

Recipient Committee Campaign Statement
(Government Code Sections 84200-84216.5)

Type or print in ink

COVER PAGE

| | |
|--|----------------------------|
| Date Stamp RECEIVED NOV 10 11:00 AM SANTA ANITA CENTER 7/2000 | CALIFORNIA FORM 460 |
| Page <u>1</u> of <u>60</u> | |
| For Official Use Only | |

| | |
|---|---|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | Date of election if applicable: (Month, Day, Year) <u>11/07/2000</u> |
|---|---|

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 7.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Officeholder, Candidate Controlled Committee <i>(Also Complete Part 4.)</i> <input type="checkbox"/> Ballot Measure Committee <input type="radio"/> Primarily Formed <input type="radio"/> Controlled <input type="radio"/> Sponsored <i>(Also Complete Part 5.)</i> | <input type="checkbox"/> Primarily Formed Candidate/ Officeholder Committee <i>(Also Complete Part 6.)</i> <input type="checkbox"/> General Purpose Committee <input type="radio"/> Sponsored <input type="radio"/> Broad Based |
|--|---|

2. Type of Statement:

- | | |
|--|--|
| <input checked="" type="checkbox"/> Pre-election Statement <input type="checkbox"/> Semi-annual Statement <input type="checkbox"/> Termination Statement <input type="checkbox"/> Amendment (Explain below) | <input type="checkbox"/> Quarterly Statement <input type="checkbox"/> Special Odd-Year Report <input type="checkbox"/> Supplemental Pre-election Statement - Attach Form 495 |
|--|--|

3. Committee Information

I.D. NUMBER
991831

Nakanishi for Senate

STREET ADDRESS (NO P.O. BOX)
2495 W. March Lane, Ste. 204

CITY STATE ZIP CODE AREA CODE/PHONE
Stockton, CA 95267 (209) 477-7221

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
P.O. Box 7095

CITY STATE ZIP CODE AREA CODE/PHONE
Stockton, CA 95267

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

Vona Copp
MAILING ADDRESS
8958 Ivanpah Court

CITY STATE ZIP CODE AREA CODE/PHONE
Elk Grove, CA 95624 916/686-1815

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

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

Type or print in ink.

COVER PAGE - PART 2

| | |
|----------------------------|--|
| CALIFORNIA FORM 460 | |
| Page <u>2</u> of <u>59</u> | |

4. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
 Dr. Alan Nakanishi

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
 ; District 5

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
 1617 St. Marks Plaza, Suite D Stockton, CA 95202

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

| | |
|-------------------|---|
| COMMITTEE NAME | I.D. NUMBER |
| 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 |

5. Ballot Measure Committee

NAME OF BALLOT MEASURE

| | | |
|----------------------|--------------|---|
| 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
 Dr. Alan Nakanishi

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

6. Primarily Formed 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 |
| 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

7. 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 10/25/00
DATE

Executed on 10/24/2000
DATE

Executed on _____
DATE

Executed on _____
DATE

By *Jana L. Copp*
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By *[Signature]*
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT OR RESPONSIBLE OFFICER OF SPONSOR

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By _____
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Campaign Disclosure Statement
Summary Page**

SUMMARY PAGE

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>3</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW) | Column C (ADD COLUMNS A + B) TOTAL TO DATE |
|---------------------------------------|--------------------|--|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 | \$ 333327.00 | \$ 547759.00 | \$ 881086.00 |
| 2. Loans Received | Schedule B, Line 7 | 36000.00 | 87000.00 | 123000.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | Add Lines 1 + 2 | \$ 369327.00 | \$ 634759.00 | \$ 1004086.00 |
| 4. Non-monetary Contributions | Schedule C, Line 3 | 23109.53 | 26581.25 | 49690.78 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | Add Lines 3 + 4 | \$ 392436.53 | \$ 661340.25 | \$ 1053776.78 |

Expenditures Made

| | | | | |
|--|----------------------|--------------|--------------|---------------|
| 6. Payments Made | Schedule E, Line 4 | \$ 388772.93 | \$ 449596.29 | \$ 838369.22 |
| 7. Loans Made | Schedule H, Line 7 | 0.00 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS | Add Lines 6 + 7 | 388772.93 | 449596.29 | 838369.22 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | \$ 160563.02 | \$ 51269.72 | \$ 211832.74 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 23109.53 | 26581.25 | 49690.78 |
| 11. TOTAL EXPENDITURES MADE | Add Lines 8 + 9 + 10 | \$ 572445.48 | \$ 527447.26 | \$ 1099892.74 |

Current Cash Statement

| | | |
|---|---|--------------|
| 12. Beginning Cash Balance | Previous Summary Page, Line 16 | \$ 296065.96 |
| 13. Cash Receipts | Column A, Line 3 above | 369327.00 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 7723.60 |
| 15. Cash Payments | Column A, Line 8 above | 388772.93 |
| 16. ENDING CASH BALANCE | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 284343.63 |

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

* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Loans Made (Line 7), and Accrued Expenses (Line 9).

Summary for Candidates in Both June and November Elections

| | | |
|------------------------------------|--------------------------------|---------|
| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part I, Column (b) | \$ 0.00 |
|------------------------------------|--------------------------------|---------|

| | 1/1 through 6/30 | 7/1 to Date |
|----------------------------------|------------------|-------------|
| 20. Contributions Received | \$ | |

Cash Equivalents and Outstanding Debts

| | | |
|-----------------------------|---------------------------------------|--------------|
| 18. Cash Equivalents | See Instructions on reverse | \$ 0.00 |
| 19. Outstanding Debts | Add Line 2 + Line 9 in Column C above | \$ 334832.74 |

| | |
|-----------------------------|----|
| 21. Expenditures Made | \$ |
|-----------------------------|----|

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>4</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|--|---|-----------------------------|--|---|
| 10/02/2000 | Barbara A. Bennett 5081 East Jahant Road Galt, CA 95632 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/02/2000 | Borra Vineyards 1301 E. Armstrong Road Lodi, CA 95242 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$100.00 | \$100.00 | |
| 10/02/2000 | Esther R. Greene 600 - 46th Street Sacramento, CA 95819 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/02/2000 | Japanese American Republicans (#C00195701) 5400 Irwindale Avenue Irwindale, CA 91706 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/02/2000 | Stockton Hematology Oncology 2626 N. California Street, Ste. B Stockton, CA 95204 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |

SUBTOTAL \$ 2300.00

Schedule A Summary

| | | |
|---|-----------------|-----------|
| 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) | \$ | 331575.00 |
| 2. Amount received this period - unitemized contributions of less than \$100 | \$ | 1752.00 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) | TOTAL \$ | 333327.00 |

