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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEG.MAIL BPERATIONS CENTER

MATE HID TICK LINE AND 11: 54

		rumber and street)	_	OB	OX 125	<u></u>		· ; : , ì . l	l. 4	
*	tha	eck if different in previously corted. (ACC)	Co	STA	MESA	<u></u>	<u> !</u>	C.A (7 26 Z	8-1251
2.	FEC ID	ENTIFICATION NU	MBER	▼	ÇITY▲			STATE ▲	ZIP	CODE A
	C	041451	6		3. IS THIS REPORT	X	NEW (N) OR	AN (A)	rended	
4.	(Choose	-) H	lonthly eport ue On:	Feb 20 (M2) Mar 20 (M3)		May 20 (M5) Jun 20 (M6)	_	20 (M8) 20 (M9)	Nov 20 (M11 (Non-Election Year Only) Dec 20 (M12 (Non-Election
	(a) Qu	arterly Reports:			Apr 20 (M4)		, Jul 20 (M7)	Oct :	20 (M10)	УвагОпіу) Jan 31 (YE)
		April 15 Quarterly Report (Q1	I) (c	•	•	Primary (12P) .	General	(1 2 G)	Aunolf (12A)
	July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE)				lection for the:			Special (128)		
			:		Election on	fs an	: 5 0 1	ל ע ד ד	in I Sta	the ite of
		July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-		Election	General (30G)		Hunoff (2	Hunoff (30R)	
		Termination Report (TER)		нероп	t for the: Election on	58 14	/ b e /	γ γ γ γ		the ate of
5.	Coverin	ig Period 04	C	₽ /	200 G	throug	h 06	30	Z00	6
Туұ	oe or Prir	t I have examined this		Tock	he best of my kno ISBAC	_	and a contract to the desire of the second	Date	d complete.	2006

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

COUNTY VETERBUS COMMITTEE TO SAVE THE BEWY HANGAR

Report Covering the Period:

From:

To:

Page 2

			OLUMN A This Period	1	OLUMN B lar Year-to-Date
6.	(a) Cash on Hand January 1, 2006			7	1,32839
	(b) Cash on Hand at Beginning of Reporting Period	,	1,4283 9		
	(c) Total Receipts (from Line 19)	7	, . o		1,00000
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column β)	,	1,428.39	· •	1,42839
7 .	Total Disbursements (from Line 31)	3	, . 0	7	, . 0
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	,	1.4283 3	,	1,428.37
9.	Debts and Obligations Owed TQ the Committee (Itemize all on Schedule C and/or Schedule D)	7	, . 0		
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	7	, . •	· !	

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

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

DETAILED SUMMARY PAGE

of Receipts

Page 3

Write or Type Committee Name

ORANG COUNTY VETERONS COMMITTEE TO SAVE THE BLUMP HANGAR

Report Covering the Period: From: 04 01 2006 To: 06 30 2006

_		· · ·		<u> </u>	OCI WAY D			
	t. Receipts	То	COLUMN tal This Pe			LUMN B r Year-to-[ate	
1 1 .	Contributions (other than loans) From:			-				
	(a) Individuals/Persons Other							
	Than Political Committees							
	(i) Itemized (use Schedule A)	,	,	- 0	,	3	. 0	
	(ii) Uniternized(iii) TOTAL (add	,	,	. 0	,	7	. 0	
	Lines 11(a)(i) and (ii)▶	,	1	- 0	3	,	. 0	
	(b) Political Party Committees	,	,	- 0	,	,	. 0	
	(c) Other Political Committees			O			_	
	(d) Total Contributions (add Lines	7	,	. •	,	,	. 0	
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	,	,	. 0	,	7	. 🔿	
12.	Transfers From Affiliated/Other Party Committees	_		. 0	_		. 0	
13.	All Loans Received	,	,	<i>-</i>	,	,	0	
		,	7	. 0	,	,	. •	
	Loan Repayments Received Offsets To Operating Expenditures	•	,	. 0	,	3	. 0	
	(Refunds, Rebates, etc.) (Carry Totats to Line 37, page 5)			. 0				
16.	Refunds of Contributions Made	,	,	. •	,	,	. 0	
	to Federal Candidates and Other			~^			_	
17	Political Committees Other Federal Receipts	,	,	. 0	,	1	. 0	
•••	(Dividends, Interest, etc.)			_			m	
18.	Transfers from Non-Federal and Levin Funds	7	,	. 0		7	. 0	
	(a) Non-Federal Account							
	(from Schedule H3)	7	,	- 0	7	1	. 🖰	
	(b) Levin Funds (from Schedule H5)	,	3	. 🔿	,	,	. O	
	(c) Total Transfers (add 18(a) and 18(b))	,	,	. 0	•	1	- 0	
45	Tabal Chaminta Andel Lines 444-5							
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	7	,	.0	,	,	٠ ٥	
20.	Total Federal Receipts							
	(subtract Line 18(c) from Line 19)▶	,	,	. 🔿	1	,	, 0	

