

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Southern California Fund

ADDRESS (number and street) 777 S. Figueroa St., Ste. 4050  
 Check if different than previously reported. (ACC)  
Los Angeles CA 90017

2. **FEC IDENTIFICATION NUMBER** C00361410  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2010 through 09 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Michael Fraioli  
Signature of Treasurer Electronically Filed by Michael Fraioli Date 10 14 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Southern California Fund

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		43226.80
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	32358.82									
(c) Total Receipts (from Line 19) .....	31300.00	54800.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	63658.82	98026.80								
7. Total Disbursements (from Line 31) .....	11967.21	46335.19								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	51691.61	51691.61								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	609.14									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
Southern California Fund

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	26100.00	33600.00
(ii) Unitemized .....	200.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	26300.00	33800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	21000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	31300.00	54800.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	31300.00	54800.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	31300.00	54800.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	8967.21	27185.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	8967.21	27185.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	11050.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	8100.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11967.21	46335.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11967.21	46335.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	31300.00	54800.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	31300.00	54800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8967.21	27185.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	8967.21	27185.19

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Southern California Fund

**A.** Full Name (Last, First, Middle Initial)  
Levon Ayrapetyan

Mailing Address 80 Columbia Circle, #73C

City State Zip Code  
New York NY 10023

FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed Occupation  
Publisher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2600.00

Date of Receipt  
MM / DD / YYYY  
09 / 15 / 2010

**Transaction ID:** C16499

Amount of Each Receipt this Period  
2600.00

**B.** Full Name (Last, First, Middle Initial)  
Azita Etaati

Mailing Address 29150 Cliffside Dr.

City State Zip Code  
Malibu CA 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation  
Homemaker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** C16501

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Steven J Goldman

Mailing Address 29150 Cliffside Drive

City State Zip Code  
Malibu CA 90265

FEC ID number of contributing federal political committee. **C**

Name of Employer Power-One Occupation  
CEO/President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
09 / 30 / 2010

**Transaction ID:** C16502

Amount of Each Receipt this Period  
5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **12600.00**

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Southern California Fund

**A.** Full Name (Last, First, Middle Initial)  
John D. Jones

Mailing Address 1310 Napoli Dr.

City State Zip Code  
Pacific Palisades CA 90272

FEC ID number of contributing federal political committee. **C**

Name of Employer: Greystone Managemet Group, Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 26 / 2010  
Transaction ID: C16503  
Amount of Each Receipt this Period: 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Morongo Band of Mission Indians

Mailing Address 11581 Potrero Rd.

City State Zip Code  
Banning CA 92220

FEC ID number of contributing federal political committee. **C**

Name of Employer: Sovereign Occupation: Nation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 09 / 16 / 2010  
Transaction ID: C16500  
Amount of Each Receipt this Period: 5000.00

**C.** Full Name (Last, First, Middle Initial)  
William S. Prady

Mailing Address 16634 Oak View Dr.

City State Zip Code  
Encino CA 91436

FEC ID number of contributing federal political committee. **C**

Name of Employer: Self-Employed Occupation: Television Writer/Producer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 08 / 25 / 2010  
Transaction ID: C16498  
Amount of Each Receipt this Period: 5000.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00

**TOTAL** This Period (last page this line number only) ..... ►

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 15	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Southern California Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Ozzie Silna		Date of Receipt		
	Mailing Address 23301 Palm Canyon Ln		M M / D D / Y Y Y Y 08 / 25 / 2010		
	City	State	Zip Code	<b>Transaction ID:</b> C16497	
	Malibu	CA	90265	Amount of Each Receipt this Period	
	FEC ID number of contributing federal political committee.		C	2500.00	
	Name of Employer Action Embroidery Corp.		Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	26100.00



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 9 / 15	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full) Southern California Fund
---

<b>A.</b>	Full Name (Last, First, Middle Initial) Honeywell Int'l PAC	Date of Receipt
	Mailing Address 101 Constitution Ave., NW Ste. 500	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City State Zip Code Washington DC 20001	<b>Transaction ID:</b> C16504
	FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00096156"/>	Amount of Each Receipt this Period <input type="text" value="5000.00"/>
	Name of Employer Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="5000.00"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southern California Fund

A.	Full Name (Last, First, Middle Initial) Scott W. Abrams	Transaction ID: D7539 Date of Disbursement 07 / 02 / 2010
	Mailing Address 501 Pacific Street #202	Amount of Each Disbursement this Period 1000.00
	City Santa Monica State CA Zip Code 90405	
	Purpose of Disbursement Consulting & Fundraising Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Scott W. Abrams	Transaction ID: D7541 Date of Disbursement 08 / 03 / 2010
	Mailing Address 501 Pacific Street #202	Amount of Each Disbursement this Period 1000.00
	City Santa Monica State CA Zip Code 90405	
	Purpose of Disbursement Consulting & Fundraising Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Scott W. Abrams	Transaction ID: D7540 Date of Disbursement 09 / 01 / 2010
	Mailing Address 501 Pacific Street #202	Amount of Each Disbursement this Period 1000.00
	City Santa Monica State CA Zip Code 90405	
	Purpose of Disbursement Consulting & Fundraising Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southern California Fund

