CALENDAR YEAR)		CONTRIBUTOR CODE	NAME	STREET ADDRESS / P.O. BOX	CITY	STATE	ZIP	(MUST HAVE WITHIN 60 DAYS OF CONTRIBUTION OR MUST RETURN)	
	AMOUNT	CUMULATIVE AMOUNT							(> \$100) OCCUPATION	(> \$100) EMPLOYER
3/11/2009	\$500.00	\$500.00	IND	JOHN A. RONCA JR.	1180 ROSEMARY COURT	SAN LUIS OBISPO	CA	93401	ATTORNEY	SELF-EMPLOYED
3/11/2009	\$500.00	\$500.00	IND	IAN S. & AMY M.T. PARKINSON	4618 POINSETTIA STREET	SAN LUIS OBISPO	CA	93401	POLICE OFFICER	CITY OF SLO
3/19/2009	\$500.00	\$10,000.00	IND	IAN S. & AMY M.T. PARKINSON	4618 POINSETTIA STREET	SAN LUIS OBISPO	CA	93401	POLICE OFFICER	CITY OF SLO
4/30/2009	\$500.00	\$500.00	IND	TERRY O'FARRELL	330 SUSANNAH	PASO ROBLES	CA	93446	INVESTIGATOR	COUNTY OF SLO
4/30/2009	\$500.00	\$500.00	OTH	RUSSELL, MAININI & FRANKLIN LLP	615 CLARION COURT, SUITE 1	SAN LUIS OBISPO	CA	93401	CPA FIRM	RUSSELL, MAININI & FRANKLIN LLP
5/21/2009	\$200.00	\$200.00	IND	MARK & PATRICIA WOOLPERT	875 GREYSTONE PLACE	SAN LUIS OBISPO	CA	93401	ELDER CARE	SELF-EMPLOYED
5/21/2009	\$200.00	\$700.00	OTH	RUSSELL, MAININI & FRANKLIN LLP	615 CLARION COURT, SUITE 1	SAN LUIS OBISPO	CA	93401	CPA FIRM	RUSSELL, MAININI & FRANKLIN LLP
5/21/2009	\$200.00	\$200.00	IND	ROBERT & HEIDI TURBOW	5882 PEBBLE BEACH WAY	SAN LUIS OBISPO	CA	93401	PHYSICIAN	SELF-EMPLOYED
5/21/2009	\$100.00	\$100.00	IND	ROBERT BRYN	37 MARIPOSA	SAN LUIS OBISPO	CA	93401	COUNCIL BOARD CHAIRMAN	NAVY LEAGUE
5/21/2009	\$100.00	\$100.00	IND	HENRY & CECILY LANE	6120 MADBURY COURT	SAN LUIS OBISPO	CA	93401	UNEMPLOYED	N/A
5/21/2009	\$200.00	\$200.00	OTH	R. BURKE CORPORATION	865 CAPITOLIO WAY	SAN LUIS OBISPO	CA	93401	CONSTRUCTION	R. BURKE CORPORATION
5/21/2009	\$200.00	\$200.00	IND	ROBERT & ALYSON COBURN	6780 CALLE STORNETTA	SAN LUIS OBISPO	CA	93401	COMPUTERS	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	GARNEY & DEBRA HALL	5284 ORCUTT ROAD	SAN LUIS OBISPO	CA	93401	CONSTRUCTION	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	OTH	SAN ANSELMO UNION 76	6105 SAN ANSELMO ROAD	ATASCADERO	CA	93422	PETROLEUM BUSINESS	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	PETER & LAUREL ORRADRE	768 TWIN CREEKS WAY	SAN LUIS OBISPO	CA	93401	FARMING	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	TIMOTHY & VANESSA BRITTON	2730 AUGUSTA STREET	SAN LUIS OBISPO	CA	93401	ARTIST	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	MIKE & CARRIE LEE	1540 FRAMBUESA	SAN LUIS OBISPO	CA	93405	TEACHER	SAN LUIS COASTAL UNIFIED
5/21/2009	\$200.00	\$200.00	IND	JERRY & TONI DETZ	1827 BROAD STREET	SAN LUIS OBISPO	CA	93401	TELECOMMUNICATIONS	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	CASEY & KATHLEEN O'CONNOR	190 COUNTRY CLUB DRIVE	SAN LUIS OBISPO	CA	93401	CONSTRUCTION	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	IND	JIM & ELAINE GARDINER	320 TWIN RIDGE DRIVE	SAN LUIS OBISPO	CA	93405	PRIVATE DETECTIVE	SELF-EMPLOYED
5/21/2009	\$200.00	\$200.00	OTH	OGDEN & FRICKS LLP	656 SANTA ROSA STREET, 2ND FLOOR	SAN LUIS OBISPO	CA	93401	ATTORNEYS	OGDEN & FRICKS LLP
5/21/2009	\$100.00	\$100.00	IND	JOHN D. FOWLER	4224 MORNING GLORY	SAN LUIS OBISPO	CA	93401	ACCOUNTANT	DIOCESE OF MONTEREY
5/21/2009	\$200.00	\$200.00	IND	LEDWIN & ANNALEE FORTINI	765 VIA ROBLES	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
