

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 Mark M. Wahlman

Signature of Treasurer
 Date


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


## SUMMARY PAGE

 OF RECEIPTS AND DISBURSEMENTSPage 2
FEC Form 3X (Rev. 02/2003)


18. Transfers from Non-Federal and Levin Funds
(a) Non-Federal Account
(fom Schedule H3) ......................
(b) Levin Funds (from Schedule H5) .......
(c) Total Transfer (add 18(a) and 18(b)).
19. Total Receipts (add Lines 11(d).,
12, 13, 14, 15, 16, 17, and 18(c)) .............
20. Total Federal Receipts
(subtract Line 18(c) from Line 19) ............

DETAILED SUMMARY PAGE
FEC Form 3X (Rev. 02/2003)
of Disbursements
Page 4

## II. DISBURSEMENTS



| COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
| :---: | :---: |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 2300.00 | 2300.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0,00 | 0,00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| 0.00 | 0.00 |
| $\ldots$ | 5000.00 |

30. Federal Election Activity (2 U.S.C 431(20))
(a) Shared Federal Election Activity (from Schedule H6)
(i) Federal Share $\qquad$
(ii) "Levin" Share $\qquad$
(b) Federal Election Activity Paid Entirely With Federal Funds
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....


|  | 0.00 |
| :---: | :---: |
|  | 0.00 |
|  | 0.00 |
|  | 0.0 |

31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)).

32. Total Federal Disbursements
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31 ). $\qquad$
$\square$
$\ldots, \ldots, \ldots$

## DETAILED SUMMARY PAGE

COLUMN A

COLUMN A Total This Period

Calendar Year-to-Date

7146.76
34. Total Contribution Refunds
(from Line 28(d)) .....................................
$\qquad$
$\square$
0.00 $\square$
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) $\qquad$ (subtract Line 34 from Line 33) .................. $\square$
7146.76
7146.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..........

$\square$
37. Offsets to Operating Expenditurees (from Line 15, page 3) $\qquad$0.00$\square \ldots, 0.00$
38. Net Operating Expenditures(subtract Line 37 from Line 36)
0.00
0.00
FE6ANO26

## SCHEDULE A (FECForm 3X) ITEMIZED RECEIPTS

| Use separate schedule(s) | FOR INE NUMBER: (check only one) |  | PAGE 6/9 |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the Detailed Summary Page | $x^{x} \begin{aligned} & 11 a \\ & 13 \end{aligned}$ | $11 \mathrm{~b}$ $\pm 14$ | 11c $15$ | $\begin{aligned} & 12 \\ & 16 \end{aligned}$ |  | 17 |



Any information copled from such Reports and Statements may not be sold or used by any person for the purpose of soliciling 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 Ful)
Pacific Coast Producers Political Action Committee
A.

Full Name (Last, First, Middle Initial)
Kurt Ashurst

| City | State | Zip Code |
| :--- | :--- | :--- |
| Hopland | CA | 95449 |

Date of Receipt

federal political committee.


| Name of Employer <br> Seff | Occupation <br> Grower |
| :--- | :--- |
| Receipt For: <br> $\square$ <br> Primary $\quad \square$ General <br> Other (specify) | Aggregate Year-to-DateV |

B. Full Name (Last, First, Middle Initial)
B. $\frac{\text { Sarbilit Athwal }}{\text { Mailing Address } 5117 \text { Central Ave }}$

|  |  |  |
| :--- | :--- | :--- | :--- |
| City | State | Zip Code |
| Ceres | CA | 95307 |

Date of Receipt



Transaction ID:SA11AI. 4208 Amount of Each Receipt this Period


Date of Receipt


Transaction ID:SA11AI. 4202
Amount of Each Receipt this Period




## SCHEDULE A (FECForm 3X) ITEMIZED RECEIPTS



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NAME OF COMMTTTEE (In Full)
Pacific Coast Producers Political Action Committee

A
Full Name (Last, First, Middle Initial)

B.


Date of Receipt

Transaction ID:SA11A1. 4203 Amount of Each Receipt this Period

c.

| Full Name (Last, First, Middle Initial) Robert Waller |  |
| :---: | :---: |
| Mailing Address 585 Cowee |  |
| City | State Zip Code |
| Gridiey | CA 95948 |
| FEC ID number of contributing federal political committee. | C |
| Name of Employer Self | Occupation Grower |
| $\begin{aligned} & \text { Receipt For: } \\ & \square \text { Primary } \quad \square \text { General } \\ & \text { Other (specify) } \end{aligned}$ | Aggregate Year-to-DateV <br> 350.49 |

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

## SCHEDULE B (FECForm 3X) ITEMIZED DISBURSEMENTS

| Use separate schedule(s) | FOR UNE NUMBER: (check only one) |  |  | PAGE 9/9 |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| for each category of the Detailed Summary Page | $\nabla_{27}^{21 b}$ | 22 28 a | $\begin{array}{\|c} \times 23 \\ 28 b \end{array}$ | $f_{28 \mathrm{c}}^{24}$ | 25 |  |

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NAME OF COMMITTEE (In Full)
Pacific Coast Producers Political Action Committee


| SUBTOTAL of Disbursements This Page (optional) ................................................. |  | 2300.00 |
| :---: | :---: | :---: |
| TOTAL This Period (last page this line number only) .............................................. |  | 2300.00 |

## Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

| $\square$ Hand Delivered | Date of Receipt |
| :--- | ---: |
| $\square$ USPS First Class Mail | Postmarked |
| $\square$ USPS Registered/Certified | Postmarked (R/C) |
| $\square$ USPS Priority Mail | Postmarked |
| Delivery Confirmation ${ }^{\text {TM }}$ or Signature Confirmation ${ }^{\text {TM }}$ Label |  |
| $\square$ | Postmarked $^{\square}$ USPS Express Mail |

Postmark Illegible

$\square$
No Postmark


| $\square$ Received from House Records \& Registration Office | Date of Receipt |
| :--- | ---: |
| $\square$ Received from Senate Public Records Office | Date of Receipt |
| $\square$ Received from Electronic Filing Office | Date of Receipt |
| $\square$ Other (Specify): | Date of Receipt or Postmarked |
| JH |  |
| PREPARER | $5 / 20 / 88$ |