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(30) |N°|

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26

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements		COLUMN A	1		LUMN B	\
21. 0	Operating Expenditures: —	lota	al This Per	поп	Calenda	r Year-to-E)ate
(4	(a) Aflocated Federal/Non-Federal Activity (from Schedule H4)						
	(i) Federal Share	,	,	. 0	7	5	- 0
	(ii) Non-Federal Share	,		_			Ŏ
f		7	,	- O	,	,	. •
· ·	(b) Other Federal Operating Expenditures			Ð			_
6	(c) Total Operating Expenditures	7	7	. •	,	,	. •
•	(add 21(a)(i), (a)(ii), and (b))▶	_	_	0	_	_	0
22. T	Transfers to Affiliated/Other Party	,	7		,	F	
~ G	Committees	7	1	. 0	,	\$. 0
F	Contributions to Federal Candidates/Committees						_
	and Other Political Committees	•	1	. 0	1	,	. 0
	Independent Expenditures			^			
25. C	use Schedule E) Coordinated Party Expenditures		,	. 0	,	,	. 0
	2 U.S.C. §441a(d)) use Schedute F)			0			
•	,440 00110111111111111111111111111111111	,	,	. •	,	7	. •
26. L	Loan Repayments Made	,		. 🔿		,	. 🔿
		ŕ	•	_	•	•	_
27. L	Loans Made	,	,	. 0	,	,	. 0
_	(a) Individuals/Persons Other			\wedge			_
	Than Political Committees	†	2	. 0	1	,	. 0
,	(b) Political Party Committees			Λ			
	(c) Other Political Committees	,	7		,	,	. •
`	(such as PACs)	_		0	_		0
		,	*	~	,	,	
((d) Total Contribution Refunds			•			<u> </u>
	(add Lines 28(a), (b), and (c))►	,	,	. 0	,	,	.0
				^			
29. C	Other Disbursements	,	5	. 0	,	3	.0
30. F	Federal Election Activity (2 U.S.C. §431(20))						
	(a) Allocated Federal Election Activity						
	(from Schedule H6)			•			
	(i) Federal Share	,	,	. 0	,	7	- 0
	(II) III and III (Standard			•			_
,	(ii) "Levin" Share	,	,	- 0	•	,	. 0
ζ.	(b) Federal Election Activity Paid Entirely With Federal Funds			.0			
6	(c) Total Federal Election Activity (add	,	,	. •	,	,	. 0
,	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	,	,	. 0	y	,	. 0
21 7	Total Dielympomente (add Lines 21/6) CO						
	Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))			_			
-		7	7	.0	,	7	. 0
32. 1	Total Federal Disbursements						
6	(subtract Line 21(a)(li) and Line 30(a)(ii)						
f	from Line 31)		7	.0	7	,	. ෆ
		•	-	-	•	•	_

