

Recipient Committee Campaign Statement

(Government Code Sections 84200-84216.5)

Type or print in ink.

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CALIFORNIA FORM 460

Page 1 of 98

For Official Use Only

Statement covers period
from 10/22/2000
through 12/31/2000

Date of election if applicable:
(Month, Day, Year)
11/07/2000

SEE INSTRUCTIONS ON REVERSE

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

- Officeholder, Candidate Controlled Committee
(Also Complete Part 4.)
- Ballot Measure Committee
 - Primarily Formed
 - Controlled
 - Sponsored
(Also Complete Part 5.)
- Primarily Formed Candidate/Officeholder Committee
(Also Complete Part 6.)
- General Purpose Committee
 - Sponsored
 - Broad Based

2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

I.D. NUMBER
991831

COMMITTEE NAME

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)

NAME OF TREASURER

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
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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
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OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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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 11/30/01
DATE

Executed on 11/09/01
DATE

Executed on _____
DATE

Executed on _____
DATE

By [Signature]
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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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	\$ 635327.00	\$ 881086.00	\$ 1516413.00
2. Loans Received	Schedule B, Line 7	15000.00	123000.00	138000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	\$ 650327.00	\$ 1004086.00	\$ 1654413.00
4. Non-monetary Contributions	Schedule C, Line 3	43249.05	55146.70	98395.75
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	\$ 693576.05	\$ 1059232.70	\$ 1752808.75

Expenditures Made

6. Payments Made	Schedule E, Line 4	\$ 933455.87	\$ 838369.22	\$ 1771825.09
7. Loans Made	Schedule H, Line 7	0.00	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	933455.87	838369.22	1771825.09
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3	\$ -216503.53	\$ 219120.64	\$ 2617.11
10. Nonmonetary Adjustment	Schedule C, Line 3	43249.05	55146.70	98395.75
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10	\$ 760201.39	\$ 1112636.56	\$ 1872837.95

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	\$ 284343.63
13. Cash Receipts	Column A, Line 3 above	650327.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4	3147.54
15. Cash Payments	Column A, Line 8 above	933455.87
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15	\$ 4362.30

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

1/1 through 6/30 7/1 to Date

17. LOAN GUARANTEES RECEIVED	Schedule B, Part I, Column (b)	\$ 0.00
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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	\$ 140617.11

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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
10/23/2000	Ronald H. Akashi, M.D. 500 N. Garfield Ave., Ste. 100 Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Ronald H. Akashi, M.D.	\$1,000.00	\$1,000.00	
10/23/2000	Japanese American Republicans (#C00195701) 5400 Irwindale Avenue Irwindale, CA 91706	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$1,500.00	\$2,500.00	
10/24/2000	Apnet P.O. Box 432 Madison, CA 95653-0432	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$1,500.00	
10/24/2000	Friends of Mike Antonovich An Incorporated Association 15760 Ventura Blvd., Floor 16 Encino, CA 91436	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$200.00	\$200.00	
10/24/2000	Ayako Higashi 1523 Pebble Vale Street Monterey Park, CA 91754	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	

SUBTOTAL \$ 3300.00

Schedule A Summary

1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$ 633555.00
2. Amount received this period - unitemized contributions of less than \$100	\$ 1772.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)	TOTAL \$ 635327.00

*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.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u>	CALIFORNIA FORM 460
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NAME OF FILER Nakanishi for Senate	I.D. NUMBER 991831
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10/24/2000	Dr. Jack I. Kiyonaga 15233 S. Western Avenue Gardena, CA 90249	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$200.00	\$200.00	
10/24/2000	Thomas S. Uyeda 1931 Dana Place Fullerton, CA 92831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	
10/26/2000	1371 Building Ted A. & Colleen Molfino 1701 Edgewood Drive Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$1,000.00	
10/26/2000	Virginia L. Blysmo 8356 Edgefield Way Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Homemaker	\$200.00	\$200.00	
10/26/2000	California Orthopaedic Assn/PAC 5380 Elvas Ave., #221 Sacramento, CA 95819-2300	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH	C26249	\$500.00	\$500.00	
10/26/2000	Helen Diede 5250 Claremont Ave., Ste. 104 Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$100.00	\$100.00	

SUBTOTAL \$ 1600.00

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IND -- Individual
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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.
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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u>	CALIFORNIA FORM 460
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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)
10/26/2000	Evelyn Dockter 21329 Mariposa Road Escalon, CA 95320	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Dockter Farms	\$375.00	\$375.00	
10/26/2000	Friends of Bill Jones (#932219) P.O. Box 9863 Fresno, CA 93794	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$2,500.00	\$2,500.00	
10/26/2000	Richard A. Haines 4410 Pebble Beach Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Shopping Center Manager Sims-Group Management Corp.	\$500.00	\$500.00	
10/26/2000	J.R. Roberts Corp. 7745 Greenback Lane, Ste. 300 Citrus Heights, CA 95610	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
10/26/2000	Mrs. Mary Kaehler 1025 E. Armstrong Road Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$25.00	\$125.00	
10/26/2000	Melba A. Berbano, M.D., Inc. 73 W. March Lane, Ste. A Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$500.00	
SUBTOTAL \$				4900.00		

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

Type or print in ink.
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SCHEDULE A (CONT.)

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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)
10/26/2000	Milky Way Dairy 11945 S> Murphy Road Stockton, CA 95215	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
10/26/2000	Misuno Farms, Inc. 29050 Ahern Road Tracy, CA 95340	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
10/26/2000	Mary H. Mitoma 1207 - 41st Avenue Sacramento, CA 95822	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	
10/26/2000	Glenn M. Nakadate 14452 Birmingham Drive Westminster, CA 92683	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Self-Employed	\$100.00	\$100.00	
10/26/2000	Debra Nishizaki 19382 Benedict Drive Woodbridge, CA 95258	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Speech Pathologist Lodi Unified School District	\$100.00	\$100.00	
10/26/2000	Katherine Nomellino 2 Atherton Island Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Homemaker	\$250.00	\$250.00	
SUBTOTAL \$				1050.00		

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

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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
10/26/2000	H.S. Shergill, M.D. 5345 N. El Dorado, Ste. 3 Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH	Information Requested	\$100.00	\$100.00	
10/26/2000	Snider Executive Office 5051 Madison Ave. Sacramento, CA 95841	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$2,500.00	\$12,750.00	
10/27/2000	California Republican Party (#810163) 1903 West Magnolia Blvd. Burbank, CA 91506	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100,000.00	\$352,136.51	
10/27/2000	Snider Executive Office 5051 Madison Ave. Sacramento, CA 95841	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$5,000.00	\$12,750.00	
10/28/2000	National Republican Congressional Committee (#923281) Non-Federal California 320 First Street, SE Washington, DC 20003	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$100,000.00	\$150,000.00	
10/29/2000	John Gemelos 456 Hollywood Tracy, CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$500.00	\$500.00	
SUBTOTAL \$				208100.00		

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

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SCHEDULE A (CONT.)

