COVER PAGE

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

Date Stamp: RECEIVED 2006 OCT -5 AM 9:50 CITY CLERK CITY OF LODI

CALIFORNIA FORM 460

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For Official Use Only

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 7-1-06 through 9-30-06

Date of election if applicable: (Month, Day, Year)

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

- ☐ Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall (Also Complete Part 5)
- ☑ General Purpose Committee
  - ⊘ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- ☐ Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored (Also Complete Part 6)
- ☐ Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)

2. Type of Statement:

- ☑ Preelection Statement
- ☐ Semi-annual Statement
- ☐ Termination Statement (Also file a Form 410 Termination)
- ☐ Amendment (Explain below)
- ☐ Quarterly Statement
- ☐ Special Odd-Year Report
- ☐ Supplemental Preelection Statement - Attach Form 495

3. Committee Information

I.D. NUMBER: 96-2479

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Lodi Firefighters PAC

STREET ADDRESS (NO P.O. BOX):

CITY / STATE / ZIP CODE / AREA CODE/PHONE: PO Box 1841

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

CITY / STATE / ZIP CODE / AREA CODE/PHONE: Lodi, CA 95241

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: EVAN LUKE

MAILING ADDRESS: PO Box 1841

CITY / STATE / ZIP CODE / AREA CODE/PHONE: Lodi, CA 95241

NAME OF ASSISTANT TREASURER, IF ANY:

MAILING ADDRESS:

CITY / STATE / ZIP CODE / AREA CODE/PHONE:

OPTIONAL: FAX / E-MAIL ADDRESS

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 10-3-06 (Date) By [signature] (Signature of Treasurer or Assistant Treasurer)

Executed on (Date) By (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on (Date) By (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on (Date) By (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Campaign Disclosure Statement
Summary Page

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

SUMMARY PAGE

Statement covers period
from 7-1-06
through 9-30-06

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Lodi Firefighters PAC

I.D. NUMBER
910-2479

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3	$ 4438.75	$ 7102
2. Loans Received	Schedule B, Line 3	0	0
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2	$ 4438.75	$ 7102
4. Nonmonetary Contributions	Schedule C, Line 3	0	0
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4	$ 4438.75	$ 7102

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

6. Payments Made	Schedule E, Line 4	$ 15720.08	$ 18303.04
7. Loans Made	Schedule H, Line 3	2300.00	2300.00
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7	$ 18020.08	$ 20603.04
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	$ 18020.08	$ 20603.04

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
/ /	$
/ /	$

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

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16	$ 16298.22 ~~16218.53~~
13. Cash Receipts	Column A, Line 3 above	4438.75
14. Miscellaneous Increases to Cash	Schedule I, Line 4	0
15. Cash Payments	Column A, Line 8 above	18020.08
16. **ENDING CASH BALANCE**	Add Lines 12 + 13 + 14, then subtract Line 15	$ 2717.49

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

Schedule A
Monetary Contributions Received

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

SCHEDULE A
CALIFORNIA FORM 460

Statement covers period
from 7-1-06
through 9-30-06

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Firefighters PAC

I.D. NUMBER: 96-2479

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)
8/14/06	Lodi Professional Firefighters PO Box 1841 Lodi, CA 95241	☐IND ☐COM ☑OTH ☐PTY ☐SCC		1775.50	4438.75	
9/26/06	Lodi Professional Firefighter PO Box 1841 Lodi, CA 95241	☐IND ☐COM ☑OTH ☐PTY ☐SCC		2663.25	7102.00	
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				

SUBTOTAL $ 4438.75

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 4438.75
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 0
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 4438.75

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

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

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

SCHEDULE D
CALIFORNIA FORM 460

Statement covers period
from 7-1-06
through 9-30-06

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Fire fighters PAC

I.D. NUMBER: 96-2479

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)
9-15-06	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		618.34	14,615.88	
9-16-06	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		888.00	15,503.88	
9-29-06	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		606.11	16,109.99	
			SUBTOTAL $	2112.45		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ ~~14,609.99~~ 17209.99
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 $ ~~14,609.99~~ 17209.99

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

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

SCHEDULE D (CONT.)