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>5</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/02/2000 | Charles H. Sunn 2652 Palo Vista Way Rancho Cordova, CA 95670 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$200.00 | \$300.00 | |
| 10/03/2000 | Asahi Company 1221 El Portal Way Oxnard, CA 93035 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$250.00 | \$250.00 | |
| 10/03/2000 | Edward Cahill 8810 Alhambra Ave. Stockton, CA 95212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician Self-Employed | \$1,000.00 | \$1,000.00 | |
| 10/03/2000 | Leroy Ornellas 20749 South Lammers Road Tracy, CA 95376 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$750.00 | \$1,000.00 | |
| 10/03/2000 | S. Maro Sasaki 4591 Orange Ave, Unit 206 Long Beach, CA 90807 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$100.00 | \$100.00 | |
| 10/03/2000 | Jack W. Sellers 9454 Gerber Road Sacramento, CA 95829 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |

SUBTOTAL \$ 2400.00

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OTH - Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>6</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
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|---------------|---|---|---|-----------------------------|--|---|
| 10/03/2000 | Sid Anur, M.D., Inc. 2800 North California Street, Ste. 3 Stockton, CA 95204 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$500.00 | \$500.00 | |
| 10/03/2000 | Walter J. Rore, DDS, Inc. 4255 Pacific Avenue, Ste. 12 Stockton, CA 95207 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$100.00 | \$100.00 | |
| 10/03/2000 | Robert L. Yin 431 Taylor Blvd. Millbrae, CA 94030 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$1,000.00 | \$1,000.00 | |
| 10/04/2000 | Melinda Cecchettini 14061 Flagstaff Drive Sloughhouse, CA 95683 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$500.00 | \$500.00 | |
| 10/04/2000 | Andrea Fox 3908 Sherman Way Sacramento, CA 95817 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$150.00 | \$150.00 | |
| 10/04/2000 | Joseph Furukawa 3424 Carson Street, Ste. 570 Torrance, CA 90503 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | Attorney at Law Self-Employed | \$100.00 | \$200.00 | |

SUBTOTAL \$ 2350.00

*Contributor Codes
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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> through <u>10/21/2000</u> | |
| Page <u>7</u> of <u>60</u> | |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|--------------------|---|---|---|-----------------------------|---|--|
| 10/04/2000 | Charles Irwin P.O. Box 189 Lodi, CA 95241 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Graveyard Adm. Cherokee Memorial Park | \$500.00 | \$500.00 | |
| 10/05/2000 | Robert E. Duden 5992 Stone Bridge Road Santa Rosa, CA 95409 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$250.00 | \$250.00 | |
| 10/06/2000 | Sylvia Sun Minnick 1001 W. Lincoln Road, Unit P Stockton, CA 95207-2550 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/06/2000 | Charles H. Yagi 1329 Elkhorn Drive Stockton, CA 95209 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/07/2000 | Cynthia R. Allison 8391 Pezzi Road Stockton, CA 95215 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/07/2000 | S.M. Fowler 14050 E. Brandt Road Lodi, CA 95240 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| SUBTOTAL \$ | | | | 1400.00 | | |

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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>8</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

I.D. NUMBER

991831

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/07/2000 | Carole L. Hogge P.O. Box 560 Lockeford, CA 95237 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/07/2000 | Col. Douglas A. Jewett 11476 Coloma Road Gold River, CA 95670 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/07/2000 | Anthony L. Rantz P.O. Box 529 Lockeford, CA 95237 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/07/2000 | Seldon Brusa Insurance Agency, Inc. 1100 W. Tokay Street, Ste. B Lodi, CA 95240 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$100.00 | \$100.00 | |
| 10/07/2000 | Melody K. Speer 28000 Sowles Road Galt, CA 95632 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/07/2000 | Thomas J. Vander Wal 3752 Hatchers Circle Stockton, CA 95219 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |

SUBTOTAL \$ 700.00

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 OTH - Other

FPPC Form 460 (8/99)
 For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>9</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

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Nakanishi for Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/08/2000 | Dr. Pamela Tsuchiya 705 Newbury St. Livermore, CA 94550 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician Delta Eye Med. Group | \$250.00 | \$750.00 | |
| 10/09/2000 | Bill Bechtold 8026 Lorraine Avenue, No. 213 Stockton, CA 95210 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/09/2000 | Ross E. Bewley, Jr. 5332 E. Adamore Drive Stockton, CA 95212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/09/2000 | Gilbert E. Greene, O.D. P.O. Box 4517 Stockton, CA 95204 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/09/2000 | Stanley Nakamura 2221 Gambels Way Santa Rosa, CA 95403 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$125.00 | \$125.00 | |
| 10/09/2000 | Raquel Thompson 21030 N. Davis Road Lodi, CA 95242 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |

SUBTOTAL \$ 975.00

*Contributor Codes
IND -- Individual
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OTH -- Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>10</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
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| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/10/2000 | Cathy Silva 6133 Huntingdale Circle Stockton, CA 95219 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/10/2000 | Vliet View Dairy 9863 S. Van Allen Road Stockton, CA 95215 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$100.00 | \$100.00 | |
| 10/11/2000 | Camillo 'Tom' Cicchini P.O. Box 255692 Sacramento, CA 95865 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/11/2000 | Daniel B. Dellinger P.O. Box 638 Lotus, CA 95651 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/11/2000 | Chris J. Fellersen 8675 Sleepy Hollow Lane Elk Grove, CA 09562-4 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/11/2000 | Jesse Gonzalez P.O. Box 6201 Folsom, CA 95763 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$400.00 | \$400.00 | |

SUBTOTAL \$ 1150.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>11</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|---|--|
| 10/11/2000 | JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$400.00 | \$400.00 | |
| 10/11/2000 | Peter R. Kwett 6433 Palm Drive Carmichael, CA 95608 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/11/2000 | Timothy J. Lefever 8009 Doyle Lane Dixon, CA 95620 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Attorney/Real Estate Broker Lefever and Mattisch | \$150.00 | \$150.00 | |
| 10/11/2000 | Matilde F. Magdangal P.O. Box 276526 Sacramento, CA 95827 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/11/2000 | Michael D. McCollum 7722 Rio Barco Way Sacramento, CA 95831 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/11/2000 | Ruth Radmore 3824 Hubbard Ave. Stockton, CA 95215 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$200.00 | \$400.00 | |