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10/29/2000	Louis K. Meyer 2853 Battleview Place Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$1,000.00	\$1,000.00	
10/30/2000	Albert Brocchini Farms 27011 South Austin Road Ripon, CA 95366	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$1,000.00	
10/30/2000	Apnet P.O. Box 432 Madison, CA 95653-0432	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,500.00	
10/30/2000	Doris Batch 11174 N. Davis Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Self-Employed	\$300.00	\$1,300.00	
10/30/2000	Central Valley Eye Medical Group, Inc. 36 W. Yokuts Avenue, Ste. 1 Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
10/30/2000	Coast Nurseries, Inc. 15914 South Broadway Gardena, CA 90248	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	

SUBTOTAL \$ 4050.00

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

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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
10/30/2000	Leonard Dias 6512 Embarcadero Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Dias Farms	\$100.00	\$200.00	
10/30/2000	Duarte Nursery 1556 Baldwin Road Hughson, CA 95326	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,500.00	
10/30/2000	Milon Johnston 260 36th Way Sacramento, CA 95819	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$200.00	\$650.00	
10/30/2000	Florence Kamigaki 3849 Peninsula Court Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Stockton Cardiology	\$250.00	\$250.00	
10/30/2000	Teresa F. Puglia 242 Watson Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Case Manager Center for the Blind	\$200.00	\$200.00	
10/30/2000	John Sheldon 1100 S. Tuxedo Avenue Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	

SUBTOTAL \$ 1850.00

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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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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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10/30/2000	The Donegal Group 3508 24th Street Sacramento, CA 95818	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
10/31/2000	21st Century Freedom PAC 355 Lexington Ave., 10th Floor New York, NY 10017	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$3,000.00	\$3,000.00	
10/31/2000	Arnaudo Bros. 16505 Tracy Blvd. Tracy, CA 95376	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
10/31/2000	MR. Roger Blain 2993 Old Ranch Circle Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$250.00	\$600.00	
10/31/2000	CWR Industries P.O. Box 2696 Lodi, CA 95241	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$400.00	\$800.00	
10/31/2000	Canal Farms 16505 S. Tracy Blvd. Tracy, CA 95376	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	

SUBTOTAL \$ 5150.00

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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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	

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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)
10/31/2000	General Mills Minneapolis, MN	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,500.00	
10/31/2000	James G. Heather 10095 Creek Trail Circle Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	CPA Heather, Sanguinetti, Carminata & Sakai, Inc.	\$250.00	\$850.00	
10/31/2000	Wilson Heefner 7205 Parkwoods Drive Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$150.00	
10/31/2000	Grace M. Heinz 1142 Rivergate Drive, #13 Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$200.00	\$200.00	
10/31/2000	Jean S. Hiroshima 6508 Benham Way Sacramento, CA 95831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Legal Assistant Hiroshima, Jacobs, Roth & Lewis	\$200.00	\$200.00	
10/31/2000	Hogan Mfg., Inc. P.O.Box 398 Escalon, CA 95320	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$2,000.00	\$3,000.00	

SUBTOTAL \$ 3750.00

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
10/31/2000	Takayuki Kishida 789 E. Armstrong Road Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$50.00	\$150.00	
10/31/2000	Jane Klein 11 Atherton Island Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Homemaker	\$200.00	\$700.00	
10/31/2000	Michael Phillips 2210 W. Woodbridge Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Self-Employed	\$250.00	\$250.00	
10/31/2000	Praytel Communications 401 W. Lockeford Street Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
10/31/2000	Marsha Sakai 406 Black Oak Way Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$100.00	\$300.00	
10/31/2000	San Joaquin - Stanislaus Cattlemen's Association P.O. Box 1528 Oakdale, CA 95361	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	

SUBTOTAL \$ 1850.00

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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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
10/31/2000	Tanimoto Bros. 948 River Ave. Gridley, CA 95948	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$200.00	\$200.00	
10/31/2000	David Wong 3719 Hatchers Circle Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	General Partner Dave Wong's Restaurant	\$200.00	\$200.00	
11/01/2000	21st Century PAC (#990682) 7185 Navajo Road, Ste. L San Diego, CA 92119	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
11/01/2000	Mrs. Masako Agari 3933 Fort Donelson Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$300.00	\$550.00	
11/01/2000	Citizens for Andal - 1998 (#970173) 3422 West Hammer Lane, Ste. C-107 Stockton, CA 95219-5493	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$5,000.00	\$5,000.00	
11/01/2000	Citizens for Clem Lee 2023 N. Commerce Street Stockton, CA 95204	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$100.00	\$100.00	

SUBTOTAL \$ 6800.00

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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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</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)
11/01/2000	Double 'L' Farming 6501 Via Del Cerrito Rancho Murieta, CA 95683	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/01/2000	Farmers and Merchants Bank 1020 W. Kettleman Ln. Lodi, CA 95204	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
11/01/2000	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		\$45,000.00	\$145,000.00	
11/01/2000	MDEYEPAC of California (#841539) Independent Expenditure Committee 605 Market St., Ste. 1109 San Francisco, CA 94105-5213	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$5,000.00	\$5,000.00	
11/01/2000	Rose T. Murata 9051 E. Harney Lane Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Homemaker	\$500.00	\$500.00	
11/01/2000	R. Mussi 10,000 South Cal-Pack Road Stockton, CA 95206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Self-Employed	\$50.00	\$200.00	
SUBTOTAL \$				51650.00		

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

**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>10/22/2000</u>	
through <u>12/31/2000</u>	Page <u>16</u> of <u>98</u>

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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)
11/01/2000	James M. Nakamura, D.D.S. 4106 Yacht Harbor Drive Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$200.00	\$200.00	
11/01/2000	Pac West Telecomm, Inc. 1776 West March Lane, Ste. 250 Stockton, CA 95207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$2,000.00	\$2,000.00	
11/01/2000	Carl Rosich, D.D.S. 525 S. Fairmont St., Ste. H Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Dentist Carl Rosich, DDS	\$200.00	\$200.00	
11/01/2000	Francis Ruddle 1402 Arundel Court Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$5.00	\$105.00	
11/02/2000	Enrique G. Bacani 4452 Mallard Creek Circle Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$50.00	\$150.00	
11/02/2000	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		\$500.00	\$1,500.00	

SUBTOTAL \$ 2955.00

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

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

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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</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)
11/02/2000	Michael Borges 4335 Pebble Beach Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$200.00	\$200.00	
11/02/2000	Darryl W. Kitayama, M.D. 832 S. Fairmont Avenue Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/02/2000	D.O. Ford 639 E. Lockeford Street Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Contractor Ford Construction Co. Inc.	\$200.00	\$200.00	
11/02/2000	HAT PAC (#982894) 12067 W. Lammers Road Tracy, CA 95376	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$12,000.00	\$15,000.00	
11/02/2000	Susan Hitchcock 2443 MacArthur Parkway Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	City Council Member City of Lodi	\$100.00	\$100.00	
11/02/2000	Joe Gotelli and Sons 9392 No. Hildreth Lane Stockton, CA 95212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$150.00	

SUBTOTAL \$ 12700.00

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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.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
11/02/2000	Langetwins Partnership 1298 W. Jahant Road Acampo, CA 95220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
11/02/2000	Lodi City Center 12, LLC 2800 W. March Lane, Ste. 360 Stockton, CA 95219	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
11/02/2000	Jefrey L. Mansoor 768 Newbury Street Livermore, CA 94550	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Self-Employed	\$100.00	\$100.00	
11/02/2000	Joe L. Paredes, M.D. 3755 Gleneagles Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Anesthesiologist Anesthesia Consultants Medical Group	\$100.00	\$100.00	
11/02/2000	Philip Ruhl 5609 Pintail Court Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Anesthesiology Consultants Medical Group	\$250.00	\$350.00	
11/03/2000	Lonnie Beck 3114 W. Hammer Lane Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Owner Beck Properties, Inc.	\$5,000.00	\$10,000.00	

