

# 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

OCPAC

ADDRESS (number and street) 976 Pacific Avenue

Check if different than previously reported. (ACC)

Willows CA 95988 9788

2. **FEC IDENTIFICATION NUMBER** C00424358

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 (12G)

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(d) 30-Day **Post -Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on 11 07 2006 in the State of CA

5. Covering Period 10 19 2006 through 11 27 2006

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 Kelly Lawler

Signature of Treasurer Electronically Filed by Kelly Lawler Date 12 07 2006

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							
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
OCPAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	6									
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">9371.90</td></tr></table>	9371.90										
9371.90												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">12566.83</td></tr></table>	12566.83	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">68084.95</td></tr></table>	68084.95								
12566.83												
68084.95												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">21938.73</td></tr></table>	21938.73	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">68084.95</td></tr></table>	68084.95								
21938.73												
68084.95												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">9585.07</td></tr></table>	9585.07	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">55731.29</td></tr></table>	55731.29								
9585.07												
55731.29												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">12353.66</td></tr></table>	12353.66	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">12353.66</td></tr></table>	12353.66								
12353.66												
12353.66												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">.00</td></tr></table>	.00										
.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">256.41</td></tr></table>	256.41										
256.41												

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**

Write or Type Committee Name  
OCPAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	9

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
1	1

D	D
2	7

Y	Y	Y	Y
2	0	0	6

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	5000.00	43000.00
(i) Itemized (use Schedule A) .....	0.00	0.00
(ii) Unitemized .....	5000.00	43000.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	7500.00	24900.00
(c) Other Political Committees (such as PACs) .....	12500.00	67900.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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.) .....	66.83	184.95
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)) .....	12566.83	68084.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12566.83	68084.95

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	585.07	3731.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	585.07	3731.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	52000.00
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	0.00
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))..	9585.07	55731.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	9585.07	55731.29

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	12500.00	67900.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12500.00	67900.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	585.07	3731.29
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	585.07	3731.29

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 11	
	(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

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) OCPAC
--------------------------------------

Full Name (Last, First, Middle Initial) <b>A.</b> Alfred Baldwin		Date of Receipt																				
Mailing Address 280 Newport Center Drive Suite 240		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	0	4	/	2	0	0	6													
City Newport Beach	State CA	Zip Code 92660-7548																				
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11A1-62-63-c																				
Name of Employer Village Development		Occupation Developer																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period 5000.00																				
Aggregate Year-to-Date ▼		5000.00																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	5000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 11
	(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"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
OCPAC

Full Name (Last, First, Middle Initial) <b>A. AICPA PAC</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address 220 Leigh Farm Road		<b>Transaction ID: SA11C-61-59-c</b>	
City State Zip Code Durham NC 27707-8110	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C C00077321</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mike R Fund</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 3 0 / 2 0 0 6	
Mailing Address PO Box 65796		<b>Transaction ID: SA11C-60-58-c</b>	
City State Zip Code Washington DC 20035-5796	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. <b>C C00370791</b>			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	7500.00

**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 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)  
OCPAC

Full Name (Last, First, Middle Initial) <b>A. Wells Fargo</b>		<b>Transaction ID: SB21B-3-68-e</b>	
Mailing Address 4850 Barranca Parkway		Date of Disbursement MM / DD / YYYY 11 / 06 / 2006	
City Irvine	State CA	Zip Code 92604-1702	Amount of Each Disbursement this Period 59.99
Purpose of Disbursement Service Charge		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. The KAL Group</b>		<b>Transaction ID: SB21B-13-64-e</b>	
Mailing Address PO Box 984		Date of Disbursement MM / DD / YYYY 11 / 16 / 2006	
City Willows	State CA	Zip Code 95988-0984	Amount of Each Disbursement this Period 450.08
Purpose of Disbursement Bookkeeping Services		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. CompleteCampaigns.com</b>		<b>Transaction ID: SB21B-21-60-e</b>	
Mailing Address 610 Gateway Center Way Suite K		Date of Disbursement MM / DD / YYYY 11 / 06 / 2006	
City San Diego	State CA	Zip Code 92102-4548	Amount of Each Disbursement this Period 75.00
Purpose of Disbursement Administrative/Salary/Overhead: Software		001 Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>585.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>585.07</b>