TOTAL \$ 1300

***Contributor Codes**
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OTH – Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
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| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/11/2000 | Harry A. Reeves 3322 El Castillo Court Antelope, Ca 95843 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$150.00 | \$150.00 | |
| 10/12/2000 | Albina G. Benabaye, M.D. 2800 N. California Street, Ste. 1 Stockton, CA 95204 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician Self-Employed | \$500.00 | \$500.00 | |
| 10/12/2000 | Romulo F. Gonzales, M.D. 2222 Canyon Creek Drive Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/12/2000 | David A. Leak 2352 Rudat Circle Rancho Cordova, CA 95670 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/12/2000 | Dr. Chen Feel Liem 5371 Rudor Rose Glen Stockton, CA 95212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$200.00 | |
| 10/12/2000 | Nosce Ophthalmology, Inc. 8932 N. Highway 99 Stockton, CA 95212 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$2,000.00 | |

SUBTOTAL \$ 1950.00

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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

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>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

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|---------------|---|---|--|-----------------------------|---|--|
| 10/12/2000 | Helen Reyes 5354 Serenade Lane Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$350.00 | |
| 10/12/2000 | Michael S. Ricci 2774 Land Park Drive Sacramento, CA 95818-2939 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/12/2000 | David M. Smith 1110 W. Kettleman Lane, No. 20B Lodi, CA 95240 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/12/2000 | S. Wong 9751 Hildreth Lane Stockton, CA 95212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$50.00 | \$150.00 | |
| 10/13/2000 | Stephan Eugene Biondi 8150 - 37th Avenue Sacramento, CA 95824 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Owner Biondi Paving | \$250.00 | \$250.00 | |
| 10/13/2000 | Califia Development Group 1350 Treat Blvd., Ste. 560 Walnut Creek, CA 94596 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$500.00 | \$500.00 | |

SUBTOTAL \$ 1250.00

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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>14</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/13/2000 | Van Exel Dairy 20002 N. Thornton Road Lodi, CA 95242 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$200.00 | \$200.00 | |
| 10/16/2000 | Marie L. Babka 2104 Lido Circle Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/16/2000 | Mr. Peter Bregman 11701 E. Kettleman Ln. Lodi, CA 95240 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Realtor Self-Employed | \$100.00 | \$450.00 | |
| 10/16/2000 | Kenneth W. Campbell 3636 McCourtney Road Lincoln, CA 95648 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Farmer Self-Employed | \$200.00 | \$200.00 | |
| 10/16/2000 | J&D Autobody 552 Fairway Drive Galt, CA 95632 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$250.00 | \$250.00 | |
| 10/16/2000 | Theron E. Johnson 1233 Woodside Glen Sacramento, CA 95833 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Pilot | \$1,000.00 | \$1,500.00 | |

SUBTOTAL \$ 1850.00

*Contributor Codes
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OTH -- Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>15</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi : r Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|--------------------|---|---|---|-----------------------------|---|--|
| 10/16/2000 | Abdul W. Khan, M.D. 10740 Chantel Lane Stockton, CA 95212 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician Self-Employed | \$500.00 | \$500.00 | |
| 10/16/2000 | Frank E. Orozco 213 E. Swain Road Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$100.00 | \$100.00 | |
| 10/16/2000 | Cheryl A. Schlegel 8135 Pixley Way Sacramento, CA 95828 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/17/2000 | Tiberio Reis 3754 S. Drais Avenue Stockton, CA 95215 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$150.00 | \$250.00 | |
| 10/17/2000 | Jack Sieglock 1702 Timberlakd Circle Lodi, CA 95242 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$150.00 | \$150.00 | |
| 10/17/2000 | Patrick Stockar P.O. Box 673 Victor, CA 95352 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Farmer | \$150.00 | \$250.00 | |
| SUBTOTAL \$ | | | | 1300.00 | | |

***Contributor Codes**
IND - Individual
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OTH - Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

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

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>16</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/17/2000 | Watson Land Company 22010 South Wilmington Avenue, #400 Carson, CA 90745 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$2,500.00 | \$2,500.00 | |
| 10/17/2000 | Weststeyn Dairy 2 1763 S. Hewitt Rd. Linden, CA 9523-6 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,200.00 | |
| 10/18/2000 | California Pro Life Council Inc. (#860482) 2306 J Street, Ste. 200 Sacramento, CA 95816 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$300.00 | \$300.00 | |
| 10/18/2000 | Guido D. Abellera, M.D. Professional Medical Corp. 123 S. Commerce St., Ste. B Stockton, CA 95202 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$200.00 | \$200.00 | |
| 10/18/2000 | Florence Horton 350 Locust Dr., No. L225 Vallejo, CA 94591 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | \$50.00 | \$280,100.00 | |
| 10/18/2000 | Western Electrical Contractors Association Inc (#991225) Good Government PAC 455 Capitol Mall, Ste. 801 Sacramento, CA 95814 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$1,000.00 | \$2,000.00 | |

SUBTOTAL \$ 5050.00

*Contributor Codes
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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

Monetary Contributions Received

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

SCHEDULE A (CONT.)

| | |
|---------------------------|-----------------------------|
| Statement covers period | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>17</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

Nakanishi for Senate

I.D. NUMBER
991831

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|--------------------|--|---|--|-----------------------------|---|--|
| 10/19/2000 | Black America's PAC Suite 202, 2029 P Street, NW Washington, DC 20036 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/19/2000 | California Republican Party (#810163) 1903 West Magnolia Blvd. Burbank, CA 91506 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$26,000.00 | \$224,954.96 | |
| 10/19/2000 | Mr. Keiji Fujinaka 2016 E. Armstrong Road Lodi, CA 95242 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Farmer Self-Employed | \$50.00 | \$150.00 | |
| 10/19/2000 | Lincoln Club of Sacto Valley P.O. Box 60861 Sacramento, CA 95860-0861 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/19/2000 | John E. Stoos 4246 - 2nd Avenue Sacramento, CA 95817 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Staff State of California | \$150.00 | \$150.00 | |
| 10/20/2000 | Norman Erick Albert 830 S. Ham Lane Lodi, CA 95242 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician Lodi Urological Medical Org. | \$500.00 | \$550.00 | |
| SUBTOTAL \$ | | | | 28700.00 | | |

*Contributor Codes
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FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>18</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|--------------------|---|---|---|-----------------------------|---|--|
| 10/20/2000 | Associated Builders & Contractors of California PAC 1127 - 11th Street, #300 Sacramento, CA 95814 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$1,500.00 | \$1,500.00 | |
| 10/20/2000 | T.K. Beard 800 N. Shaw Road Stockton, CA 95215 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$200.00 | \$200.00 | |
| 10/20/2000 | Burnett & Company LLP 2870 Gold Tailings Court Rancho Cordova, CA 95670 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$250.00 | \$250.00 | |
| 10/20/2000 | Carlyle Electric Contractor 2112-B Drive-In Way Auburn, CA 95603 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/20/2000 | Ditch Witch Equipment Co., Inc. P.O. Box 1195 West Sacramento, CA 95691-2989 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$500.00 | \$500.00 | |
| 10/20/2000 | Friends of Senator Dick Monteith (#972053) P.O. Box 1101 Modesto, CA 95353 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$10,000.00 | \$10,000.00 | |
| SUBTOTAL \$ | | | | 13450.00 | | |