SUBTOTAL \$ 7450.00

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

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

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
11/03/2000	Cherokee Memorial Funeral Home P.O. Box 1000 Lodi, CA 95141	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
11/03/2000	Jerome D. Ding 852 W. Menocino Avenue Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$200.00	\$400.00	
11/03/2000	Dirksen Transportation P.O. Box 1450 Manteca, CA 95337	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
11/03/2000	Jim Elson 1808 Edgewood Dr. Lodi, CA 95241	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Insurance Broker MCV Insurance Producers	\$200.00	\$299.00	
11/03/2000	Fieldstead & Company P.O. Box 18679 Irvine, CA 92623	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$10,000.00	\$10,000.00	
11/03/2000	Robert C. Hall 6640 Hawthorn Road Sacramento, CA 95864	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Civil Engineer Self-Employed	\$500.00	\$1,000.00	

SUBTOTAL \$ 12150.00

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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.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
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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)
11/03/2000	Mr. William Kashiwagi P.O. Box 60219 Sacramento, CA 95860	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Insurance Broker Self-Employed	\$100.00	\$200.00	
11/03/2000	Medcore Medical Group 509 W. Weber, Ste. 200 Stockton, CA 95203	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$500.00	
11/03/2000	Arthur Nakashima 5045 E. Morada Lane Stockton, CA 95212	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH	Retired	\$150.00	\$825.00	
11/03/2000	National Republican Congressional Committee (#923281) Non-Federal California 320 First Street, SE Washington, DC 20003	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$50,000.00	\$150,000.00	
11/03/2000	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		\$40,000.00	\$320,000.00	
11/03/2000	Sublaban Inc. dba Lodi Luxury Auto Sales 730 S. Cherokee Lane Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$200.00	\$200.00	

SUBTOTAL \$ 90950.00

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

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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
11/03/2000	Trinkle & Boys Agricultural Flying, Inc. 31244 S. Highway 33 Tracy, CA 95376	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$200.00	
11/04/2000	Henry Teichert 1300 - 41st Street Sacramento, CA 95819	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$100.00	\$100.00	
11/04/2000	Veteran's Press 3508 24th Street Sacramento, CA 95818	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$500.00	
11/05/2000	Thomas R. Bielejeski 5526 E. Morada Lane Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Stockton Orthopedic Medical Group	\$1,000.00	\$1,000.00	
11/05/2000	Joe A. Cotta 9414 Kost Road Galt, CA 95632	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Wine Grape Grower Joe A. Cotta Vineyards Inc.	\$500.00	\$500.00	
11/05/2000	Nicolas W. Felten 1001 W. Pine Street Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$150.00	\$150.00	

SUBTOTAL \$ 2100.00

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

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

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SCHEDULE A (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)
11/05/2000	Norman L. Maley 2688 W. Woodbridge Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Maley Brothers dba Ridenour Vineyards	\$1,000.00	\$1,000.00	
11/05/2000	Southern California Desert Retina Consultants Medical P.O. Box 2467 Palm Springs, CA 92263	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$500.00	
11/05/2000	Richard L. Thawley 931 W. Woodbridge Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	President Richard Thawley & Associates, Inc.	\$5,000.00	\$5,000.00	
11/05/2000	Vienna Convalescent Hospital, Inc. 800 S. Ham Lane Lodi, CA 95242	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$3,000.00	\$3,500.00	
11/05/2000	Shoji Yamada 15406 S. Tracy Boulevard Stockton, CA 95206	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$200.00	\$250.00	
11/05/2000	Yoshio Yamada 15406 Tracy Boulevard Tracy, CA 95376	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Self-Employed	\$200.00	\$800.00	

SUBTOTAL \$ 9900.00

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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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>23</u> of <u>98</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)
11/06/2000	John P. Butorac 3306 Cove Circle Stockton, CA 95204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$250.00	\$500.00	
11/06/2000	Galt Family Optometric Center 730 Spaans Drive Galt, CA 95632	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/06/2000	Lorraine Halvorson 10040 Davis Road Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	
11/06/2000	William E. Halvorson 10040 Davis Road Stockton, CA 95209	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Auto Dealer Prospect Motors	\$100.00	\$100.00	
11/06/2000	Jim Bylsma Dairy 35065 E. Arthur Escalon, CA 95320	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/06/2000	Mel Rapton Honda 2820 Fulton Avenue Sacramento, CA 95821	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,000.00	
SUBTOTAL \$				1650.00		

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>24</u> of <u>98</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)
11/06/2000	Sook Patel 6051 Foppiano Lane Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$200.00	\$200.00	
11/06/2000	Peter De Visser Dairy 21268 E. Avena Avenue Escalon, CA 95320	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$200.00	\$200.00	
11/06/2000	Robert Mondavi Corporation P.O. Box 106 Oakville, CA 94562	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
11/06/2000	John P. Talbot 800 Maplewood Dr. Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Financial Consultant Self-Employed	\$500.00	\$2,400.00	
11/06/2000	Thompson Ranch 7603 S. Jack Tone Road Stockton, CA 95215	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$450.00	
11/07/2000	California Dermatology Society PAC (#840144) 400 Capitol Mall, Ste. 2200 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$500.00	\$500.00	

SUBTOTAL \$ 1900.00

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660

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

**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>10/22/2000</u>	Page <u>25</u> of <u>98</u>
through <u>12/31/2000</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)
11/07/2000	Rudy G. Croce 1548 Stanton Way Stockton, CA 95207	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Accountant Croce & Company Accountancy Corp.	\$100.00	\$100.00	
11/07/2000	Gregg Culhane P.O. Box 2630 Lodi, CA 95241	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$250.00	\$750.00	
11/07/2000	James L. Davidian 1820 Fullerton Ave., Ste. 310 Corona, CA 91719	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$100.00	\$100.00	
11/07/2000	Friends of Brett Granlund (#970041) P.O. Box 1347 Yucaipa, CA 92399	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$19,000.00	\$19,000.00	
11/07/2000	I.B. Benedict Co. P.O. Box 2049 Stockton, CA 95201	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/07/2000	Kenneth C. Jeffers 2000 C Canyon Wood Drive San Ramon, CA 94583	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	\$100.00	\$100.00	

SUBTOTAL \$ 19650.00

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>26</u> of <u>98</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)
11/07/2000	Daniel M. Kunihira 25580 Mandarin Court Loma Linda, CA 92354	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$1,000.00	\$1,000.00	
11/07/2000	Richard Kunihira 2435 Sherwood Lane San Bernardino, CA 92408	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$1,000.00	\$1,000.00	
11/07/2000	Shirou Kunihira P.O. Box 542 Loma Linda, CA 92354	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$1,000.00	\$1,000.00	
11/07/2000	L&L Suppliers, Inc. P.O. Box 1169 Stockton, CA 95201	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
11/07/2000	Lease Development, L.P. P.O. Box 1169 Stockton, CA 95201	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$250.00	\$250.00	
11/07/2000	Dr. Chen Feel Liem 5371 Tudor Rose Glen Stockton, CA 95212	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician San Joaquin Cardiology Medical Group	\$200.00	\$500.00	
SUBTOTAL \$				3700.00		