5/21/2009	\$200.00	\$200.00	IND	ARTHUR & THERESE HANLON	5922 PEBBLE BEACH WAY	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
5/21/2009	\$200.00	\$200.00	IND	MARTIN & HELEN BRETTING	6076 PEBBLE BEACH WAY	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
5/21/2009	\$200.00	\$200.00	IND	BRADFORD & VIRGINIA PARKINSON	2360 CAMINO EDNA	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
5/21/2009	\$600.00	\$600.00	OTH	CALZYME LABORITIES INC.	3443 MIGUELITO COURT	SAN LUIS OBISPO	CA	93401	BIOCHEM	CALZYME LABORITIES INC.
5/21/2009	\$400.00	\$400.00	OTH	WALTER BROS. CONSTRUCTION INC.	151 TWINRIDGE DRIVE	SAN LUIS OBISPO	CA	93405	CONSTRUCTION	WALTER BROS. CONSTRUCTION INC.
5/21/2009	\$100.00	\$100.00	IND	TIMOTHY & CHERYL STORTON	581 NEWMAN	ARROYO GRANDE	CA	93420	RETIRED	N/A
5/21/2009	\$1,000.00	\$1,000.00	IND	JAMES MURPHY JR.	221 E. BRANCH STREET	ARROYO GRANDE	CA	93420	ATTORNEY	SELF-EMPLOYED
5/21/2009	\$9,000.00	\$9,150.00	IND	CHARLES LIDDELL	1168 JAMI LEE COURT	SAN LUIS OBISPO	CA	93401	UFC FIGHTER	SELF-EMPLOYED
5/27/2009	\$200.00	\$200.00	IND	GARY & BARB MORROW	5909 BIRKDALE LANE	SAN LUIS OBISPO	CA	93401	INVESTMENT ADVISOR	SELF-EMPLOYED
5/27/2009	\$200.00	\$200.00	IND	JAMES & KRISTEN HATHAWAY	993 GOLDENROD LANE	SAN LUIS OBISPO	CA	93401	BANKER	PACIFIC CAPITAL BANK
5/27/2009	\$200.00	\$200.00	IND	JEFFREY & INGRID TROESCH	4739 SNAPDRAGON WAY	SAN LUIS OBISPO	CA	93401	PSYCHOLOGIST	SELF-EMPLOYED
5/27/2009	\$200.00	\$200.00	IND	PATRICK D. RUSCO	1590 TIBURON WAY	SAN LUIS OBISPO	CA	93401	INVESTMENT ADVISOR	MORGAN STANLEY
5/27/2009	\$200.00	\$200.00	OTH	PACIFIC WEST PROPERTIES	624 E. GRAND AVENUE, SUITE C	ARROYO GRANDE	CA	93420	REAL ESTATE	PACIFIC WEST PROPERTIES
5/27/2009	\$200.00	\$200.00	OTH	MULLAHEY FORD	330 TRAFFIC WAY	ARROYO GRANDE	CA	93421	AUTO DEALER	MULLAHEY FORD
6/1/2009	\$1,000.00	\$1,000.00	IND	DON & TAMARA NICHOLAS	6325 MIRA CIELO	SAN LUIS OBISPO	CA	93401	CONSULTANT	SELF-EMPLOYED
6/1/2009	\$1,000.00	\$1,000.00	IND	BILL C. PROLL	4787 SNAPDRAGON WAY	SAN LUIS OBISPO	CA	93401	POLICE OFFICER	CITY OF SLO
6/1/2009	\$200.00	\$400.00	IND	GARY & BARB MORROW	5909 BIRKDALE LANE	SAN LUIS OBISPO	CA	93401	INVESTMENT ADVISOR	SELF-EMPLOYED
6/1/2009	\$200.00	\$200.00	IND	GREGG & LESLIE MENGES	4627 SNAPDRAGON WAY	SAN LUIS OBISPO	CA	93401	INVESTMENT ADVISOR	MORGAN STANLEY
6/1/2009	\$200.00	\$200.00	IND	DEBORAH LUNDEN	4309 EDENBURY DRIVE	SANTA MARIA	CA	93455	POLICE CHIEF	CITY OF SLO
6/1/2009	\$100.00	\$100.00	IND	DAVID R. BOOKER	4051 BROAD STREET	SAN LUIS OBISPO	CA	93401	BANKER	AMERICAN PRINCIPAL BANK
6/1/2009	\$100.00	\$100.00	IND	RUSSELL & AMY GRIFFITH	4675 POINSETTIA STREET	SAN LUIS OBISPO	CA	93401	POLICE OFFICER	CITY OF SLO
6/1/2009	\$200.00	\$200.00	OTH	CUETO COMPANY	124 18TH STREET 325-5046	BAKERSFIELD	CA	93301	FIRE RECONSTRUCTION	SELF-EMPLOYED
6/1/2009	\$200.00	\$200.00	IND	CASEY & JUDI APPELL	2450 SYMPHONY OAKS DRIVE	TEMPLETON	CA	93465	BANKER	SAN LUIS TRUST BANK
6/1/2009	\$100.00	\$100.00	OTH	IN GOOD TASTE CATERING	225 TANK FARM ROAD #02	SAN LUIS OBISPO	CA	93401	CATERING	IN GOOD TASTE CATERING
6/9/2009	\$400.00	\$400.00	OTH	RICHARDSON PROPERTIES	735 TANK FARM ROAD, SUITE 130	SAN LUIS OBISPO	CA	93401	PROPERTY MGMT.	SELF-EMPLOYED
6/9/2009	\$1,000.00	\$2,000.00	OTH	JAMES MURPHY JR.	221 E. BRANCH STREET	ARROYO GRANDE	CA	93420	ATTORNEY	SELF-EMPLOYED