DETAILED SUMMARY PAGE

of Disbursements

¥II.	Net Contributions/Operating Ex- penditures	· · · · · · · · · · · · · · · · · · ·			COLUMN 8 Calendar Year-to-Date			
	Total Contributions (other than loans) (from Line 11(d), page 3)	7	,	. 0	,	7	. 0	
	Total Contribution Refunds (from Line 28(d))	,	,	. 6	,	,	. 6	
	Net Contributions (other than loans) (subtract Line 34 from Line 33)	,	Ţ	. 0	,	,	. B	
	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	,	2	- 0	,	,	. 6	
	Offsets to Operating Expenditures (from Line 15, page 3)	,	7	. 0	,	,	. 0	
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	,	7	- 6	,	,	. ර	

Č\[

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE, OF Use separate schedule(s) (check only one) for each category of the 12 11a 116 110 **Detailed Summary Page** 13 14 15 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions

	ne (i.ast, First, Middle Initial)	JON 5	Date of Receipt
Mailing /	Address		M M / D D / Y Y Y
City		State Zip Code	····
			Amount of Each Receipt this Period
	number of contributing political committee.	С	, , .
Name o	f Employer	Occupation	1
	For: imary	Aggregate Year-to-Date ▼	
Full Nan	ne (Last, First, Middle Initial)		Date of Receipt
Mailing /	Address		Y Y Y Y G G \ 11 C3
Cîty		State Zip Code	
FEC ID	number of contributing		Amount of Each Receipt this Period
	colitical committee.	С	, ,
Name o	f Employer	Occupation	
	For: imary ☐ General ther (specify) ▼	Aggregate Year-to-Date ▼	
Full Nam	ne (Last, First, Middle Initial)		Dete of General
Mailing .	Address		Date of Receipt
City		State Zip Code	
	number of contributing political committee.	Ç	Amount of Each Receipt this Period
Name o	f Employer	Occupation	-
 -	For: imary General ther (specify) •	Aggregate Year-to-Date ♥	

SCHEDULE B (FEC Form 3X)

TEMIZED DISBUIDSEMENTS	Use separate schedule(s)	FOR LINE (check only		OF
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	G119) 22 23 24 25	5 26
		27	28a 28b 28c 29	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name				
NAME OF COMMITTEE (in Full)	_			
ORANGE COUTY VETER	IBMS COMMIT	150 -	U SAUG THE ALLE	HALLAN
Full Name (Last, First, Middle Instial)			I AU LANT	
NONE			Sate of Disbursement	
Mailing Address				ΥY
	toto 25- Code			
City	state Zip Code			
Purpose of Disbursement	.]		Amount of Fact Distance and the	o Desire I
Candidate Name		Calmann	Amount of Each Disbursement thi	is renod
		Category/ Type	, ,	
Office Sought: House Disbursem	nent For: Primary General			
President	Other (specify) \blacktriangledown			
State: District:				
Futi Name (Last, First, Middle Initial)			Date of Disbursement	
			M M / D D / Y Y Y	* *
Mailing Address				
City 6	tate Zip Code			
Purpose of Disbursement				
•			Amount of Each Disbursement thi	is Period
Candidate Name		Category/ Type	_	
Office Sought: House Disbursem		. 140	, ,	•
⊢	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)			B	
•			Date of Disbursement N M / D D / Y Y Y	
Mailing Address				
City	tate Zip Code			
Purpose of Disbursement			Amount of Each Disbursement thi	is Period
Candidate Name	· · · -	Category/		VINVI
Office Sought: House Disbursem	ent For:	Туре	7 2	-
Senate	Primary General			
President (State: District:	Other (specify)			
			1	
SUBTOTAL of Disbursements This Page (optional)		>		
TOTAL This Period (last page this line number only).			-	.0
F-0			, ,	

SCHEDULE C (FEC Form 3X) LOANS

Use separate schedule(s) for each category of the Detailed Summary Page PAGE OF FOR LINE 13 OF FORM 3X