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>27</u> of <u>98</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Nakanishi or 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)
11/07/2000	H.S. Masaki 5252 Elvas Avenue Sacramento, CA 95819	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Self-Employed	\$100.00	\$150.00	
11/07/2000	William T. Meehleis 1360 Rivergate Drive Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Contractor Meehleis Modular Building, Inc.	\$1,000.00	\$1,000.00	
11/07/2000	Plummer Pontiac Cadillac GMC Inc 1011 S. Cherokee Lane Lodi, CA 95240-4305	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$500.00	\$500.00	
11/07/2000	Stephens Constructions Co., Inc P.O. Box 1867 Lodi, CA 95241	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$1,100.00	
11/07/2000	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	\$100.00	\$500.00	
11/08/2000	Friends of Jim Brulte (#962673) P.O. Box 241 Rancho Cucamonga, CA 01729	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$63,000.00	\$265,000.00	

SUBTOTAL \$ 64800.00

***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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	

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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)
11/09/2000	Behroze F. Buhari 3826 14 Mile Drive Stockton, CA 95219	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Physician Self-Employed	\$500.00	\$500.00	
11/09/2000	Pollination Contracting 1044 Tioga Way Manteca, CA 95336	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
11/17/2000	Daryl Geweke P.O. Box 1210 Lodi, CA 95241	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	President, CEO Geweke Ford, Inc.	\$500.00	\$500.00	
11/17/2000	Deborah L. Gillespie 1054 E. Woodbridge Road Woodbridge, CA 95258	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Homemaker	\$100.00	\$100.00	
11/17/2000	Jane G. Willett 19456 Kevin Court Woodbridge, CA 95258	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Operations Manager G-REM, Inc.	\$100.00	\$100.00	
12/05/2000	Friends of Jim Brulte (#962673) P.O. Box 241 Rancho Cucamonga, CA 01729	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$100,000.00	\$265,000.00	

SUBTOTAL \$ 101300.00

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>29</u> of <u>98</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)
12/06/2000	Superior California State Leadership Fund (#961916) 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$5,000.00	\$5,000.00	
12/21/2000	Friends of Jim Brulte (#962673) P.O. Box 241 Rancho Cucamonga, CA 01729	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		\$2,000.00	\$265,000.00	
12/31/2000	Olympia Anagnos 1019 Interlaken Drive Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Information Requested	\$100.00	\$100.00	
12/31/2000	Lund Enterprises P.O. Box 22 Lodi, CA 95241-0022	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$100.00	\$100.00	
12/31/2000	Ken Nomura 100 Arbusto Circle Sacramento, CA 95831	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH		\$100.00	\$100.00	
12/31/2000	Waste Management 155 N. Redwood Dr., Ste. 250 San Rafael, CA 94903	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		\$1,000.00	\$1,250.00	

SUBTOTAL \$ 8300.00

*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

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>30</u> of <u>98</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 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
11/02/2000	Vellutini Corporation dba Royal Electric Co. & Velcor P.O. Box 231430 Sacramento, CA 95823 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		Due Date N/A Interest Rate 0.00%	5000.00	Calendar Year \$ 6000.00		Calendar Year \$ _____
11/03/2000	Dr. Alan S. Nakanishi 1136 Junewood Ct. Lodi, CA 95240 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH	Physician Delta Eye Med. Group	Due Date N/A Interest Rate 0.00%	5000.00	Calendar Year \$ 57000.00		Calendar Year \$ _____
11/07/2000	Stanley Nakamura 2221 Gambels Way Santa Rosa, CA 95403 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Retired	Due Date 02/01/2001 Interest Rate 0.00%	5000.00	Calendar Year \$ 5125.00		Calendar Year \$ _____
SUBTOTAL				\$	15000.00	\$		\$

Enter (b) on
Summary Page,
Line 17, only.

Loans Received - Part 1 Summary

- 1. Loans of \$100 or more received this period. (Include all Loans Received - Part 1 (a) subtotals.)\$ 117000.00
- 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 \$** 117000.00

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.) \$ 102000.00
- 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 \$** (102000.00)
- 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 \$** 15000.00

May be a negative number.

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

Schedule B - Part I (Continuation Sheet)
Loans Received

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

SCHEDULE B - Part I (cont.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>31</u> of <u>98</u>

NAME OF FILER Nakanishi for Senate	I.D. NUMBER 991831
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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
11/08/2000	Friends of Jim Brulte (#962673) P.O. Box 241 Rancho Cucamonga, CA 01729 <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 %	100000.00	Calendar Year \$ 265000.00		Calendar Year \$ _____
11/22/2000	Wayne C. Johnson & Assoc., Inc. 400 Capitol Mall, Suite 1560 Sacramento, CA 95814 <input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH	Consultant	Due Date N/A Interest Rate 0.00 %	2000.00	Calendar Year \$ 2000.00		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 \$ _____
	<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 \$				102		\$ 267000.00	Enter (b) on Summary Page, Line 17 only.	

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

**Schedule B - Part 3
Annual Report of Outstanding Loans Received**

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

SCHEDULE B - Part 3

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>33</u> of <u>98</u>
I.D. NUMBER 991831	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

FULL NAME OF LENDER	ORIGINAL DATE OF LOAN	AMOUNT OF ORIGINAL LOAN	UNPAID PRINCIPAL	UNPAID INTEREST
Wayne C. Johnson & Assoc., Inc.	11/22/2000	\$2,000.00	\$0.00	\$0.00
Vellutini Corporation dba	11/02/2000	\$5,000.00	\$5,000.00	\$0.00
Friends of Jim Brulte (#962673)	11/08/2000	\$100,000.00	\$0.00	\$0.00
Committee to Elect William J. 'Pete' Knight (#91080418)	11/18/2000	\$36,000.00	\$36,000.00	\$0.00
George D. Chen	09/29/2000	\$10,000.00	\$10,000.00	\$0.00
Stanley Nakamura	11/07/2000	\$5,000.00	\$5,000.00	\$0.00
Dr. Alan S. Nakanishi	09/30/2000	\$1,000.00	\$1,000.00	\$0.00
Dr. Alan S. Nakanishi	11/03/2000	\$5,000.00	\$5,000.00	\$0.00
Dr. Alan S. Nakanishi	06/30/2000	\$8,000.00	\$8,000.00	\$0.00
Attach additional information on appropriately labeled continuation sheets.			TOTAL \$	70000.00

**NOTE: This total should be
the same amount as entered
on the Summary Page,
Column C, Line 2.**

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660

**Schedule C
Non-Monetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>35</u> of <u>98</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

I.D. NUMBER

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)
10/23/2000	California League of Off Road Voters (1014 Eleventh Street, Ste. 140 Sacramento, CA 95814	1224019) <input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		Purchase place on slate mailer	\$500.00	\$500.00	
10/27/2000	California Republican Party (#810163) 1903 West Magnolia Blvd. Burbank, CA 91506	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		Printing & mailing of brochure	\$26,708.38	\$352,136.51	
11/02/2000	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 of a mail piece	\$473.17	\$352,136.51	
11/04/2000	Diversified Collection Services, Inc. 555 McCormick Street San Leandro, CA 94577	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH		Phonebanks 11/4/2000 - 11/7/2000	\$11,000.00	\$11,000.00	
11/06/2000	Carl Elkins P.O.Box 322 Victor, CA 95253	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH	Farmer Self-Employed	Newspaper ad in Stockton Record	\$1,567.50	\$1,742.50	
SUBTOTAL \$					40249.05		

