

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

Type or print in Ink.

COVER PAGE

Date Stamp RECEIVED 2002 JUL 29 PM 2:05 CITY CLERK CITY OF LODI	CALIFORNIA 2001/02 FORM 460
Page _____ of _____	For Official Use Only

Statement covers period from <u>01/01/02</u> through <u>06/30/02</u>	Date of election if applicable: (Month, Day, Year) <u>11/05/02</u>
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SEE INSTRUCTIONS ON REVERSE

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

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

2. Type of Statement:

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

3. Committee Information

I.D. NUMBER
1244696

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

JOHN BECKMAN
COMMITTEE TO ELECT JOHN BECKMAN

STREET ADDRESS (NO P.O. BOX)

1022 DOWNING DRIVE

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LODI	CA	95242	209-333-5325

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

SAMUEL TOLSON

MAILING ADDRESS

431-B SOUTH HAM LANE

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LODI	CA	95242	209-334-1065

NAME OF ASSISTANT TREASURER, IF ANY

ROMANA ZAMORA

MAILING ADDRESS

431-B SOUTH HAM LANE

CITY	STATE	ZIP CODE	AREA CODE/PHONE
LODI	CA	95242	209-334-1065

OPTIONAL: FAX / E-MAIL ADDRESS

209-333-1040 kpt1@pacbell.net

4. Verification

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

Executed on July 29, 2002
Date

Executed on 7-27-2002
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

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

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
JOHN BECKMAN

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
LODI CITY COUNCIL

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
1022 DOWNING DRIVE LODI CA 95242

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

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

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.
NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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7.

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

Attach continuation sheets if necessary

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>01/01/02</u> through <u>06/30/02</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

JOHN BECKMAN - COMMITTEE TO ELECT JOHN BECKMAN

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL O'DATE
1. Monetary Contributions Schedule A, Line 3	\$ 8,977.00	\$ 8,977.00
2. Loans Received Schedule B, Line 3	-0-	-0-
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 8,977.00	\$ 8,977.00
4. Nonmonetary Contributions Schedule C, Line 3	700.00	700.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 9,677.00	\$ 9,677.00

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

Expenditures Made

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL O'DATE
6. Payments Made Schedule E, Line 4	\$ 2,210.87	\$ 2,210.87
7. Loans Made Schedule H, Line 3	-0-	-0-
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 2,210.87	\$ 2,210.87
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-0-	-0-
10. Nonmonetary Adjustment Schedule C, Line 3	-0-	-0-
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 2,210.87	\$ 2,210.87

**Expenditure Limit Summary for State
Candidates**

22. Cumulative Expenditures Made*
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ -0-
13. Cash Receipts Column A, Line 3 above	8,977.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	-0-
15. Cash Payments Column A, Line 8 above	2,210.87
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 6,766.13

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

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

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ -0-

Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ -0-
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ -0-

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period
from 1/1/2002
through 6/30/2002

CALIFORNIA FORM **460**

Page _____ of _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

John Beckman - Committee to Elect John Beckman

I.D. NUMBER
1244696

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/3/2002	John Beckman 1022 Downing Drive Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Senior Field Represent Assembly Member Anthony Pescetti	100.00	100.00	100.00
4/18/2002	Frank and Helen Alegre PO Box 2101 Lodi, CA 95241	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Alegre Trucking	500.00	500.00	500.00
5/6/2002	Ken Vogel 7322 Pezzi Road Stockton, CA 95215	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice Principal Lodi Unified School District	100.00	100.00	100.00
5/15/2002	Bobby and Sharon Renschler 550 York Street Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Attorney	100.00	100.00	100.00
5/17/2002	John Booker 809 Sylvan Avenue #101 Modesto, CA 95350	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Architect Booker Gery Hickman	100.00	100.00	100.00
SUBTOTAL \$				900.00		

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 6950.00
- Amount received this period – unitemized contributions of less than \$100 \$ 2027.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 8977.00

***Contributor Codes**
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2002</u> through <u>6/30/2002</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

NAME OF FILER

John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/21/2002	Joe Handel 1133 Chateau Court Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed	100.00	100.00	100.00
5/23/2002	Ronald and Kathy Beckman 111 North Church Street Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Attorney	500.00	500.00	500.00
5/30/2002	Roger and Biff Baffoni 1175 Orangewood Drive Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Baffoni Properties Self Employed	100.00	100.00	100.00
5/30/2002	Fred and Vickie Mettler 1017 South Pleasant Avenue Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Winery Manager Eastside Winery	50.00	50.00	50.00
5/30/2002	Fred and Vickie Mettler 1017 South Pleasant Avenue Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Winery Manager Eastside Winery	100.00	150.00	150.00
SUBTOTAL \$				850.00		

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(other than PTY or SCC)
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**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>01/01/02</u> through <u>06/30/02</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