A.	Full Name (Last, First, Middle Initial) David L. Gould Company	Transaction ID: D7403 Date of Disbursement 07 / 07 / 2010
	Mailing Address 555 S Flower St Ste 4510	Amount of Each Disbursement this Period 327.50
	City Los Angeles State CA Zip Code 90071	
	Purpose of Disbursement Treasury Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) David L. Gould Company	Transaction ID: D7404 Date of Disbursement 07 / 07 / 2010
	Mailing Address 555 S Flower St Ste 4510	Amount of Each Disbursement this Period 133.92
	City Los Angeles State CA Zip Code 90071	
	Purpose of Disbursement Treasury Expenses Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David L. Gould Company	Transaction ID: D7405 Date of Disbursement 08 / 06 / 2010
	Mailing Address 555 S Flower St Ste 4510	Amount of Each Disbursement this Period 920.00
	City Los Angeles State CA Zip Code 90071	
	Purpose of Disbursement Treasury Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1381.42
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southern California Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) David L. Gould Company</p> <p>Mailing Address 555 S Flower St Ste 4510</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Treasury Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7406 <b>Date of Disbursement:</b> 08 / 06 / 2010</p> <p>Amount of Each Disbursement this Period 131.38</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) David L. Gould Company</p> <p>Mailing Address 555 S Flower St Ste 4510</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Treasury Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7589 <b>Date of Disbursement:</b> 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 128.35</p> <p>Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) David L. Gould Company</p> <p>Mailing Address 555 S Flower St Ste 4510</p> <p>City Los Angeles State CA Zip Code 90071</p> <p>Purpose of Disbursement Treasury Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7590 <b>Date of Disbursement:</b> 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 407.50</p> <p>Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

667.23

**TOTAL** This Period (last page this line number only) ..... ▶

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southern California Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Fraiori &amp; Associates</p> <p>Mailing Address 80 F St NW # 804</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Consulting &amp; Fundraising Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7499</p> <p>Date of Disbursement 08 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 1313.45</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Fraiori &amp; Associates</p> <p>Mailing Address 80 F St NW # 804</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Consulting &amp; Fundraising Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7500</p> <p>Date of Disbursement 08 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 1257.90</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Fraiori &amp; Associates</p> <p>Mailing Address 80 F St NW # 804</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Consulting &amp; Fundraising Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> D7592</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 1250.00</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**3821.35**

**TOTAL** This Period (last page this line number only) ..... ▶

**8870.00**

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
Southern California Fund

A.

Full Name (Last, First, Middle Initial)  
Friends of Barbara Boxer

Transaction ID: D7579  
Date of Disbursement

Mailing Address P.O. Box 411176

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

City State Zip Code  
Los Angeles CA 90041

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Federal Contribution

Category/  
Type

Candidate Name  
Barbara Boxer

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: CA District: 00

B.

Full Name (Last, First, Middle Initial)  
Ike Skelton for Congress

Transaction ID: D7593  
Date of Disbursement

Mailing Address P.O. Box A

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	3		2	0	1	0

City State Zip Code  
Harrisonville MO 64701

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Federal Contribution

Category/  
Type

Candidate Name  
Ike Skelton

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: MO District: 04

C.

Full Name (Last, First, Middle Initial)  
John Hall for Congress

Transaction ID: D7588  
Date of Disbursement

Mailing Address 137 Entrada Drive, Suite 3

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	3		2	0	1	0

City State Zip Code  
Santa Monica CA 90402

Amount of Each Disbursement this Period

1000.00
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Purpose of Disbursement  
Federal Contribution

Category/  
Type

Candidate Name  
John Hall

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: NY District: 19

SUBTOTAL of Disbursements This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

3000.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 / 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
Southern California Fund

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor David L. Gould Company	Nature of Debt (Purpose): Treasury Expenses
Mailing Address 555 S Flower St Ste 4510	
City State ZIP Code Los Angeles CA 90071	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D7596</b>	
Amount Incurred This Period 124.14	Payment This Period 0.00	Outstanding Balance at Close of This Period 124.14

<b>B.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor David L. Gould Company	Nature of Debt (Purpose): Treasury Fees
Mailing Address 555 S Flower St Ste 4510	
City State ZIP Code Los Angeles CA 90071	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID: D7595</b>	
Amount Incurred This Period 485.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 485.00

1) <b>SUBTOTALS</b> This Period This Page (optional).....	609.14
2) <b>TOTALS</b> This Period (last page this line number only).....	609.14
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	609.14