Schedule C Summary

- Amount received this period - nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.) \$ 43249.05
- Amount received this period - unitemized nonmonetary contributions of less than \$..... \$ 0.00
- 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 \$** 43249.05

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

**Schedule C (Continuation Sheet)
Non-Monetary Contributions Received**

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

SCHEDULE C (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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	I.D. NUMBER 991831

NAME OF FILER
Nakanishi or 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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
11/29/2000	HAT PAC (#982894) 12067 W. Lammers Road Tracy, CA 95376	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH		Payment to Wayne Johnson & Assoc. for various outstanding invoices	\$3,000.00	\$15,000.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH					
		<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 \$					3000.00		

*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		CALIFORNIA FORM 460
from	10/22/2000	
through	12/31/2000	Page 37 of 98
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

- | | | |
|---|---|---|
| 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
Sue Blake 9114 Truillo Way Sacramento, CA 95826			Fee and Expenses	\$2,109.21
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL			\$50,000.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	OFC			\$11.40

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

SUBTOTAL \$ 52120.61

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 932423.94
2. Unitemized payments made this period of under \$100.	\$ 1031.93
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 \$ 933455.87

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 <u>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	OFC			\$26.69
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD			\$12,084.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD			\$51,062.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD			\$1,258.18
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL			\$23,198.75

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

SUBTOTAL \$ 87629.62

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL		\$56.49
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL		\$1,493.56
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POL		\$13,765.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO		\$2,943.50
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO		\$5,458.00

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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO		\$5,458.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	CNS		\$2,000.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS		\$12.50
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS		\$1,995.89
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS		\$1,880.31

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

SUBTOTAL \$ 11346.70

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
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS			\$3,595.30
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS			\$17,517.81
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$1,146.92
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$4,645.88
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$3,418.46

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

SUBTOTAL \$ 30324.37

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$18,262.62
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$832.77
Stephen Reid 1007 S. Country Club Blvd. Stockton, CA 95207	OFC			\$10.76
San Joaquin County Registrar of Voters 212 North San Joaquin Street Stockton, CA 95201	OFC			\$50.00
US Postmaster Elk Grove MPO Elk Grove, CA 95624	POS			\$33.00

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

SUBTOTAL \$ 19189.15

**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
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Nakanishi for Senate		991831

SEE INSTRUCTIONS ON REVERSE

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
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$14,284.54
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$74.06
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL			\$366.99
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT			\$20,853.01
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$8,932.29

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

SUBTOTAL \$ 44510.89

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

SEE INSTRUCTIONS ON REVERSE

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)* | PHC 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
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$8,856.08
US Postmaster Elk Grove MPO Elk Grove, CA 95624	POS			\$55.50
The Donegal Group 3508 24th Street Sacramento, CA 95818			Commission, printing, postage and event expenses	\$7,353.89
AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110	OFC			\$24.84
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376	CNS			\$2,000.00

**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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
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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	CNS			\$5,000.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814			Postage, TV production, printing, lawn signs, TV buy, phonebanks and consulting fee	\$171,581.07
Stephen Reid 1007 S. Country Club Blvd. Stockton, CA 95207			Postage, office supplies and sign supplies	\$4,386.37
Tony Siciliani 212 Selby Ranch Road #7 Sacramento, CA 95864	LIT			\$16,750.00
Farmers and Merchants Bank 1020 W. Kettleman Ln. Lodi, CA 95204	OFC			\$13.50

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

SUBTOTAL \$ 197730.94

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 <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$8,404.00
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$9,283.44
AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110	OFC			\$110.29
Sue Blake 9114 Truillo Way Sacramento, CA 95826	PRO			\$2,000.00
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376			Event expenses, office supplies and postage	\$1,612.01

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

SUBTOTAL \$ 21409.74

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 <u>11/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)* | PHC 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	AMOUNT PAID
Vona Copp 8958 Ivanpah Court Elk Grove, CA 95624			Treasurer fee and expenses	\$3,827.37
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814			Literature, delivery & office expenses	\$57,440.04
Andrew Mercy 642 Adams Street Davis, CA 95616			Fee and expenses	\$1,793.30
Stephen Reid 1007 S. Country Club Blvd. Stockton, CA 95207			Fee, mileage, postage & office supplies	\$7,026.87
John L. Rothra 8896 Liscarney Way Sacramento, CA 95828			Fee, mileage, office supplies and miscellaneous expenses	\$3,312.57

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814		Literature, TV Production, delivery, postage & phonebanks	\$121,289.73
Farmers and Merchants Bank 1020 W. Kettleman Ln. Lodi, CA 95204	OFC	Bank Fee	\$18.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814		Literature, postage, meeting expense & phonebanks	\$39,288.97
US Postmaster Elk Grove MPC Elk Grove, CA 95624	POS		
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814		Literature, Phonebanks, Delivery & Radio Production	\$143,444.13

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

SUBTOTAL \$ 304073.83

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

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

SCHEDULE E (CONT.)

Statement covers period		CALIFORNIA FORM 460
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Nakanishi for Senate		991831

SEE INSTRUCTIONS ON REVERSE

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
Sue Blake 9114 Truillo Way Sacramento, CA 95826		Office supplies and food for volunteers	\$321.29
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376		Mileage, volunteer expenses and sign expenses	\$888.62
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376		Mileage	\$515.84
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376		Mileage	\$1,007.04
Vona Copp 8958 Ivanpah Court Elk Grove, CA 95624		Treasurer fee and expenses	\$2,500.00

**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
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Nakanishi for Senate		991831

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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 |
| 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
Dane & Associates 4259 El Carnal Way Las Vegas, NV 89121	POL			\$7,729.87
Steven Ding 2696 Eagle Rock Circle Stockton, CA 95209	CNS			\$1,000.00
David S. Loudon 1018 Pearl Street Santa Monica, CA 90405	TRS		Nov 3-7, 2000 - Los Angeles to Sacramento to Los Angeles	\$878.16
Stephen Reid 1007 S. Country Club Blvd. Stockton, CA 95207			Postage, office supplies, food for volunteers & phonebank expenses	\$7,351.50
John L. Rothra 8896 Liscarney Way Sacramento, CA 95828			Fee, mileage and office supplies	\$1,415.76

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

SUBTOTAL \$ 18375.29

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LIT campaign literature and mailings
MTG meetings and appearances

OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs

RFD returned contributions
SAL campaign workers salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging and meals (explain)
TRS staff/spouse travel, lodging and meals (explain)
TSF transfer between committees of the same candidate/sponsor
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
The Donegal Group 3508 24th Street Sacramento, CA 95818	PRO			\$3,512.25
Farmers and Merchants Bank 1020 W. Kettleman Ln. Lodi, CA 95204	OFC		Wire transfer fee	\$30.00
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$6,750.72
Lisa Marie Ables 260 Northgate Ave., #10 Manteca, CA 95337	PHO			\$120.00
Kim Alexander P.O. Box 385 Burson, CA 95225	PHO			\$160.00

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

SUBTOTAL \$ 10572.97

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 <u>10/22/2000</u>	CALIFORNIA FORM 460
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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
Virginia Alexander P.O. Box 385 Burston, CA 95225	PHO			\$160.00
Stephani Bronzi 5617 Turtle Valley Dr. Stockton, CA 95207	PHO			\$150.00
Belynda Campbell 14501 Pinewood Dr. Lathrop, CA 95330	PHO			\$120.00
Donald W. Campbell 14501 Pinewood Drive Lathrop, CA 95330	PHO			\$120.00
Donald W. Campbell 14501 Pinewood Drive Lathrop, CA 95330	PHO			\$80.00