6/9/2009	\$1,000.00	\$1,200.00	IND	ROBERT & ALYSON COBURN	6780 CALLE STORNETTA	SAN LUIS OBISPO	CA	93401	COMPUTERS	SELF-EMPLOYED
6/9/2009	\$250.00	\$250.00	OTH	THE SANCTUARY TOBACCO SHOP	1111 CHORRO STREET	SAN LUIS OBISPO	CA	93401	RETAILER	SELF-EMPLOYED
6/16/2009	\$100.00	\$100.00	IND	LUKE & JANE FABER	5957 BIRKDALE LANE	SAN LUIS OBISPO	CA	93401	PHYSICIAN	SELF-EMPLOYED
6/16/2009	\$1,000.00	\$1,000.00	OTH	SLO POLICE STAFF OFFICER ASSOCIATION	1042 WALNUT STREET	SAN LUIS OBISPO	CA	93401	OFFICER ASSOC.	SLO POLICE STAFF OFFICER ASSOCIATION
6/26/2009	\$100.00	\$470.00	IND	DAVID A. HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	MEDICAL SUPPLY	SELF-EMPLOYED
6/26/2009	\$4,000.00	\$4,200.00	IND	BRADFORD & VIRGINIA PARKINSON	2360 CAMINO EDNA	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
6/26/2009	\$1,000.00	\$1,400.00	OTH	WALTER BROS. CONSTRUCTION INC.	151 TWINRIDGE DRIVE	SAN LUIS OBISPO	CA	93405	CONSTRUCTION	WALTER BROS. CONSTRUCTION INC.
6/30/2009	\$100.00	\$160.00	IND	CALEB & HEATHER KEMP	1480 BURNING HILLS LANE	TEMPLETON	CA	93465	POLICE OFFICER	CITY OF SLO
6/30/2009	\$130.00	\$130.00	IND	RICHARD & CYNTHIA CROCKER	1659 GRANACHE WAY	TEMPLETON	CA	93465	POLICE OFFICER	CITY OF SLO
6/30/2009	\$210.00	\$210.00	IND	CHRISTOPHER & LISA CHITTY	2618 VINEYARD CIRCLE	TEMPLETON	CA	93446	POLICE OFFICER	CITY OF SLO / PASO ROBLES
6/30/2009	\$100.00	\$100.00	IND	PHILLIP & LANIE KOZIEL	100 NARLENE WAY	PISMO BEACH	CA	93449	BANKER	COAST HILLS
6/30/2009	\$100.00	\$100.00	IND	KEITH & TINA STORTON	403 BEECH STREET	ARROYO GRANDE	CA	93420	N/A	N/A
6/30/2009	\$100.00	\$100.00	IND	MARK & DENISE VELTEN	1928 UPPER LOPEZ CANYON ROAD	ARROYO GRANDE	CA	93420	RETIRED	N/A
6/30/2009	\$150.00	\$150.00	OTH	DAY INVESTMENTS	101 PARK PLACE	SHELL BEACH	CA	93449	DAY INVESTMENTS	SELF-EMPLOYED
6/30/2009	\$100.00	\$100.00	OTH	MATTHEW KENNEDY - PROF. LAW CORP.	988 GOLDENROD LANE	SAN LUIS OBISPO	CA	93401	MATTHEW KENNEDY - PROF. LAW CORP.	SELF-EMPLOYED
6/30/2009	\$150.00	\$150.00	OTH	ROBERT & MICHELLE HIGGINBOTHAM	991 TULARE STREET	PISMO BEACH	CA	93449	PHYSICIAN	SELF-EMPLOYED