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FPPC Form 460 (8/99)
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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| Page <u>19</u> of <u>60</u> | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/20/2000 | Gaddy Ward & Company 1330 South Ham Lane Lodi, CA 95242 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/20/2000 | H&D Electric Inc. 5306 Walnut Avenue Sacramento, CA 95841 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$2,000.00 | |
| 10/20/2000 | Harold E. Nutter & Son, Inc. 3017 Douglas Blvd., Ste. 200 Roseville, CA 95661 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/20/2000 | Philip L. Harrison 6210 W. 4th Street Rio Linda, CA 95673 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/20/2000 | Stephen A. Jelten 12261 Overland Way Wilton, CA 95693 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/20/2000 | Mitsuo Kagehiro 3461 Heatherbrook Drive Stockton, CA 95219 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Retired | \$500.00 | \$500.00 | |

SUBTOTAL \$ 3850.00

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FPPC Form 460 (8/99)
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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 to whole dollars.

SCHEDULE A (CONT.)

| | |
|---------------------------|-----------------------------|
| Statement covers period | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>20</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

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|------------------------------|-----------------------|
| NAME OF FILER Nakanishi : | I.D. NUMBER 991831 |
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|---------------|---|---|---|-----------------------------|--|---|
| 10/20/2000 | Roland Nakata, M.D. 815 S. Fairmont Avenue Lodi, CA 95240 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$1,000.00 | \$1,000.00 | |
| 10/20/2000 | John Newman 2524 E. Main Street Stockton, CA 95205 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/20/2000 | Paula K. Osborne 423 Cedar River Way Sacramento, CA 95831 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/20/2000 | Joseph A. Piazza 8251 Exbourne Circle Sacramento, CA 95828 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$100.00 | \$100.00 | |
| 10/20/2000 | Rex Moore Electrical Contractors & Engineers 3601 Parkway Place West Sacramento, CA 95798 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,500.00 | \$1,500.00 | |
| 10/20/2000 | Dr. James M. Ritchey 10436 Corfu Drive Elk Grove, CA 95624 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$500.00 | \$500.00 | |

SUBTOTAL \$ 3450.00

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 OTH -- Other

FPPC Form 460 (8/99)
 For Technical Assistance: 916/322-5660

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| Page <u>21</u> of <u>60</u> | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi r Senate

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|---|--|
| 10/20/2000 | Ms. Phyllis Roche 16293 N. Tecklenburg Rd. Lodi, CA 95240 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Homemaker | \$100.00 | \$275.00 | |
| 10/20/2000 | Vellutini Corporation dba Royal Electric Co. & Velcor P.O. Box 231430 Sacramento, CA 95823 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/20/2000 | George R. Wong 3834 Rawhide Road Rocklin, CA 95677 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$250.00 | \$250.00 | |
| 10/21/2000 | Mr. James W. Baum 3380 East Woodbridge Road Acampo, CA 95220 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Owner Mobil Devel-op | \$500.00 | \$600.00 | |
| 10/21/2000 | California Sportsman's Committee (#1223417) 1127 11th Street, Ste. 300 Sacramento, CA 95814 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/21/2000 | Violet Ehlers 530 So. Mills Avenue Lodi, CA 95242 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | | | |

SUBTOTAL \$ 2950.00

*Contributor Codes
IND -- Individual
COM -- Recipient Committee
OTH -- Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>22</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|---|---|---|-----------------------------|--|---|
| 10/21/2000 | Friends of Senator Ross Johnson (#950521) 17192 Murphy Ave., #16632 Irvine, CA 92623 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$100,000.00 | \$100,000.00 | |
| 10/21/2000 | Elizabeth S. Holdener 24383 Mountain House Parkway Tracy, CA 95376 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Homemaker | \$25.00 | \$125.00 | |
| 10/21/2000 | Interstate Construction 3909 Security Park Drive Rancho Cordova, CA 95742 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$1,000.00 | \$1,000.00 | |
| 10/21/2000 | Dr. Michael G. Khoury 1537 Griffin Point Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Physician | \$200.00 | \$400.00 | |
| 10/21/2000 | Law Offices of Shawn Steel 8383 Wilshire Blvd., Ste. 640 Beverly Hills, CA 90211 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | \$500.00 | \$500.00 | |
| 10/21/2000 | Don Monaco 1424 A Street Modesto, CA | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Owner Don's Mobile Glass | \$100.00 | \$100.00 | |

SUBTOTAL \$ 101825.00

*Contributor Codes
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 OTH - Other

FPPC Form 460 (8/99)
 For Technical Assistance: 916/322-5660

**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 | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>23</u> of <u>60</u> |

SEE INSTRUCTIONS ON REVERSE

| | |
|---------------------------------------|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
|---------------------------------------|-----------------------|

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|--|---|---|-----------------------------|--|---|
| 10/21/2000 | Bill Peterson P.O. Box 473 Lockeford, CA 95237 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$1,000.00 | \$1,000.00 | |
| 10/21/2000 | Penny L. Sanderson P.O. Box 3011 Sacramento, CA 95812 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$1,000.00 | \$1,000.00 | |
| 10/21/2000 | Senate Republican Leadership Fund (#980879) 1008 Tenth Street, #389 Sacramento, CA 95814 | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | \$150,000.00 | \$280,100.00 | |
| 10/21/2000 | John Vander Schaaf 12727 Murphy Road Escalon, CA 95320 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | \$1,375.00 | \$1,375.00 | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | | | |

SUBTOTAL \$ 153375.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other

FPPC Form 460 (8/99)
For Technical Assistance: 916/322-5660

**Schedule B - Part I
Loans Received**

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

**SCHEDULE B - Part I
CALIFORNIA
FORM 460**

Statement covers period
from 10/01/2000
through 10/21/2000
Page 24 of 60

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Nakanishi for Senate
I.D. NUMBER
991831