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

SUBTOTAL \$ 630.00

**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>10/22/2000</u>	CALIFORNIA FORM 460
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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
Erika Casillas 1228 Inyo Avenue Modesto, CA 95358	PHO		\$110.00
Cherie Christi 4735 Edgebrook Avenue Stockton, CA 95206	PHO		\$160.00
Marie-Cel Dychitan 2515 South Lincoln Street Stockton, CA 95206	PHO		\$160.00
Marie-Cel Dychitan 2515 South Lincoln Street Stockton, CA 95206	PHO		\$20.00
Sophia Garcia 435 N. Grant Ave. Manteca, CA 95336	PHO		\$120.00

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

SUBTOTAL \$ 570.00

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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Margaret Guil 573 Acacia Ave. Manteca, CA 95336	PHO			\$120.00
Veronica Huizar 209 Spruce Street Modesto, CA 95351	PHO			\$110.00
Brittany Kell P.O. Box 1347 Linden, CA 95236	PHO			\$160.00
Brittany Kell P.O. Box 1347 Linden, CA 95236	PHO			\$10.00
Kerri Lamas P.O. Box 1925 Manteca, CA 95336	PHO			\$20.00

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

SUBTOTAL \$ 420.00

**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 22 2000</u>	CALIFORNIA FORM 460
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NAME OF FILER

Nakanishi for Senate

CMP campaign paraphernalia/misc.

CNS campaign consultants

CTB contribution (explain nonmonetary)*

CVC civic donations

FND fundraising events

IND independent expenditure supporting/opposing others (explain)*

LIT campaign literature and mailings

MTG meetings and appearances

OFC office expenses

PET petition circulating

PHO phone banks

POL polling and survey research

POS postage, delivery and messenger services

PRO professional services (legal, accounting)

PRT print ads

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers salaries

TEL t.v. or cable airtime and production costs

TRC candidate travel, lodging and meals (explain)

TRS staff/spouse travel, lodging and meals (explain)

TSF transfer between committees of the same candidate/sponsor

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
Kerri Lamas P.O. Box 1925 Manteca, CA 95336	PHC			\$140.00
Melanie Lurkins	PHO			\$150.00
Alice P. Medina 574 Button Ave., #108 Manteca, CA 95336	PHO			\$160.00
Angie Medina 574 Button Ave., #176 Manteca, CA 95336	PHO			\$160.00
Angie Medina 574 Button Ave., #176 Manteca, CA 95336	PHO			\$20.00

**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>10/22/2000</u>	CALIFORNIA FORM 460
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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 |
| 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
Albert Moore 1435 N. Tracy Blvd. Tracy, CA 95376	PHO			\$120.00
April Ogo 6 West Main St., Apt. 1013 Stockton, CA 95202	PHO			\$160.00
April Ogo 6 West Main St., Apt. 1013 Stockton, CA 95202	PHO			\$60.00
Jay Patterson 1945 Yellow Pine Drive Modesto, CA 95351	PHO			\$80.00
Jay Patterson 1945 Yellow Pine Drive Modesto, CA 95351	PHO			\$40.00

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

SUBTOTAL \$ 460.00

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.)

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SEE INSTRUCTIONS ON REVERSE

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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| 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
Lori Strom 15820 S. Harlan Rd., #60 Lathrop, CA 95330	PHO			\$130.00
Adam Talley 15820 S. Marlan Rd., #54 Lathrop, CA 95330	PHO			\$160.00
Adam Talley 15820 S. Marlan Rd., #54 Lathrop, CA 95330	PHO			\$80.00
Michele Vielma 885 Hacienda Ave. Manteca, CA 95336	PHO			\$120.00
Elizabeth Warda 1521 Kentwood Ave. Modesto, CA 95355	PHO			\$160.00

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

SUBTOTAL \$ 650.00

Schedule E (Continuation Sheet)
Payments Made

Type or print in ink.
Amounts may be rounded
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SCHEDULE E (CONT.)

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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
Robert Wert P.O. Box 1042 Salida, CA 95368	PHO			\$160.00
Robert Wert P.O. Box 1042 Salida, CA 95368	PHO			\$60.00
Farmers and Merchants Bank 1020 W. Kettleman Ln. Lodi, CA 95204	OFC		Bank charge	\$15.00
AT&T Wireless Services P.O. Box 78110 Phoenix, AZ 85062-8110	OFC			\$149.14
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376			Election night expenses	\$399.71

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

SUBTOTAL \$ 783.85

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

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

SCHEDULE E (CONT.)

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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 |
| 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
Steven Ding 2696 Eagle Rock Circle Stockton, CA 95209	PHC		\$40.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814		Consulting fee & phonebanks	\$1,411.13
Andrew Mercy 642 Adams Street Davis, CA 95616		Fee, mileage and office expenses	\$631.95
Stephen Reid 1007 S. Country Club Blvd. Stockton, CA 95207		Fee, mileage, volunteer expenses & phonebanks	\$3,784.46
Remedy Temp Agency File #92460 Los Angeles, CA 90074-2460	PHC		\$2,300.00

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

SUBTOTAL \$ 8167.54

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

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

SCHEDULE E (CONT.)

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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 |
| 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	OFC		\$18.00
Richard C. Staats 5850 Happy Pines Drive Foresthill, CA 95631	TRS	November 6-7, 2000 - Lodging	\$170.64
Richard C. Staats 5850 Happy Pines Drive Foresthill, CA 95631	CNS		\$2,000.00

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

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

SCHEDULE F

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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD	51062.00	0.00	51062.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS	3595.30	0.00	3595.30	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS	1880.31	0.00	1880.31	0.00
SUBTOTAL \$		56537.61 \$	0.00 \$	56537.61 \$	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 \$** 2617.11
- 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 \$** 219120.64
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -216503.53