6/30/2009	\$500.00	\$650.00	OTH	DAY INVESTMENTS	101 PARK PLACE	SHELL BEACH	CA	93449	DAY INVESTMENTS	SELF-EMPLOYED
6/30/2009	\$1,000.00	\$1,000.00	IND	RUSHI & NISHA ABDUL CADER	1635 NASELLA LANE	SAN LUIS OBISPO	CA	93405	PHYSICIAN	SELF-EMPLOYED
6/30/2009	\$100.00	\$100.00	IND	BRETT & CHRISTINE HARTLEY	799 BRAHMA STREET	PASO ROBLES	CA	93446	SHERIFF	SLO COUNTY
6/30/2009	\$500.00	\$500.00	OTH	GOLDSTAR ENTERPRISES	179 NIBLICK ROAD, #315	PASO ROBLES	CA	93446	GOLDSTAR ENTERPRISES	SELF-EMPLOYED
6/30/2009	\$200.00	\$200.00	IND	FRANK MECHAM	142 15TH STREET	PASO ROBLES	CA	93446	SUPERVISOR	SLO COUNTY
6/30/2009	\$250.00	\$900.00	OTH	DAY DEVELOPMENT INC.	101 PARK PLACE	PISMO BEACH	CA	93449	DAY DEVELOPMENT, INC.	SELF-EMPLOYED
6/30/2009	\$200.00	\$200.00	IND	ELIAS & RUTH NIMEH	879 MIRADA DRIVE	SAN LUIS OBISPO	CA	93405	EXEC. DIRECTOR	SNP OF SLO COUNTY
6/30/2009	\$150.00	\$150.00	IND	DOUG ODOM	10180 SANTA ANA ROAD	ATASCADERO	CA	93422	RETIRED	N/A
6/30/2009	\$25.00	\$1,025.00	IND	RUSHI & NISHA ABDUL CADER	1635 NASELLA LANE	SAN LUIS OBISPO	CA	93405	PHYSICIAN	SELF-EMPLOYED
6/30/2009	\$100.00	\$100.00	IND	PAUL & JONI REINHARDT	1840 ATLANTIC CITY AVENUE	GROVER BEACH	CA	93433	RETIRED	N/A
6/30/2009	\$518.66	\$1,200.00	OTH	PACIFIC WEST PROPERTIES	642 E. GRAND AVENUE, SUITE C	ARROYO GRANDE	CA	93420	PACIFIC WEST PROPERTIES	SELF-EMPLOYED
6/30/2009	\$251.00	\$525.00	IND	TONY TOSTE	2216 GREEN PLACE	ARROYO GRANDE	CA	93420	CONTRACTOR	SELF-EMPLOYED
6/30/2009	\$500.00	\$500.00	IND	PAUL BROWN	1214 MARINERS COVE	SAN LUIS OBISPO	CA	93401	RESTAURANT	SELF-EMPLOYED
4/1/2009	\$200.00	\$200.00	IND	JAMES LONGO	1536 ETO CIRCLE	SAN LUIS OBISPO	CA	93401	PHYSICIAN	TEMPLETON RADIATION ONCOLOGY
4/11/2009	\$2,000.00	\$6,200.00	IND	BRADFORD & VIRGINIA PARKINSON	2360 CAMINO EDNA	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
6/18/2009	\$500.00	\$500.00	IND	FRANK KELTON	1710 CONDADO VISTA COURT	ARROYO GRANDE	CA	93420	PRESIDENT	SAN LUIS AMBULANCE
6/19/2009	\$1,000.00	\$7,200.00	IND	BRADFORD & VIRGINIA PARKINSON	2360 CAMINO EDNA	SAN LUIS OBISPO	CA	93401	RETIRED	N/A
TOTALS	\$39,984.66									