NAME OF FILER

John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/30/2002	Ron and Susan Williamson 1723 Windjammer Court Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Lodi Unified School District	100.00	100.00	100.00
6/1/2002	Jack and Charlyn Lauchland 15766 North DeVries Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Farmer	1,000.00	1,000.00	1,000.00
6/1/2002	Dick Sanborn PO Box 1057 Lodi, CA 95241	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Sanborn Chevrolet	100.00	100.00	100.00
6/3/2002	Peter and Alice Bregman 11701 East Kettleman Lane Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	100.00
6/4/2002	John and Edyth Ledbetter PO Box 340 Victor, CA 95253 Vittor, CA 95253	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Farmer Vino Farms	100.00	100.00	100.00
SUBTOTAL \$				1,400.00		

*Contributor Codes
IND - Individual
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 (other than PTY or SCC)
OTH - Other
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SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/02</u> through <u>06/30/02</u>	CALIFORNIA FORM 460
	Page _____ of _____
I.D. NUMBER 1244696	

NAME OF FILER
John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE •	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/6/2002	Dodie Dayton 539 Willow Glen Drive Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	100.00
6/12/2002	Eric and Sharon Daegling 1642 Timberlake Circle Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Branch Manager Bank of Stockton	100.00	100.00	100.00
6/14/2002	David Beckman PO Box 582 Lodi, CA 95241	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Teacher Lodi Unified School District	100.00	100.00	100.00
6/15/2002	Nick and Delores Spanos 306 Shady Acres Drive Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Lakewood Drug	500.00	500.00	500.00
6/17/2002	Charlene Lange 1298 West Jahant Road Acampo, CA 95220	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Langetwins Partnershi Farmer	250.00	250.00	250.00
SUBTOTAL \$				1,050.00		

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IND - Individual
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(other than PTY or SCC)
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SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	01/01/02	
through	06/30/02	Page _____ of _____
NAME OF FILER		I.D. NUMBER
John Beckman - Committee to Elect John Beckman		1244696

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/18/2002	Alan Vallow 13 South Fairmont Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Utility Director City of Lodi	150.00	150.00	150.00
6/18/2002	Joe and Sherry Cotta 9414 Kost Road Galt, CA 95632	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Farmer	500.00	500.00	500.00
6/18/2002	Penny Beckman 1022 Downing Drive Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Nurse Dameron Hospital	500.00	500.00	500.00
6/18/2002	Robert and Susan Patrick 2848 Applewood Drive Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Lodi Chamber of Commerce	100.00	100.00	100.00
6/19/2002	Fran and Roxie Hartwick 20259 North Dustin Road Acampo, CA 95220	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Lodi Memorial Hospital	100.00	100.00	100.00
SUBTOTAL \$				1,350.00		

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 IND - Individual
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 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/02</u> through <u>06/30/02</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

NAME OF FILER
John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
6/20/2002	Ole Mettler 17900 North Cherry Road Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Banker Farmers & Merchants Bank	100.00	100.00	100.00
6/20/2002	Herman Crabtree Brown 2291 West March Lane, Ste B-100 Stockton, CA 195207	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attornies Self Employed	250.00	250.00	250.00
6/24/2002	Ron Beckman PO Box 1443 Lodi, CA 95241	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self Employed Attorney	500.00	1,000.00	1,000.00
6/28/2002	Alan and Janet Archer 831 Inverness Drive Rio Vista, CA 94571	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	H. R. Manager Apache Plastics	100.00	100.00	100.00
7/2/2002	Nils Trulsson 1742 Edgewood Drive Lodi, CA 95240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired None	100.00	100.00	100.00
SUBTOTAL \$				1,050.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
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SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period from <u>01/01/02</u> through <u>06/30/02</u>	CALIFORNIA FORM 460
Page _____ of _____	

NAME OF FILER	I.D. NUMBER 1244696
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
7/11/2002	Kent and Patricia Steinwert 861 West Turner Road Lodi, CA 95242	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Banker Farmers & Merchants Bank	250.00	250.00	250.00
7/8/2002	Waste Management, Inc - Western Area Waste Management, Inc 915 L Street, Ste 1430 Sacramento, CA 95814	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Corporation Affiliated Entities	100.00	100.00	100.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
SUBTOTAL \$				350.00		

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

**Schedule B – Part 1
Loans Received**

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

Statement covers period
from 1/1/2002
through 6/30/2002

CALIFORNIA
FORM **460**

Page _____ of _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

I.D. NUMBER

1244696

John Beckman - Committee to Elect John Beckman

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR _____ \$ _____ PER ELECTION ** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NONE	\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR _____ \$ _____ PER ELECTION ** \$ _____
† <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$ _____	\$ _____	<input type="checkbox"/> PAID \$ _____ <input type="checkbox"/> FORGIVEN \$ _____	\$ _____ DATE DUE _____	_____% RATE \$ _____	\$ _____ DATE INCURRED _____	CALENDAR YEAR _____ \$ _____ PER ELECTION ** \$ _____
SUBTOTALS \$ _____ \$ _____ \$ _____ \$ _____								

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

Schedule B Summary

- Loans received this period \$ NONE
(Total Column (b) plus unitemized loans less than \$100.)
- Loans paid or forgiven this period \$ NONE
(Total Column (c) plus loans under \$100 paid or forgiven.)
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) **NET \$** NONE
(May be a negative number)
Enter the net here and on the Summary Page, Column A, Line 2.