LOAN SOURCE Full Nam 人の 心ら Mailing Address	ne (Last, First, Middle Initial)		Ele	ction: Primary Generat Other (specify	y)
City	State	ZIP Code			
Original Amount of Loan	Cumulative Payr	·	Balance (Outstanding at	Close of This Per
, ,		, .		,	, .
TERMS					
Date Incur	red Da y Y Y Y Manada / B B	te Due Intere	≈st Rate •	% (арт)	Secured:
List All Endorsers or Gu	arantors (If any) to Loan Source				
1. Full Name (Last, First,	Middle Initial)	Name of Employer	r		
Mailing Address		Occupation	<u></u>		
City	State ZIP Code	Amount Guaranteed Outstanding:	5	1	
2. Full Name (Last, First,	Middle Initial)	Name of Employer	f		······································
Mailing Address		Occupation			· · · · · · · · · · · · · · · · · · ·
		Amount			
Chy	State ZIP Code	Guaranteed Outstanding:	,	7	•
3. Full Name (Last, First,	Middle (nitial)	Name of Employer	r		\
Mailing Address	· · · · · · · · · · · · · · · · · · ·	Occupation	 ,		
City	State ZIP Code	Amount Guaranteed Outstanding:	,	,	•
4. Full Name (Last, First,	Middle (ritigi)	Name of Employer	r		
Mailing Address		Occupation			
Cify	State ZIP Code	Amount Guaranteed Outstanding:	. ,	,	
		1		•	
BTOTALS This Period Th	ris Page (optional)	<u> </u>		,	, .
TALS This Period (last pa	age in this line anly)	>		_	\mathcal{C}

SCHEDULE C-1 (FEC Form 3X) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for Information found on Page of Schedule C

A SAMMAL (A	M MITTER		FEC	IDE	NTIF	CAT	nor	UN N	MBE
PRANCE COUNTY VETERANS CO TO SAVE THE BLIMP H	langua.		C	0	0 4	1	4	5	6
ENDING INSTITUTION (LENDER)	Amount of Loan	' -		ı	Interes	st Ra	ate	(APR)
None	, ,	•					•		%
ailing Address	Date Incurred or Established	M	r#	, p	<u>-</u>	,	Y	* 1	Y
ty State Zip Code	Date Due	. 15	ы	, ,	а с	1	Y	¥ 1	γ γ
A. Has loan been restructured? No Yes	If yes, date originally incurred	М	r#	r K	0	′	¥	γ 1	Y
B. If line of credit, Amount of this Draw:	Total Outstanding Balance:	·	,		,				- 1
C. Are other parties secondarily liable for the debt incurr No Yes (Endorsers and guarantors me	red? ust be reported on Schedule C.)		****				'		
Are any of the following pledged as collateral for the property, goods, negotiable instruments, certificates of stocks, accounts receivable, cash on deposit, or other	loan: real estate, personal f deposit, chattel papers,	What is	the		e of th		хоВа	teral?	•
No Yes If yes, specify:		Does th			_			cted : Yes	securi
E. Are any future contributions or future receipts of inter- collateral for the loan? No Yes if yes,	est income, pledged as	What is	the	'	nated		æ?	•	
A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).	Location of account:								
to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established:	Location of account: Address:								
to 11 CFR 100.82(e)(2) and 100.142(e)(2).			-						· _
to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established:	Address: City, State, Zip: as pledged for this loan, or if the a						equa	s or e	exceed
to 11 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: Summary of the types of collateral described above was	Address: City, State, Zip: as pledged for this loan, or if the a		sure	s rep	aymei	ni		y 1	
to f1 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: F. If neither of the types of collateral described above wathe loan amount, state the basis upon which this loan. G. COMMITTEE TREASURER Typed Name	Address: City, State, Zip: as pledged for this loan, or if the a	DAT	Sure:	s rep	aymei	ni		, . 	
to f1 CFR 100.82(e)(2) and 100.142(e)(2). Date account established: F. If neither of the types of collateral described above wathe loan amount, state the basis upon which this loan. G. COMMITTEE TREASURER Typed Name Signature	Address: City, State, Zip: as pledged for this loan, or if the an was made and the basis on which the basis on which the basis of the loan and other informations of the loan and other informations of comperable credit worthiness, a loan must be made on a basis.	DAI DAI ation re- orable a	gardi	ing the	ne ext	rensi	y ion o	of the	y y
Date account established: "" " " " " " " " " " " " " " " " " "	Address: City, State, Zip: as pledged for this loan, or if the an was made and the basis on which the basis on which the basis of the loan and other informations of the loan and other informations of comperable credit worthiness, a loan must be made on a basis.	DAI DAI ation re- orable a	gard at the assur	ing the	ne ext	rensi	y ion o	of the	, Y sed to