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF LENDER OR GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER IF SELF-EMPLOYED, ENTER NAME OF BUSINESS | LENDER INFORMATION | | | GUARANTOR INFORMATION | |
|-----------------|---|---|--|--|--------------------|------------------------------|---|---------------------------|
| | | | | DUE DATE/INTEREST RATE | (a) AMOUNT OF LOAN | CUMULATIVE TO DATE | (b) AMOUNT GUARANTEED | CUMULATIVE TO DATE |
| 10/18/2000 | Committee to Elect William J. 'Pete' Knight (#910804) 208 Shirley Lane Palmdale, CA 93551 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor* | <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH | | Due Date N/A Interest Rate 0.00 % | 36000.00 | Calendar Year \$ 36000.00 | | Calendar Year \$ _____ |
| | <input type="checkbox"/> Lender <input type="checkbox"/> Guarantor* | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | Due Date Interest Rate _____ % | | Calendar Year \$ _____ | | Calendar Year \$ _____ |
| | <input type="checkbox"/> Lender <input type="checkbox"/> Guarantor* | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | Due Date Interest Rate _____ % | | Calendar Year \$ _____ | | Calendar Year \$ _____ |
| SUBTOTAL | | | | \$ | 36000.00 | \$ | <small>Enter (b) on Summary Page, Line 17 only.</small> | |

Loans Received - Part 1 Summary

- 1. Loans of \$100 or more received this period. (Include all Loans Received - Part 1 (a) subtotals.) \$ 36000.00
- 2. Amount received this period -- unitemized loans of less than \$100 \$ 0.00
- 3. Total loans received this period. (Add Lines 1 and 2.) **TOTAL \$** 36000.00

Loans Received - Part 2 Summary

- 4. Loans of \$100 or more repaid, forgiven, or paid by a third party this period. (Include all Part 2 (c) subtotals. If forgiven or paid by a third party, also itemize the transaction on Schedule A.) \$ 0.00
- 5. Loans under \$100 repaid, forgiven, or paid by a third party. (Do not itemize.) If forgiven or paid by a third party, include this amount on Schedule A Summary, Line 2. \$ 0.00
- 6. Total loans repaid, forgiven, or paid by a third party this period (Add Lines 4 + 5.) **TOTAL \$** (0.00)
- 7. Net change this period. (Subtract Line 6 from Line 3.)
Enter the net here and on the Summary Page, Column A, Line 2. **NET \$** 36000.00
May be a negative number.

***Contributor Codes**
IND -- Individual
COM -- Recipient Committee
OTH -- Other

**Schedule C
Non-Monetary Contributions Received**

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

Statement covers period
from 10/01/2000
through 10/21/2000

**SCHEDULE C
CALIFORNIA
FORM 460**
Page 25 of 60
I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

| DATE RECEIVED | FULL NAME, MAILING 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) | CUMULATIVE TO DATE OTHER (IF APPLICABLE) |
|---------------|--|---|--|------------------------------------|--------------------------|---|--|
| 10/03/2000 | Robert L. French 5713 Pintail Court Stockton, CA 95207 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | Information Requested | Bill Paid By Third Party | \$520.68 | \$1,270.68 | |
| 10/04/2000 | California Republican Party (#810163) 1903 West Magnolia Blvd. Burbank, CA 91506 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH | | Postage and printing of mail piece | \$22,547.00 | \$224,954.96 | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | | | | |
| | | <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH | | | | | |

SUBTOTAL \$ 23067.68

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.) \$ 23067.68
- Amount received this period - unitemized nonmonetary contributions of less than \$..... \$ 41.85
- 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 \$ 23109.53

***Contributor Codes**
IND -- Individual
COM -- Recipient Committee
OTH -- Other

**Schedule E
Payments Made**

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

SCHEDULE E

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>26</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Andrew Mercy 642 Adams Street Davis, CA 95616 | | Fee and mileage | \$2,188.41 |
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | | Fee, mileage & postage | \$5,288.78 |
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | OFC | | \$273.17 |

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

SUBTOTAL \$ 7750.36

Schedule E Summary

| | |
|--|---------------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$ 388629.87 |
| 2. Unitemized payments made this period of under \$100. | \$ 143.06 |
| 3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 2, Column (d).) | \$ 0.00 |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ 388772.93 |

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660

**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 10/01/2000 | CALIFORNIA FORM 460 |
| through 10/21/2000 | |
| Page 27 of 60 | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----------------------------------|-------------|
| John L. Rothra 8896 Liscarney Way Sacramento, CA 95828 | | Fee, mileage and office expenses | \$3,407.76 |
| Richard C. Staats 5850 Happy Pines Drive Foresthill, CA 95631 | OFC | | \$112.25 |
| Richard C. Staats 5850 Happy Pines Drive Foresthill, CA 95631 | CNS | | \$2,500.00 |
| AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110 | OFC | | \$181.87 |
| AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110 | OFC | | \$176.54 |

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

SUBTOTAL \$ 6378.42

**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>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>28</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|----------------------------|-------------|
| Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376 | | Printing & postage | \$550.36 |
| Vona Copp 8958 Ivanpah Court Elk Grove, CA 95624 | | Treasurer fee and expenses | \$2,269.48 |
| Grapevine Independent 3338 Mather Field Road Rancho Cordova, CA 95670 | PRT | | \$1,237.50 |
| Andrew Mercy 642 Adams Street Davis, CA 95616 | OFC | | \$106.00 |
| N & N Designs 12067 W. Lammers Road Tracy, CA 95376 | LIT | | \$347.67 |

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

SUBTOTAL \$ 4511.01

**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 10/01/2000 | CALIFORNIA FORM 460 |
| through 10/21/2000 | |
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| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Sacramento County Registrar of Voters 3700 Branch Road Sacramento, CA 95827 | OFC | | \$200.00 |
| The Donegal Group 3508 24th Street Sacramento, CA 95818 | LIT | | \$1,557.13 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | OFC | | \$27.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | OFC | | \$198.98 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | POL | | \$16,824.00 |

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

SUBTOTAL \$ 18807.11

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

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

SCHEDULE E (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 10/01/2000 | |
| through | 10/21/2000 | Page <u>30</u> of <u>60</u> |
| | | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|------------------------|-------------|
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | | \$2,627.76 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | | \$3,737.69 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | | \$93.95 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | | \$4,198.91 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | | Research | \$529.00 |

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

SUBTOTAL \$ 11187.31

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>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>31</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

LIT campaign literature and mailings
 MTG meetings and appearances

PRT print ads
 RAD radio airtime and production costs

VOT voter registration
 WEB information technology costs (internet, e-mail)

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|---|-------------|
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | | Precinct Report | \$88.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | CNS | | \$4,900.00 |
| The Donegal Group 3508 24th Street Sacramento, CA 95818 | | Commission, printing, postage and event expense | \$10,174.47 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | | Printing, research and office expenses | \$11,721.89 |
| Carlos Lopez 2123 Pennington Court Stockton, CA 95207 | CMP | | \$1,500.00 |