Statement covers period
from 7-1-06
through 9-30-06

CALIFORNIA FORM 460

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NAME OF FILER
Lodi Firefighters PAC

I.D. NUMBER
96-2479

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)
8-25-06	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		1850.00	3050.00	
9-19	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		7500.00	10,550	
9-14	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		1807.54	12357.54	
9-14	Measure G ☑ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☑ Independent Expenditure		1640.00 ~~125~~	13997.54	
			SUBTOTAL $	12797.54		

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

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

SCHEDULE D
CALIFORNIA FORM 460

Statement covers period
from 7-1-06
through 9-30-06

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Fire fighters PAC

I.D. NUMBER: 96-2479

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)
9-26-06	Lodi Citizens for Public Facilities ☑ Support ☐ Oppose	☑ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure	loan	2300.00	2300.00	
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
			SUBTOTAL $	2300.00		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ 2300.00
2. Unitemized contributions and independent expenditures made this period of under $100 ..... $ _____
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... TOTAL $ 2300 to D summary

SCHEDULE E

Schedule E
Payments Made

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

Statement covers period
from 7-1-06
through 9-30-06

CALIFORNIA FORM 460

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Firefighters PAC

I.D. NUMBER: 96-2479

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
Advertising Resource connection 1432 Cauphier Cn Davis, Ca 95616	IND	Advertisement	1850.00
Comcast Stockton	IND	Advertisement	7500.00
Firestar Productions	IND	Comercial Production	1807.54

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

SUBTOTAL $ 11,157.54

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 15 471.94
2. Unitemized payments made this period of under $100 ..... $ 248.14
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... TOTAL $ 15720.08

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 7-1-06 through 9-30-06

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Fire fighter PAC

I.D. NUMBER: 96-2479

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
Duncan Press 25 W. Lockeford St Lodi, CA 95240	IND	~~[illegible]~~ mailer	1640.00
Victory Store 5200 S.W. 30th St Davenport, IA 52802	IND	Signs	618.34
API PO Box 255 Winston Salem, NC 27102-0255	IND	Signs	888
Staples Kettleman Lodi, CA 95242	CMP		561.95
Victory Store 5200 S W 30th St Lodi, CA ~~95242~~ 52802	Md	Signs	606.11

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

SUBTOTAL $ 4314.40

Schedule H
Loans Made to Others*

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

Statement covers period
from 7-1-06
through 9-30-06

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Lodi Firefighters PIAC

I.D. NUMBER: 96-2479

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
Lodi Citizens for Public facilities		$ 0	$ 2300.00	☐ PAID $ ____ ☐ FORGIVEN $ ____	$ 2300.00 DATE DUE	0 % RATE $ ____	$ 2300 9-26-06 DATE INCURRED	CALENDAR YEAR $ 2300 PER ELECTION** $ ____
Dan Parises 13322 N. Stockton Lodi, CA 95240	farmer	$ 2033.02	$ 0	☐ PAID $ 0 ☐ FORGIVEN $ 0	$ 2033.02 DATE DUE	0 % RATE $ ____	$ 2033.02 2-27-03 DATE INCURRED	CALENDAR YEAR $ ____ PER ELECTION** $ ____
*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.		SUBTOTALS	$ 2300.00	$ 0	$ 4333.02	$ 0 (Enter (e) on Schedule I, Line 3)		

Schedule H Summary

1. Loans made this period ..... $ 2300.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Payments received on loans ..... $ 0
   (Total Column (c) plus unitemized payments of less than $100.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 2300.00 (May be a negative number)
   (Enter the net here and on the Summary Page, Column A, Line 7.)

**If Required