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

Excluding Loans

(Use separate schedule(s) for each numbered fine)

PAGE OF FOR I (check

Line number:	
k only one)	9
	10

	E COUNTY VE 70				·····			, <u>-</u>
A. Full (Name (Last, First, Middle Initia //// Address	l) of Debtor or Credit	or		Nature of Debt	(Purpose)	:	
City	State	Zip Co	xde					
Outsta	anding Balance Beginning This	Period			<u>[</u>			
	7 3 . • Amount Incurred This Period		Payment This Per	iod	Outstanding !	Balance at	Close of	This Perk
	, , .		, ,		,		3	•
B. FUILN	lame (Last, First, Middle Initial	of Debtor or Credito	vi		Nature of Debi	(Purpose)	:	-
Mailing A	Address		·······					
City	State	Zip Co	ode					
Outsta	anding Balance Beginning This	Period						
	Amount Incurred This Period		Payment This Per	iod	Outstanding 1	Balance at	Close of	This Perk
	, , .		,		,	•	,	•
C. Full	Name (Last, First, Middle Initia	d) of Debtor or Credit	to r		Nature of Debt	(Purpose)	:	
Mailling /	Address							
City		State	Zip Code	<u></u>	-			
Outsta	anding Balance Beginning This	Period			J		•	_
	Amount Incurred This Period		Payment This Per	iod	Outstanding I	Balance at	Close of	This Perio
	· , , .		, ,		;	•	7	
SUBTO	OTALS This Period This Page (optional)		>	,		7	-
TOTAL	S This Period (last page this fi	ne number only)			,	ı	,	. 0
TOTAL	OUTSTANDING LOANS from	Schedule C (last page	ge only)	>	;	ı	,	.0
) and 3) and carry forward to a							

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED IND	EPENDENT I	XPENDITURES	5				-	PAGE FOR LINE 2	OF 24 OF FORM	M 3X
AME OF COMM	ITTEE (in Full)	VETERM	s Cu	4417766					ON NUMBE	
*CHW#P	70 5	100 7	HE S	BLIMP H	ANLA	1	C	204	1451	6
Check if	24-hour notice	∫ 48-hour notic	28						, , -,	
Full Name (La	ast, First, Middle	Initial) of Payee				Date				
No	NE					N.	M /	D D /	YYY	v
Mailing Addre										
l						Amoun	rt			
City			State	Zip Code			1	,	•	
Purpose of E	xpenditure	<u> </u>		Category/ Type	Offic	ce Sough	nt:	House Senate	State: District:	
Name of Fed	eral Candidate S	upported or Oppose	ed by Expend	iture:				President		
			, , , , , , ,		Che	ock One:		Support	Орро	se
Calenda	ar Year-To-Date P for Off	er Election ice Sought	,	,	Dist	ott	t For: [ner (spe	Primary	Gene	ral
Full Name (L	ast, First, Middle	initial) of Payee			'	Date				
						N	ш /	D D /	Y Y Y	¥
Mailing Addre	18 8					1				
						Amour	nt			
City			State	Zip Code		1				
							,	,	-	
Purpose of E	xpenditure			Category/	Offi	ce Sough	rt:	House	State:	
				Туре				Senate	District:	
Name of Fed	eral Candidate S	upported or Oppose	od by Expend	iture:			<u> </u>	President	[
					Une	ck One:	<u> </u>	Support	Орро	88
Calenda	r Year-To-Date P	er Election			Dist	bursemen	it For: [Primary	Gene	rel
	for Off	ice Sought	,	, .		Ot	her (spe	œfy) ▶	—	
						-		-		
(a) SUBTOTA	L of Itemized Ind	ependent Expenditu	ires				,	1		0
							ŕ	,		•
(b) SUBTOTA	L of Unite rnized (ndependent Expend	dituresditures		>		,	,		0
		•					•	•		-
(c) TOTAL Inc	dependent Expend	iitures		·····	·····		,	,		0
<u> </u>										
with, or at the	request or sugge	y that the independ stion of, any candk arty committee or it	date or author	-			-			
Signature	ack)	>MOSel			Date C	7 ′	iż	, Zo	ěČ	
	<i>]</i>								-	