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

SUBTOTAL \$ 28384.36

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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>32</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|---------|-----------------------------|--------------|
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | | Office expenses and postage | \$5,237.83 |
| US Postmaster 3131 Arch Airport Stockton, CA 95213 | POS | | \$4,950.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | | \$223,000.00 |
| Lockeford Clements News P.O. Box 76 Lockeford, CA 95237 | PRT | | \$495.00 |
| Sacramento County Registrar of Voters 3700 Branch Road Sacramento, CA 95827 | OFC | | \$350.00 |

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

SUBTOTAL \$ 234032.83

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 10/01/2000 | CALIFORNIA FORM 460 |
| through 10/21/2000 | |
| Page 33 of 60 | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | OFC | | | \$1,208.47 |
| Team California (#598036) 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | | | \$3,395.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | RAD | | | \$20,000.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | | | \$52,975.00 |
| | | | | |

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

SUBTOTAL \$ 77578.47

**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>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>34</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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 | (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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | OFC | 198.98 | 0.00 | 198.98 | 0.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | 4198.91 | 0.00 | 4198.91 | 0.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | Research | 529.00 | 0.00 | 529.00 | 0.00 |
| SUBTOTAL \$ | | 4926.89 \$ | 0.00 \$ | 4926.89 \$ | 0.00 |

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 \$ 206312.06**
- 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 \$ 45749.04**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$ 160563.02**

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

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

SCHEDULE F (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
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| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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 | (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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | POL | 16824.00 | 0.00 | 16824.00 | 0.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | 2627.76 | 0.00 | 2627.76 | 0.00 |
| Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 | LIT | 3737.69 | 0.00 | 3737.69 | 0.00 |
| Grapevine Independent 3338 Mather Field Road Rancho Cordova, CA 95670 | PRT | 1237.50 | 0.00 | 1237.50 | 0.00 |
| The Donegal Group 3508 24th Street Sacramento, CA 95818 | LIT | 1557.13 | 0.00 | 1557.13 | 0.00 |
| SUBTOTAL \$ | | 25984.08 \$ | 0.00 \$ | 25984.08 \$ | 0.00 |

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

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

SCHEDULE F (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 10/01/2000 | |
| through | 10/21/2000 | Page <u>36</u> of <u>60</u> |
| NAME OF FILER | | I.D. NUMBER |
| Nakanishi for Senate | | 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

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|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
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| NAME AND ADDRESS OF PAYEE OR 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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Andrew Mercy 642 Adams Street Davis, CA 95616 | OFC | 106.00 | 0.00 | 106.00 | 0.00 |
| AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110 | OFC | 181.87 | 0.00 | 181.87 | 0.00 |
| AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110 | OFC | 176.54 | 0.00 | 176.54 | 0.00 |
| Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376 | Printing & postage | 550.36 | 0.00 | 550.36 | 0.00 |
| Papapavlos 7555 Pacific Avenue Stockton, CA 95207 | FND | 520.68 | -520.68 | 0.00 | 0.00 |
| SUBTOTAL | | \$ 1535.45 | \$ -520.68 | \$ 1014.77 | 0.00 |

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

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

SCHEDULE F (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>37</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR 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 & N Designs 12067 W. Lammers Road Tracy, CA 95376 | LIT | 347.67 | 0.00 | 347.67 | 0.00 |
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | Fee, mileage & postage | 5288.78 | 0.00 | 5288.78 | 0.00 |
| Andrew Mercy 642 Adams Street Davis, CA 95616 | Fee and mileage | 2188.41 | 0.00 | 2188.41 | 0.00 |
| Richard C. Staats 5850 Happy Pines Drive Foresthill, CA 95631 | OFC | 112.25 | 0.00 | 112.25 | 0.00 |
| John L. Rothra 8896 Liscarney Way Sacramento, CA 95828 | Fee, mileage and office expenses | 3407.76 | 0.00 | 3407.76 | 0.00 |
| SUBTOTAL | | \$ 11344.87 | \$ 0.00 | \$ 11344.87 | \$ 0.00 |

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

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

SCHEDULE F (CONT.)

| | | |
|-------------------------|------------|--------------------------------|
| Statement covers period | | CALIFORNIA FORM 460 |
| from | 10/01/2000 | |
| through | 10/21/2000 | Page 38 of 60 |
| | | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
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| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
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| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR 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 |
|---|--------------------------------|---|---------------------------------------|---|--|
| Vona Copp 8958 Ivanpah Court Elk Grove, CA 95624 | Treasurer fee and expenses | 2269.48 | 0.00 | 2269.48 | 0.00 |
| Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376 | CNS | 5000.00 | 0.00 | 0.00 | 5000.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | RAD | 0.00 | 51062.00 | 0.00 | 51062.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POS | 0.00 | 3595.30 | 0.00 | 3595.30 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POS | 0.00 | 1880.31 | 0.00 | 1880.31 |
| SUBTOTAL \$ | | 7269.48 \$ | 56537.61 \$ | 2269.48 \$ | 61537.61 |

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

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

SCHEDULE F (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>39</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
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| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
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|---|-----------------------------------|---|---------------------------------------|---|--|
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | PHO | 0.00 | 2943.50 | 0.00 | 2943.50 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | PHO | 0.00 | 5458.00 | 0.00 | 5458.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | PHO | 0.00 | 5458.00 | 0.00 | 5458.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POL | 0.00 | 13765.00 | 0.00 | 13765.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 3418.46 | 0.00 | 3418.46 |
| SUBTOTAL | | \$ 0.00 | \$ 31042.96 | \$ 0.00 | \$ 31042.96 |

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

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

SCHEDULE F (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>40</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR 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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POS | 0.00 | 1995.89 | 0.00 | 1995.89 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 832.77 | 0.00 | 832.77 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POS | 0.00 | 17517.81 | 0.00 | 17517.81 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | 0.00 | 23198.75 | 0.00 | 23198.75 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 18262.62 | 0.00 | 18262.62 |
| SUBTOTAL | | \$ 0.00 | \$ 61807.84 | \$ 0.00 | \$ 61807.84 |

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

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

SCHEDULE F (CONT.)