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

† Contributor Codes

IND – Individual COM – Recipient Committee (other than PTY or SCC) OTH – Other PTY – Political Party SCC – Small Contributor Committee

**Schedule B - Part 2
Loan Guarantors**

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

Statement covers period
from 1/1/2002

CALIFORNIA FORM 460

I.D. NUMBER
1244696

NAME OF FILER

John Beckman - Committee to Elect John Beckman

FULL NAME, STREET ADDRESS AND ZIP CODE OF GUARANTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE <input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	LOAN LENDER DATE	AMOUNT GUARANTEED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	BALANCE OUTSTANDING TO DATE
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	<i>NONE</i>	LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		LENDER _____ DATE _____		CALENDAR YEAR \$ _____ PER ELECTION (IF REQUIRED) \$ _____	
SUBTOTAL				\$ NONE	Enter on Summary Page, Line 17 only.	

**Schedule C
Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from 1/1/2002 through 6/30/2002	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
	Robert Hartzel 19291 East Harney Lane Lodi, CA 95240	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Harmony Wynelands	Wine	150.00	150.00	150.00
	Randy Taylor 340 West Highway 12 Lodi, CA 95242	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Van Ruten Taylor Winery	Wine	150.00	150.00	150.00
	Jim Allen 2349 East Waterloo Road Stockton, CA	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner The Printing Press	Campaign Literature	400.00	400.00	400.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
<i>Attach additional information on appropriately labeled continuation sheets.</i>					SUBTOTAL \$	700.00	

Schedule C Summary

- Amount received this period – nonmonetary contributions of \$100 or more.
(Include all Schedule C subtotals.) \$ 700.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 \$ -0-
- 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 \$** 700.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

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

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

SCHEDULE D

Statement covers period from _____ through _____	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure	NONE			
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
SUBTOTAL \$						

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 0
2. Unitemized contributions and independent expenditures made this period of under \$100 \$ 0
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 0

**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	1/1/2002	
through	6/30/2002	Page _____ of _____
NAME OF FILER		I.D. NUMBER
John Beckman - Committee to Elect John Beckman		1244696

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

John Beckman - Committee to Elect John Beckman

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Post Office Lodi, California 95240	POS	Postage	208.98
Friends of Tokay 1111 West Century Lodi, CA 95240	FND	Wine for Fundraising Event	255.00
Ron Beckman 111 North Church Street Lodi, CA 95240	RFD	Return Contribution	500.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ _____

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$ 2210.87**

**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>1/1/2002</u> through <u>6/30/2002</u>	CALIFORNIA FORM 460
Page _____ of _____	I.D. NUMBER 1244696

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Beckman - Committee to Elect John Beckman

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

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

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Wine Country Catering 321 Turner Road Lodi, CA	FUD	Catering Service	562.50
Staples 2415 West Kettleman Lane Lodi, California	OFC	Office Supplies	333.89

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

SUBTOTAL \$ 896.39

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

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

SCHEDULE G

Statement covers period from <u>1/1/2002</u>	CALIFORNIA FORM 460
through <u>6/30/2002</u>	
Page <u> </u> of <u> </u>	I.D. NUMBER 1244696

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

John Beckman - Committee to Elect John Beckman

NAME OF AGENT OR INDEPENDENT CONTRACTOR

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<i>NONE</i>			

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$ *0*

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

**Schedule H
Loans Made to Others***

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

Statement covers period
from 1/1/2002
through 6/30/2002

SCHEDULE H
CALIFORNIA FORM 460
Page _____ of _____

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
John Beckman - Committee to Elect John Beckman

I.D. NUMBER
1244696

FULL NAME, STREET ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT LOANED THIS PERIOD	(c) REPAYMENT OR FORGIVENESS THIS PERIOD*		(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST RECEIVED	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE LOANS TO DATE
				<input type="checkbox"/> PAID	<input type="checkbox"/> FORGIVEN				
		\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____% RATE	\$ _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
	NONE	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____	_____% RATE	\$ _____	CALENDAR YEAR \$ _____ PER ELECTION** \$ _____
		SUBTOTALS		\$ _____	\$ _____	\$ _____	\$ _____		

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

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

Schedule H Summary

- Loans made this period \$ 0
(Total Column (b) plus unitemized loans less than \$100.)
- Payments received on loans \$ 0
(Total Column (c) plus unitemized payments less than \$100.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 0
(Enter the net here and on the Summary Page, Column A, Line 7.)

****If Required**

**Schedule I
Miscellaneous Increases to Cash**

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

Statement covers period
from 1/1/2002
through 6/30/2002

SCHEDULE I
CALIFORNIA
FORM **460**

Page of
I.D. NUMBER
1244696

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

John Beckman - Committee to Elect John Beckman

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
<i>NONE</i>			

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule I Summary

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