SCHEDULE F (FEC Form 3X)

ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

PAGE OF (2 U.S.C. §441a(d)) FOR LINE 25 OF FORM 3X (To be used only by Political Committees in the General Election) NAME OF COMMITTEE (In Full) Check if ORANGE COMNTY VETERANS COMMITTEE TO SOVE 24-hour notice Has your committee been designated to make coordinated expenditures by a political party committee? YES **₩** NO Making Address If YES, name the designating committee: City State ZIP Code Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Type Mailing Address Date City Zip Code State D D / Y Y Y Name of Federal Candidate Supported Ноцье Office Sought: State: Amount District: Senate: Presidential Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate > ing (2 U.S.C. §441a(i)/441a-1) Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Mailing Address Type Date City Žip Code State Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate ing (2 U.S.C. §441a(i)/441a-1) Purpose of Expenditure Full Name (Last, First, Middle Initial) of Each Payee Category/ Malling Address Туре Date City State Zip Code ' ' Y Y Y Name of Federal Candidate Supported Office Sought: House State: Amount Senate District: Presidential Aggregate General Election Limit Raised Due to Opponent's Spend-Expenditure for this Candidate ing (2 U.S.C. §441a(i)/441a-1) SUBTOTAL of Expenditures This Page (optional)...... 7 TOTAL This Period (last page this line number only)......

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER
 DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMI	County	VETGAANS	COMMITTE	6 70	SAVE	THE	BLOOP HAKEA	
	USE ONLY ONE SECTION, A or B							
		al Party Cou ge (select one)	nmittees					
	Presiden Senate-(tial-Only Election that and Senate Election Year sidential and Non-	ection Year (36% (21% Federal)	Federal)	ederal)			
Flat	Minimum F	regated Funded F	No EXP	ENDIRU	res 7	7445 F	ERIUM	
or		is spending more					3, U1166N	
Federal								
Nonfederal , %								
	ratio applies inistrative	to (check all that Generic Vo		Public Com	nmunication	s Referer	ncing Party Only	

SCHEDULE H2 (FEC Form 3X)

ALLOCATION RATIOS

PAGË	OF
PAGE	OF

NAME OF COMMITTEE (IN FUIL) ORANGE COUNTY VETERANS COUNTITIES TO SA	VE THE BUMP	HANGER					
RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.							
Methods of allocation:							
FUNDRAISING activities are allocated using the "funds received method" where the federal proportion of expenses must equal the federal proportion of monies raised.							
II. Shared DIRECT CANDIDATE SUPPORT activities are allocated accommented the federal proportion of disbursements is based on the benefit tivity. For PACs Only: Direct candidate support includes public commenderal and nonfederal candidates, regardless of whether there is a reare allocated using a time/space method.	it derived by federal cand nunications or voter drive:	lidates from the ac- s that refer to both					
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	. %	- %					
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS: New Previously Reported	. %	. o.e					
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundralsing Direct Candidate Support CHECK IF THE RATIO IS: New Revised Same as Previously Reported	- %	- %					
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Direct Candidate Support	. %	. %					
New Previously Reported							
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support CHECK IF THE RATIO IS:	. %	. %					
New Revised Same as Previously Reported							
ACTIVITY OR EVENT IDENTIFIER	FEDERAL %	NONFEDERAL %					
ACTIVITY IS: Fundraising Direct Candidate Support	6.7						
CHECK IF THE RATIO IS:	- %	. %					
New Revised Same as Previously Reported							