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>41</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

| NAME AND ADDRESS OF PAYEE OR 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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | POS | 0.00 | 12.50 | 0.00 | 12.50 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | CNS | | 2000.00 | | 2000.00 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | RAD | 0.00 | 1258.18 | | 1258.18 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | 0.00 | 1493.56 | 0.00 | 1493.56 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | RAD | 0.00 | 12084.00 | 0.00 | 12084.00 |
| SUBTOTAL | | \$ 0.00 | \$ 16848.24 | \$ 0.00 | \$ 16848.24 |

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

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

SCHEDULE F (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>42</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
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|---|-----------------------------------|---|---------------------------------------|---|--|
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | 0.00 | 56.49 | 0.00 | 56.49 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | OFC | 0.00 | 26.69 | 0.00 | 26.69 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | OFC | 0.00 | 11.40 | 0.00 | 11.40 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 4645.88 | 0.00 | 4645.88 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 1146.92 | 0.00 | 1146.92 |
| SUBTOTAL \$ | | 0.00 \$ | 5887.38 \$ | 0.00 \$ | 5887.38 |

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

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

SCHEDULE F (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>43</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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 | (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 |
|---|--------------------------------------|---|---------------------------------------|---|--|
| Steve Reid 1007 S. Country Club Blvd. Stockton, CA 95207 | OFC | 0.00 | 10.76 | 0.00 | 10.76 |
| Sue Blake 9114 Truillo Way Sacramento, CA 95826 | Fee and Expenses | 0.00 | 2109.21 | 0.00 | 2109.21 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | TEL | 0.00 | 366.99 | 0.00 | 366.99 |
| Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814 | LIT | 0.00 | 20853.01 | 0.00 | 20853.01 |
| The Donegal Group 3508 24th Street Sacramento, CA 95818 | commission, printing & FR expense | 0.00 | 9318.74 | 0.00 | 9318.74 |
| SUBTOTAL \$ | | 0.00 \$ | 32658.71 \$ | 0.00 \$ | 32658.71 |

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

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

SCHEDULE F (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>44</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
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| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR 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 |
|---|-----------------------------------|---|---------------------------------------|---|--|
| Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376 | CNS | 0.00 | 2000.00 | 0.00 | 2000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| SUBTOTAL \$ | | 0.00 \$ | 2000.00 \$ | 0.00 \$ | 2000.00 |

Schedule G
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)

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

SCHEDULE G

| | |
|---|----------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>45</u> of <u>60</u> | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

I.D. NUMBER

991831

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----------|------------------------|-------------|
| California Voter Guide (#595004) 1658 W. Carson Street, Ste. 454 Torrance, CA 90501 | LIT | | | \$500.00 |
| Colby Poster Printing 1332 W. 12th Place Los Angeles, CA 90015-2089 | CMP | | | \$1,678.00 |
| Concord Technologies 2025 1st Ave., Ste. 800 Seattle, WA 98121 | OFC | | | \$673.54 |
| Continuing the Republican Revolution (#598041) P.O. Box 936 Tustin, CA 92781 | LIT | | | \$100.00 |
| Kirk Hutson 1006 P Street, #3 Sacramento, CA 95814 | CNS | Research | | \$1,535.00 |

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 4486.54

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 Page <u>46</u> of <u>60</u> I.D. NUMBER 991831 |
|--|--|

NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----------|------------------------|-------------|
| Independent Voters League (#588034) 555 S. Flower Street, #4510 Los Angeles, CA 90071 | LIT | | | \$2,150.00 |
| Don Levin 334 Bridge Place West Sacramento, CA 95691 | CNS | Research | | \$1,500.00 |
| Parents' Ballot Guide (#1226502) 20705 S. Western Avenue, #209 Torrance, CA 90501 | LIT | | | \$1,500.00 |
| KDND 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841 | RAD | | | \$5,916.00 |
| KHKK 1581 Cummins Dr., Ste. 135 Modesto, CA 95351 | RAD | | | \$3,786.75 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 14852.75

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>47</u> of <u>60</u> | |

NAME OF FILER

Nakanishi for Senate

I.D. NUMBER

991831

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| KJOY 6820 Pacific Avenue, Ste. 2 Stockton, CA 95207 | RAD | | | \$1,606.50 |
| KJSN 2121 Lancey Drive Modesto, CA 95355 | RAD | | | \$3,748.50 |
| KOSO 2121 Lancey Drive Modesto, CA 95355 | RAD | | | \$4,284.00 |
| KQOD 2121 Lancey Drive Modesto, CA 95355 | RAD | | | \$3,213.00 |
| KSSJ 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841 | RAD | | | \$7,509.75 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 20361.75

* 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 (Continuation Sheet)
 Payments Made by an Agent or Independent
 Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>48</u> of <u>60</u> |

NAME OF FILER
 Nakanishi for Senate

I.D. NUMBER
 991831

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| KSTE 1440 Ethan #200 Sacramento, CA 95825 | RAD | | | |
| KTKZ 1425 RIVER Park Drive, Ste. 520 Sacramento, CA 95815 | RAD | | | \$1,820.70 |
| KUYL 2121 Lancey Drive Modesto, CA 95355 | RAD | | | \$535.50 |
| KWIN 6820 Pacific Avenue Stockton, CA 95207 | RAD | | | |
| KXOA 5244 Madison Avenue Sacramento, CA 95841 | RAD | | | \$4,284.00 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 11191.95

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>49</u> of <u>60</u> |

| | |
|---|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR Johnson Clark Associates | |

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
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| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$3,595.30 |
| Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758 | PHO | | | \$150.00 |
| Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758 | PHO | | | \$150.00 |
| Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758 | PHO | | | \$150.00 |
| Feather, Hodges & Larson 7320 N. Dreamy Draw Dr. Phoenix, AZ 85020 | PHO | | | \$1,852.50 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 5897.80

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)

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

SCHEDULE G (CONT.)

| | |
|--|---|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 Page <u>50</u> of <u>60</u> |
|--|---|

| | |
|---|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR Johnson Clark Associates | |

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Feather, Hodges & Larson 7320 N. Dreamy Draw Dr. Phoenix, AZ 85020 | PHO | | | \$3,990.00 |
| Feather, Hodges & Larson 7320 N. Dreamy Draw Dr. Phoenix, AZ 85020 | PHO | | | \$3,990.00 |
| KCRA 3 Television Circle Sacramento, CA 95814 | TEL | | | \$78,773.75 |
| KMAX 500 Media Place Sacramento, CA 95815 | TEL | | | \$15,584.75 |
| KOVR 2713 KOVR Drive West Sacramento, CA 95605 | TEL | | | \$75,331.25 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 177669.75

* 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 (Continuation Sheet)
 Payments Made by an Agent or Independent
 Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>51</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

NAME OF FILER
 Nakanishi for Senate

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

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| KQCA 58 Television Circle Sacramento, CA 95814 | TEL | | | \$4,254.25 |
| KSPX 3352 Mather Field Road Rancho Cordova, CA 95670 | TEL | | | \$1,899.75 |
| KXTV 400 Broadway Sacramento, CA 95801 | TEL | | | \$39,270.00 |
| Val Smith 214 Wellfleet Circle Folsom, CA 95630 | POL | | | \$1,500.00 |
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$1,880.31 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 48804.31

**Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>52</u> of <u>60</u> |
| NAME OF FILER Nakanishi for Senate | |
| I.D. NUMBER 991831 | |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR Johnson Clark Associates | |