\$3,372.00 TOTAL CONTRIBUTIONS TOTALING LESS THAN \$100 RECEIVED FROM A SINGLE CONTRIBUTOR DURING A CALENDAR YEAR.

CONTRIBUTOR CODES:

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- OTH = OTHER (E.G. BUSINESS ENTITY)
- PTY = POLITICAL PARTY
- SCC = SMALL CONTRIBUTOR COMMITTEE

**COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010**  
**LOANS RECEIVED (SCHEDULE B)**  
**PERIOD: MARCH 10, 2009 THROUGH JUNE 30, 2009**

		(CALENDAR YEAR)	CUMULATIVE CONTRIBUTOR		(MUST HAVE WITHIN 60 DAYS OF CONTRIBUTION OR MUST RETURN)						
DATE	AMOUNT	AMOUNT	CODE	NAME	STREET ADDRESS / P.O. BOX	CITY	STATE	ZIP	OCCUPATION	EMPLOYER	
6/30/2009	\$9,000.00	\$10,000.00	IND	IAN S. & AMY M.T. PARKINSON	4618 POINSETTIA STREET	SAN LUIS OBISPO	CA	93401	CITY OF SLO	POLICE OFFICER	
TOTALS	\$9,000.00										

**CONTRIBUTOR CODES:**  
 IND = INDIVIDUAL  
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 OTH = OTHER (E.G. BUSINESS ENTITY)  
 PTY = POLITICAL PARTY  
 SCC - SAMLL CONTRIBUTOR COMMITTEE

COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010  
 NONMONETARY CONTRIBUTIONS RECEIVED (FORM 460 SCHEDULE C)  
 PERIOD: MARCH 10, 2009 THROUGH JUNE 30, 2009

DATE	FMV AMOUNT	(CALENDAR YEAR)	(PER ELECTION)	CONTRIBUTOR CODE	NAME	STREET ADDRESS / P.O. BOX	CITY	STATE	ZIP	DESCRIPTION OF GOODS	(MUST HAVE WITHIN 60 DAYS OF CONTRIBUTION OR MUST RETURN)	(- \$100)	(- \$100)
		CUMULATIVE AMOUNT	CUMULATIVE AMOUNT								OCCUPATION	EMPLOYER	
6/15/2009	\$150.00	\$150.00	N/A	OTH	KAREN MCLAIN PHOTOGRAPHY	767 CHORRO STREET	SAN LUIS OBISPO	CA	93401	PHOTOGRAPHY	KAREN MCLAIN PHOTOGRAPHY	SELF EMPLOYED	
6/30/2009	\$175.00	\$175.00	N/A	IND	DAVID HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	FIRST AID KIT - SILENT AUCTION	MEDICAL SUPPLY	SELF-EMPLOYED	
6/30/2009	\$150.00	\$9,150.00	N/A	IND	CHARLES LIDELL	1168 JAMI LEE COURT	SAN LUIS OBISPO	CA	93401	SIGNED POSTER - SILENT AUCTION	UFC FIGHTER	SELF-EMPLOYED	
6/30/2009	\$100.00	\$100.00	N/A	OTH	HAPPY ACRE FARMS	1875 TEMPLETON ROAD	TEMPLETON	CA	93465	WINE BASKET - SILENT AUCTION	HAPPY ACRE FARMS	SELF-EMPLOYED	
6/30/2009	\$40.00	\$215.00	N/A	IND	DAVID HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	FIRST AID KIT - SILENT AUCTION	MEDICAL SUPPLY	SELF-EMPLOYED	
6/30/2009	\$40.00	\$255.00	N/A	IND	DAVID HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	FIRST AID KIT - SILENT AUCTION	MEDICAL SUPPLY	SELF-EMPLOYED	
6/30/2009	\$40.00	\$295.00	N/A	IND	DAVID HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	FIRST AID KIT - SILENT AUCTION	MEDICAL SUPPLY	SELF-EMPLOYED	
6/30/2009	\$100.00	\$100.00	N/A	OTH	CRUSHED GRAPE	319 MADONNA ROAD	SAN LUIS OBISPO	CA	93401	WINE BASKET - SILENT AUCTION	CRUSHED GRAPE	SELF-EMPLOYED	
6/30/2009	\$100.00	\$100.00	N/A	OTH	VELVET CLOTHING STORE	900 PARK STREET	PASO ROBLES	CA	93446	GIFT CERTIFICATE - SILENT AUCTION	VELVET CLOTHING STORE	SELF-EMPLOYED	
6/30/2009	\$200.00	\$200.00	N/A	OTH	LE CRÈME	464 MARSH STREET, SUITE A	SAN LUIS OBISPO	CA	93401	JEWELRY - SILENT AUCTION	LE CRÈME	SELF EMPLOYED	
6/30/2009	\$102.00	\$102.00	N/A	OTH	SURROUNDINGS	751 MARSH STREET, SUITE A	SAN LUIS OBISPO	CA	93401	PICTURE - SILENT AUCTION	SURROUNDINGS	SELF EMPLOYED	
6/30/2009	\$75.00	\$370.00	N/A	IND	DAVID HORVAT	748 WOODLAND DRIVE	LOS OSOS	CA	93402	FIRST AID KIT - SILENT AUCTION	MEDICAL SUPPLY	SELF-EMPLOYED	
6/30/2009	\$250.00	\$250.00	N/A	OTH	SCATTINI CELLARS	980 S. BETHAL ROAD	TEMPLETON	CA	93465	WINE - SILENT AUCTION	SCATTINI CELLARS	SELF EMPLOYED	
6/30/2009	\$60.00	\$160.00	N/A	IND	CALEB & HEATHER KEMP	1480 BURNING HILLS LANE	TEMPLETON	CA	93465	CAP - SILENT AUCTION	POLICE OFFICER	CITY OF SLO	
6/30/2009	\$481.34	\$1,200.00	N/A	OTH	PACIFIC WEST PROPERTIES	624 E. GRAND AVENUE, SUITE C	ARROYO GRANDE	CA	93420	FOOD - SILENT AUCTION	PACIFIC WEST PROPERTIES	SELF EMPLOYED	
6/30/2009	\$274.00	\$525.00	N/A	IND	TONY TOSTE	2216 GREEN PLACE	ARROYO GRANDE	CA	93420	FOOD - SILENT AUCTION	CONTRACTOR	SELF-EMPLOYED	
TOTALS	\$2,337.34												