**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>10/22/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO	2943.50	0.00	2943.50	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO	5458.00	0.00	5458.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	PHO	5458.00	0.00	5458.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POL	13765.00	0.00	13765.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT	3418.46	0.00	3418.46	0.00
SUBTOTAL		\$ 31042.96	\$ 0.00	\$ 31042.96	\$ 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>10/22/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS	1995.89	0.00	1995.89	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT	832.77	0.00	832.77	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	POS	17517.81	0.00	17517.81	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL	23198.75	0.00	23198.75	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT	18262.62	0.00	18262.62	0.00
SUBTOTAL		\$ 61807.84	\$ 0.00	\$ 61807.84	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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	CNS	2000.00	0.00	2000.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD	1258.18	0.00	1258.18	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL	1493.56	0.00	1493.56	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	RAD	12084.00	0.00	12084.00	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT	4645.88	0.00	4645.88	0.00
SUBTOTAL \$		21481.62 \$	0.00 \$	21481.62 \$	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>10/22/2000</u>	CALIFORNIA FORM 460
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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	(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	LIT	1146.92	0.00	1146.92	0.00
Sue Blake 9114 Truillo Way Sacramento, CA 95826	Fee and Expenses	2109.21	0.00	2109.21	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	TEL	366.99	0.00	366.99	0.00
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	LIT	20853.01	0.00	20853.01	0.00
The Donegal Group 3508 24th Street Sacramento, CA 95818	Commission, printing, postage and event expenses	7353.89	0.00	7353.89	0.00
SUBTOTAL \$		31830.02 \$	0.00 \$	31830.02 \$	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>10/22/2000</u>	CALIFORNIA FORM 460
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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) |
| 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
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376	CNS	5000.00	0.00	5000.00	0.00
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376	CNS	2000.00	0.00	2000.00	0.00
Dane & Associates 4259 El Carnal Way Las Vegas, NV 89121	POL	7729.87	0.00	7729.87	0.00
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376	Mileage	1007.04	0.00	1007.04	0.00
Victoria Caldeira 12067 West Lammers Road Tracy, CA 95376	Mileage	515.84	0.00	515.84	0.00
SUBTOTAL \$		16252.75 \$	0.00 \$	16252.75 \$	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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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) |
| 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
Remedy Temp Agency File #92460 Los Angeles, CA 90074-2460	PHO	0.00	400.00	0.	400.00
The Donegal Group 3508 24th Street Sacramento, CA 95818	PRO		967.50		967.50
Johnson Clark Associates 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	OFC	0.00	49.62	0.00	49.62
Pacific Bell Payment Center Sacramento, CA 95887-0001	OFC		101.13		101.13
AT&T P.O. Box 78522 Phoenix, AZ 85062	OFC	0.00	686.01	0.00	686.01
SUBTOTAL \$		0.00 \$	2204.26 \$	0.00 \$	2204.26

**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>10/22/2000</u>	CALIFORNIA FORM 460
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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
AT&T P.O. Box 78522 Phoenix, AZ 85062	OFC	0.00	32.26	0.00	32.26
Remedy Temp Agency File #92460 Los Angeles, CA 90074-2460	PHO	0.00	276.60	0.00	276.60
SUBTOTAL		\$ 0.00	\$ 308.86	\$ 0.00	\$ 308.86

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>10/22/2000</u>	CALIFORNIA FORM 460
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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Sue Blake

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
Straw Hat Pizza Mather Field Rancho Cordova, CA		Pizza for Volunteers	\$179.55

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ 179.55

*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>10/22/2000</u>	CALIFORNIA FORM 460
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NAME OF FILER

Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Victoria Caldeira

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			\$155.10
Staples SWC I-205 Grant Line Road Tracy, CA	OFC			\$145.61
US Postmaster Calaveras Station 1048 W. Robinhood Dr. Stockton, CA 95207	POS			\$264.00
US Postmaster Calaveras Station 1048 W. Robinhood Dr. Stockton, CA 95207	POS			\$825.00
Pizza Junction 6105 N. El Dorado Stockton, CA			Election night expenses	\$278.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 1667.71

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)

*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
KCRA 3 Television Circle Sacramento, CA 95814	TEL			\$20,357.50
KOVR 2713 KOVR Drive West Sacramento, CA 95605	TEL			\$11,432.50
KXTV 400 Broadway Sacramento, CA 95801	TEL			\$10,710.00
Cable Time 350 Sansome, Ste. 200 San Francisco, CA 94104	TEL			\$10,625.00
Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758	PHO			\$150.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 53275.00

* 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 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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)

*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
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	CMP	Lawn Signs	\$1,500.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT		\$1,833.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT		\$2,390.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT		\$13,810.00
Imageries 24 Lake Harbor Ct. Sacramento, CA 95831	TEL		\$505.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 20038.00

* 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 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>73</u> of <u>98</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
JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670	LIT			\$16,613.00
KCRA 3 Television Circle Sacramento, CA 95814	TEL			\$33,957.50
KMAX 500 Media Place Sacramento, CA 95815	TEL			\$765.00
KOVR 2713 KOVR Drive West Sacramento, CA 95605	TEL			\$5,440.00
KXTV 400 Broadway Sacramento, CA 95801	TEL			\$2,295.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 59070.50

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

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>74</u> of <u>98</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
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$4,524.52
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$5,850.52
Pacific Satellite Connection 1121 L Street, Ste. 109 Sacramento, CA 95814	TEL			\$1,537.90
John Sagissor E. 9918 Trophy Trail Reedsburg, WI 53959	LIT			\$150.00
Spectrum Films 11431 Sunrise Gold Circle, #D Rancho Cordova, CA 95742	TEL			\$605.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 12667.94

* 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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
Page <u>75</u> of <u>98</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)

*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
Studio Z Recording, Inc. 1030 48th Street Sacramento, CA 95819	TEL			\$551.94
Studio Z Recording, Inc. 1030 48th Street Sacramento, CA 95819	TEL			\$122.15
Tony Siciliani 212 Selby Ranch Road #7 Sacramento, CA 95864	LIT			\$13,452.38
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$3,173.50
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$1,557.42

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 18857.39

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>76</u> of <u>98</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 |
| FND fundraising events | POL polling and survey research | TRC candidate travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TRS staff/spouse travel, lodging and meals (explain) |
| LIT campaign literature and mailings | PRO professional services (legal, accounting) | TSF transfer between committees of the same candidate/sponsor |
| MTG meetings and appearances | PRT print ads | VOT voter registration |
| | 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
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$7,590.64
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$17,388.56
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$279.62
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$269.03
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$159.87

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 25687.72

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
Page <u>77</u> of <u>98</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) |

*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
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$323.97
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,411.80
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,467.10
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$589.87
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$13,810.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 17602.74

*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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	

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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
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$555.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$14,260.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$13,590.30
JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670	POS			\$150.00
Pacific Bell Wireless Payment Center P.O. Box 989049 Sacramento, CA 95798	OFC			\$250.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 28805.30

* 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 10/22/2000

through 12/31/2000

**CALIFORNIA
FORM 460**

Page 79 of 98

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) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tony Siciliani 212 Selby Ranch Road #7 Sacramento, CA 95864	LIT			\$11,074.24
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,470.63
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,083.95
California Image Associates 11333 Sunrise Park Drive Rancho Cordova, CA 95742	TEL			\$1,159.73

as reported on Schedule E

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**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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
Page <u>80</u> of <u>98</u>	
I.D. NUMBER	

NAME OF FILER

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
California Image Associates 11333 Sunrise Park Drive Rancho Cordova, CA 95742	TEL			
Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758	PHO			\$250.00
Feather, Hodges & Larson 7320 N. Dreamy Draw Dr. Phoenix, AZ 85020	PHO			\$17,058.48
JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670	LIT			\$19,897.59
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$33,467.84
Attach additional information on appropriately labeled continuation sheets.				SUBTOTAL* \$ 73160.56

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>81</u> of <u>98</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)

*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
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$4,716.16
Spectrum Films 11431 Sunrise Gold Circle, #D Rancho Cordova, CA 95742	LIT			\$460.00
Studio Z Recording, Inc. 1030 48th Street Sacramento, CA 95819	POS			\$139.60
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$17,212.63
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$627.65

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 23156.04

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>92</u> of <u>99</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
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHC			\$1,114.44
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHC			\$1,281.07
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,411.80
Cattlemens 12409 Folsom Blvd. Rancho Cordova, CA 95670	MTG			\$134.43
Future Film 2311 C Street Sacramento, CA 95816	LIT			\$162.70

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* 4104.44

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
Page <u>83</u> of <u>98</u>	I.D. NUMBER 991831