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | PHO | | | \$500.00 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | PHO | | | \$500.00 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | PHO | | | \$500.00 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | POL | | | \$1,200.00 |
| Xcentrix SCI, LLC 1160 South State, Ste. 280 Orem, UT 84097 | POL | | | \$9,000.00 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 11700.00

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as reported on Schedule E

**Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>53</u> of <u>60</u> | |
| I.D. NUMBER 991831 | |

NAME OF FILER
Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Johnson Clark Associates

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| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
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| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831 | LIT | | | \$707.77 |
| Spectrum Films 11431 Sunrise Gold Circle, #D Rancho Cordova, CA 95742 | TEL | | | \$18,500.00 |
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$17,517.81 |
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$1,995.89 |
| Steven Ding 2696 Eagle Rock Circle Stockton, CA 95209 | CNS | | | \$2,000.00 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 40721.47

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

Schedule G (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)

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

SCHEDULE G (CONT.)

| | |
|--|-----------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>54</u> of <u>60</u> |
| I.D. NUMBER 991831 | |

NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Johnson Clark Associates

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
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| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831 | LIT | | | \$13,317.16 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | LIT | | | \$1,211.88 |
| G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831 | LIT | | | \$3,529.50 |
| KCTC 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841 | RAD | | | \$3,812.25 |
| KFBK 1440 Ethan #200 Sacramento, CA 95825 | RAD | | | \$8,342.75 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 30213.54

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)

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

SCHEDULE G (CONT.)

| | |
|---------------------------|-----------------------------|
| Statement covers period | CALIFORNIA FORM 460 |
| from <u>10/01/2000</u> | |
| through <u>10/21/2000</u> | Page <u>55</u> of <u>60</u> |

| | |
|---|-----------------------|
| NAME OF FILER Nakanishi for Senate | I.D. NUMBER 991831 |
| NAME OF AGENT OR INDEPENDENT CONTRACTOR Johnson Clark Associates | |

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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, ENTER I.D NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| KGBY 1440 Ethan #200 Sacramento, CA 95825 | RAD | | | \$3,842.00 |
| KHYL 1440 Ethan #200 Sacramento, CA 95825 | RAD | | | \$3,149.25 |
| KNCI Radio 5244 Madison Avenue Sacramento, CA 95841 | RAD | | | \$1,224.03 |
| KTXL 4655 Fruitridge Sacramento, CA 95820 | TEL | | | \$19,465.00 |
| Studio Z Recording, Inc. 1030 48th Street Sacramento, CA 95819 | RAD | | | \$989.00 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 28669.28

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)

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

SCHEDULE G (CONT.)

| | |
|--|-----------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>56</u> of <u>60</u> |
| | I.D. NUMBER 991831 |

NAME OF FILER
 Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 Johnson Clark Associates

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
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| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| Studio Z Recording, Inc. 1030 48th Street Sacramento, CA 95819 | TEL | | | \$1,224.03 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | LIT | | | \$208.68 |
| G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831 | LIT | | | \$915.00 |
| JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670 | LIT | | | \$16,371.11 |
| Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626 | LIT | | | \$986.74 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 19705.56

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|---|--------------------------------|
| Statement covers period from <u>10/01/2000</u> | CALIFORNIA FORM 460 |
| through <u>10/21/2000</u> | |
| Page <u>57</u> of <u>60</u> | |

NAME OF FILER
Nakanishi for Senate

I.D. NUMBER
991831

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Steve Reid

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| OfficeMax 4733 Quail Lakes Dr. Stockton, CA | OFC | | | \$178.44 |
| OfficeMax 4733 Quail Lakes Dr. Stockton, CA | OFC | | | \$273.15 |
| US Postmaster 3131 Arch Airport Stockton, CA 95213 | POS | | | \$4,950.00 |
| Staples 2415 West Kettleman Lane Lodi, CA 95242 | OFC | | | \$377.50 |
| Staples 2415 West Kettleman Lane Lodi, CA 95242 | OFC | | | \$610.13 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 6389.22

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>58</u> of <u>60</u> |
| I.D. NUMBER 991831 | |

NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Donegal Group

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

| | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | 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, ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|------------------------|-------------|
| Pachyderm Press 1915 1/2 22nd Street Sacramento, CA 95816 | LIT | | | \$4,668.77 |
| Spirit of Sacramento Riverboat 110 L Street Sacramento, CA 95814 | FND | | | \$1,000.00 |
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$1,343.10 |
| Sara Durham 3508 24th Street Sacramento, CA 95818 | FND | | | \$368.00 |
| Pachyderm Press 1915 1/2 22nd Street Sacramento, CA 95816 | LIT | | | \$1,582.14 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 8962.01

* 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 (Continuation Sheet)
Payments Made by an Agent or Independent
Contractor (on behalf of a Committee)**

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

SCHEDULE G (CONT.)

| | |
|--|--------------------------------|
| Statement covers period from <u>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| Page <u>59</u> of <u>60</u> | I.D. NUMBER 991831 |

NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

The Donegal Group

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | OFC office expenses | RFD returned contributions |
| CNS campaign consultants | PET petition circulating | SAL campaign workers salaries |
| CTB contribution (explain nonmonetary)* | PHO phone banks | TEL t.v. or cable airtime and production costs |
| CVC civic donations | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
| MTG meetings and appearances | RAD radio airtime and production costs | WEB information technology costs (internet, e-mail) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|---|------|----|------------------------|-------------|
| US Postmaster State Capitol Branch Sacramento, CA 95814 | POS | | | \$695.00 |
| | | | | |
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Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 695.00

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

**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>10/01/2000</u> through <u>10/21/2000</u> | CALIFORNIA FORM 460 |
| | Page <u>60</u> of <u>60</u> |
| I.D. NUMBER 991831 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

| DATE RECEIVED | FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | DESCRIPTION OF RECEIPT | AMOUNT OF INCREASE TO CASH |
|---------------|---|--|----------------------------|
| 10/03/2000 | Central Valley PAC 1044 N. El Dorado Street Stockton, CA 95204 | Reimbursement for telephone installation/deposit and copier rental | \$4,923.60 |
| 10/20/2000 | Richard Pombo for Congress 28375 Chrisman Road Tracy, CA 95304 | Reimbursement for purchase of postage stamps | \$2,800.00 |
| | | | |
| | | | |
| | | | |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 7723.60

Schedule I Summary

| | |
|---|-------------------------|
| 1. Increases to cash of \$100 or more this period. | \$ 7723.60 |
| 2. Unitemized Increases to cash under \$100 this period. | \$ 0.00 |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Part 2 (b).) | \$ 0.00 |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) | TOTAL \$ 7723.60 |

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660