# 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)  
OCPAC

Full Name (Last, First, Middle Initial) <b>A. Gard for Congress</b>		<b>Transaction ID:</b> SB23-48-49-e Date of Disbursement 10 / 19 / 2006
Mailing Address PO Box 277		Amount of Each Disbursement this Period 2000.00
City Green Bay	State WI	
Zip Code 54305-0277		
Purpose of Disbursement Political Contribution:		
Candidate Name John Gard		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WI District: 08		

Full Name (Last, First, Middle Initial) <b>B. Friends of Mike Ferguson</b>		<b>Transaction ID:</b> SB23-49-50-e Date of Disbursement 10 / 19 / 2006
Mailing Address PO Box 225		Amount of Each Disbursement this Period 2000.00
City Colonia	State NJ	
Zip Code 07067-0225		
Purpose of Disbursement Political Contribution:		
Candidate Name Mike Ferguson		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District: 07		

Full Name (Last, First, Middle Initial) <b>C. Bouchard for US Senate</b>		<b>Transaction ID:</b> SB23-57-56-e Date of Disbursement 10 / 30 / 2006
Mailing Address 280 W Maple Road Suite 202		Amount of Each Disbursement this Period 2000.00
City Birmingham	State MI	
Zip Code 48009-3344		
Purpose of Disbursement Political Contribution:		
Candidate Name Michael Bouchard		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<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)

PAGE 10 / 11

<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)  
OCPAC

Full Name (Last, First, Middle Initial) <b>A. Pombo for Congress</b>		<b>Transaction ID:</b> SB23-55-54-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 4 / 2 0 0 6
Mailing Address 2150 River Plaza Drive Suite 1560		Amount of Each Disbursement this Period 1000.00
City Tracy State CA Zip Code 95376-8856		
Purpose of Disbursement Political Contribution: <input type="checkbox"/> 011 Candidate Name Richard Pombo		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 11		

Full Name (Last, First, Middle Initial) <b>B. Cathy McMorris for Congress</b>		<b>Transaction ID:</b> SB23-56-55-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 6 / 2 0 0 6
Mailing Address PO Box 137		Amount of Each Disbursement this Period 1000.00
City Spokane State WA Zip Code 99210-0137		
Purpose of Disbursement Political Contribution: <input type="checkbox"/> 011 Candidate Name Cathy McMorris		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 05		

Full Name (Last, First, Middle Initial) <b>C. Lamberti For Congress</b>		<b>Transaction ID:</b> SB23-58-57-e <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 0 6
Mailing Address 621 E 9th Street		Amount of Each Disbursement this Period 1000.00
City Des Moines State IA Zip Code 50309-5505		
Purpose of Disbursement Federal Contribution: <input type="checkbox"/> 011 Candidate Name Jeffrey Lamberti		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 03		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	9000.00

**SCHEDULE D (FEC Form 3X)**  
**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 / 11	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
 OCPAC

<b>A.</b> Full Name (Last, First, Middle Initial) of Debtor or Creditor The KAL Group	Nature of Debt (Purpose): Administrative/Salary/Ove- rhead-Bookkeepi
Mailing Address PO Box 984	
City State ZIP Code Willows CA 95988-0984	

Outstanding Balance Beginning This Period	<b>Transaction ID: SD10-DEBT62</b>	
0.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
256.41	0.00	256.41

1) <b>SUBTOTALS</b> This Period This Page (optional).....	256.41
2) <b>TOTALS</b> This Period (last page this line number only).....	256.41
3) <b>TOTALS OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only)	