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) |
| 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
JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670				
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$4,557.68
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			\$2,655.90
Simplified Marketing 37 E. Center Street, Ste. 206 Provo, UT 84606	PHO			\$2,748.96
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 37083.80

* 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	CALIFORNIA FORM 460
from <u>10/22/2000</u>	
through <u>12/31/2000</u>	Page <u>84</u> of <u>98</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) |

*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
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,411.80
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$265.59
California Image Associates 11333 Sunrise Park Drive Rancho Cordova, CA 95742	POS			\$167.01
Maya Clark 5613 Laguna Oaks Dr. Elk Grove, CA 95758	PHO			\$200.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$400.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 2444.40

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$13,506.24
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	POS			\$300.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	POS			\$380.00
G. Strahan & Associates 7752 Robert's River Way Sacramento, CA 95831	LIT			\$7,695.00
JC Evans Communications 2358 Pez Vela Place Gold River, CA 95670	LIT			\$17,200.95

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 39082.19

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>86</u> of <u>98</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) |

*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
KCTC 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841	RAD			\$382.50
KDND 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841	RAD			\$561.00
KFIA Radio 1425 River Park Drive, Ste. 520 Sacramento, CA 95815	RAD			\$357.00
KFIV 2121 Lancey Drive Modesto, CA 95355	RAD			\$548.25
KHOP Radio 1581 Cummins Drive, Ste. 135 Modesto, CA 95351	RAD			\$362.10

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 2210.85

*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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
	Page <u>87</u> of <u>98</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)

*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
KJSN 2121 Lancey Drive Modesto, CA 95355	RAD			\$923.10
KKME Radio 2121 Lancey Drive Modesto, CA 95355	RAD			\$765.00
KNCI Radio 5244 Madison Avenue Sacramento, CA 95841	RAD			\$1,402.50
KOSO 2121 Lancey Drive Modesto, CA 95355	RAD			\$884.00
KQOD 2121 Lancey Drive Modesto, CA 95355	RAD			\$714.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 4688.60

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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, ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KSSJ 5345 Madison Avenue, Ste. 100 Sacramento, CA 95841	RAD			
KTKZ 1425 River Park Drive, Ste. 520 Sacramento, CA 95815	RAD			\$303.45
KXOA 5244 Madison Avenue Sacramento, CA 95841	RAD			\$612.00
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			
Meridian Group 5111 N. 10th Street McAllen, TX 78504	PHO			

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 43878.83

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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) |

*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
Simplified Marketing 37 E. Center Street, Ste. 206 Provo, UT 84606	PHO			\$2,070.50
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$17,070.83
US Postmaster State Capitol Branch Sacramento, CA 95814	POS			\$9,685.51
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$225.00
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$1,266.92

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 30318.76

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	PHO			\$186.44
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$1,191.01

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 5034.49

* 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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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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
Voter Link, Inc. 245 Fischer Avenue, C-3 Costa Mesa, CA 92626	LIT			\$615.85
John Feliz 1840 Westminster Court Carmichael, CA 95608	CNS			\$500.00
Simplified Marketing 37 E. Center Street, Ste. 206 Provo, UT 84606	PHO			\$954.00
SUBTOTAL*				\$ 2069.85

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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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NAME OF FILER
Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
David S. Loudon

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
Alamo Car Rental	TRS	Car Rental	\$229.56
Radisson Hotel Stockton, CA	TRS	Room Charge	\$453.60
Southwest P.O. Box 36649 Dallas, TX 76235	TRS	Airfare	\$195.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 878.16

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**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>10/22/2000</u>	
through <u>12/31/2000</u>	Page <u>93</u> of <u>98</u>
I.D. NUMBER 991831	

NAME OF FILER
 Nakanishi for Senate

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Staples 2415 West Kettleman Lane Lodi, CA 95242	OFC			\$406.76
US Postmaster 3131 Arch Airport Stockton, CA 95213	POS			\$400.00
US Postmaster 3131 Arch Airport Stockton, CA 95213	POS			\$500.00
US Postmaster 3131 Arch Airport Stockton, CA 95213	POS			\$3,000.00
Kinko's 1061 W. March Lane Stockton, CA 95207	OFC			\$761.79

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 5068.55

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

Type or print in ink.
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SCHEDULE G (CONT.)

Statement covers period from <u>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
Page <u>94</u> of <u>98</u>	I.D. NUMBER 991831

NAME OF FILER
 Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 Stephen 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) |

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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 3131 Arch Airport Stockton, CA 95213	POS			\$477.93
Dolores Arrequin P.O. Box 2924 Orangevale, CA 95662	PHO			\$820.00
Home Depot 3818 E. Hammer Lane Stockton, CA 95212	OFC			\$307.25
Lions Society 3319 N. Pershing Ave. Stockton, CA 95204	PHO			\$1,425.00
OfficeMax 4733 Quail Lakes Dr. Stockton, CA	OFC			\$105.87

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 3136.05

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

**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>10/22/2000</u> through <u>12/31/2000</u>	CALIFORNIA FORM 460
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NAME OF FILER Nakanishi for Senate	I.D. NUMBER 991831
NAME OF AGENT OR INDEPENDENT CONTRACTOR Stephen 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) |
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| LIT campaign literature and mailings | PRT print ads | VOT voter registration |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Remedy Temp Agency File #92460 Los Angeles, CA 90074-2460	PHO		\$3,000.00
Skandata P.O. Box 833114 Miami, FL 33283	OFC		\$700.00
US Postmaster Calaveras Station 1048 W. Robinhood Dr. Stockton, CA 95207	POS		\$264.00
Diversified Collection Services, Inc. 555 McCormick Street San Leandro, CA 94577	PHO		\$885.00
Food 4 Less 255 E. March Lane Stockton, CA 95207		Volunteer expenses	\$208.85

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 5057.85

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**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>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
Page <u>96</u> of <u>98</u>	
I.D. NUMBER 991831	

NAME OF FILER
Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
John L. Rothra

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) |
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Staples 2415 West Kettleman Lane Lodi, CA 95242	OFC		\$406.76

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL* \$ 406.76

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

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SCHEDULE G (CONT.)

Statement covers period from <u>10/22/2000</u>	CALIFORNIA FORM 460
through <u>12/31/2000</u>	
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I.D. NUMBER 991831	

NAME OF FILER
 Nakanishi for Senate

NAME OF AGENT OR INDEPENDENT CONTRACTOR
 Richard C. Staats

- | | | |
|---|---|---|
| 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 |
| LJT 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
Radisson Hotel Stockton, CA	TRS			\$170.64

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**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>10/22/2000</u> through <u>12/31/2000</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 AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
11/17/2000	Team California (#598036) 400 Capitol Mall, Ste. 1560 Sacramento, CA 95814	Refund for lower mail count	\$460.00
12/31/2000	US Postmaster 2700 Campus Drive San Mateo, CA 94497	Postage permit refund	\$2,295.10
12/31/2000	US Postmaster 2700 Campus Drive San Mateo, CA 94497	Postage permit refund	\$392.44

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 3147.54

Schedule I Summary

1. Increases to cash of \$100 or more this period.	\$ <u>3147.54</u>
2. Unitemized Increases to cash under \$100 this period.	\$ <u>0.00</u>
3. Total of all interest received this period on loans made to others. (Schedule H, Part 2 (b).)	\$ <u>0.00</u>
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)	TOTAL \$ <u>3147.54</u>

FPPC Form 460 (8/99)

For Technical Assistance: 916/322-5660