370.27

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COMMITTEE TO ELECT IAN PARKINSON SHERIFF 2010  
 PAYMENTS MADE (FORM 460 SCHEDULE E)  
 PERIOD: MARCH 10, 2009 THROUGH JUNE 30, 2009

DATE	CHECK #	AMOUNT	(CALENDAR YEAR)	PAYEE NAME	STREET ADDRESS / P.O. BOX	CITY	STATE	ZIP	DESCRIPTION OF GOODS / SERVICES RECEIVED
			CUMULATIVE AMOUNT						
3/13/2009	101	\$217.50	\$217.50	UPS STORE	3940-7 BROAD STREET	SAN LUIS OBISPO	CA	93401	OBTAINING P.O. BOX
3/24/2009	103	\$250.00	\$250.00	BRENDAN MCNAMARA	2256 PALISADES AVENUE	LOS OSOS	CA	93402	CREATE WEBSITE
4/30/2009	401	\$427.89	\$427.89	VERIZON WIRELESS	P.O. BOX 96089	BELLEVUE	WA	98009	TELEPHONE BILL & EQUIPMENT
5/4/2009	402	\$200.00	\$200.00	JEFF SIMONSON	1651 QUIET OAKS DRIVE	ARROYO GRANDE	CA	93420	DESIGN LOGO & CAMPAIGN THEME
5/13/2009	403	\$120.06	\$547.95	VERIZON WIRELESS	P.O. BOX 96089	BELLEVUE	WA	98009	TELEPHONE BILL
6/1/2009	404	\$125.49	\$673.44	VERIZON WIRELESS	P.O. BOX 96089	BELLEVUE	WA	98009	TELEPHONE BILL
6/1/2009	405	\$4,088.18	\$4,088.18	CAFÉ ROMA	1020 RAILROAD AVENUE	SAN LUIS OBISPO	CA	93401	IAN PARKINSON KICK-OFF DINNER/FUNDRAISER
6/9/2009	406	\$265.45	\$265.45	THE SIGN PLACE, SLO	812 FIERO LANE, SUITE F	SAN LUIS OBISPO	CA	93401	BANNERS
6/16/2009	407	\$150.00	\$400.00	BRENDAN MCNAMARA	2256 PALISADES AVENUE	LOS OSOS	CA	93402	WEBSITE ADMINISTRATION
6/26/2009	408	\$109.87	\$783.31	VERIZON WIRELESS	P.O. BOX 96089	BELLEVUE	WA	98009	TELEPHONE BILL
6/26/2009	409	\$353.67	\$353.67	POOR RICHARD'S PRESS	2224 BEEBEE STREET	SAN LUIS OBISPO	CA	93401	STATIONARY
6/18/2009	N/A	\$113.47	\$113.47	PAYPAL ACCOUNT FEES	1840 EMBARCADERO ROAD	PAL ALTO	CA	94303	PAYPAL ACCOUNT FEES
TOTALS		\$6,421.58							

\$201.07 UNITEMIZED PAYMENTS MADE THIS PERIOD OF UNDER \$100.00