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

	PAGE	OF	•	_
į	FOR LINE	18a OF	FORM	зΧ

)RA	URE COMMITTEE (IN	VETER BAS	Committee	70	SONR	7116	Bune	HANGA	n
	E OF ACCOUNT		DATE OF RECI			···]	TOTAL AMOUN		
			tal es / De	D (Y Y Y 1	,	,	9	۵.
BRE	AKDOWN OF TRAN	SFER RECEIVED	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·				· · · · · · · · · · · · · · · · · · ·	
] 1)	Total Administrative	•	· · · · · · · · · · · · · · · · · · ·		*****************	****	9	,	-
i) ii)	Generic Voter Drive			4 1 4 4 - 6 4			9	3	
JB)	Exempt Activities			, ,	- 1 - 1 - 1 - 7 - 7 - 7 - 7 - 7 - 7 - 7	77118	,		
iv)	Direct Fundralsing	(List Activity or Event	(dentifier)				•	·	
	a)			7					
	b)	<u> </u>		7					
	a) Total Amount Tree	referred For Oleant Fo	androinina						
1	•		indraising			••••	D	ş	•
"	Direct Candidate S	upport (List Activity o	r Event Identmer)						
	a)		g	,					
]	b)			7					
			andidate Support				,	\$	
vI)	Public Communicat	tions Referring Only	to Party (Made by F	PAC}			7	,	-
		TOTALS	S FOR BREAKDOWN	OF TRAI	NSFER REC	EIVED		-	•
TOTAL	This Period (Adminis	trative)			,	,			
TOTAL	This Period (Generic	: Voter Drive)			9	,	•		
TOTAL	This Period (Exempt	Activities)	·			3	, .		
TOTAL	This Period (Direct F	undraising)				3	, .		
TOTAL	This Period (Oirect C	(tropport)				1	,		
TOTAL	This Period (Public (Communications Refer	ning Only to Party)				1 ?	-	
TOTAL	This Period (Total Ar	mount Transferred)					2	5	.0

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED

	SBURSEMENTS FO		D					PAGE	OF	
_	AME OF COMMITTEE (IN Full)	1/	. (OMMITTE &	70	Sove	746	BLIMA	HAA	
A.	Full Name (Last, First, Middle	•					ated Activity			
	Mailing Address							ve Fundra		·
		<u> </u>				님	Voter Drive	Direct	Candidate :	Support
	City	St	ate	Zip Code			Public Com	m (ref to part)	y only) by l	PAC
	Purpose of Disbursement:			· · · · · · · · · · · · · · · · · · ·		A⊪	ocated Activ	rity or Event Y	∕ear-To-Date)
	Activity or Event Identifier:			···		ļ <u>.</u>	,	, , , , , , , , , , , , , , , , , , ,		
	-				Category Type	// Date	<i>1</i> 4 M	/ p a .	ν γ	Y Y
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	,			, ,			,	,	-	
В.	Full Name (Last, First, Middle	Initial)				Alloc	eted Activity	or Event:		
	Haling Address	· · · · · ·					Administrati	ve 🔛 Fundre	ísing 🔲	Exempt
	Mailing Address					į 🗀	Voter Drive	Direct	Candidate	Support
	City	St	ate	Zip Code		\Box	Public Com	m (ref to part	y only) by l	PAC
	Purpose of Disbursement;			· · · · · · · · · · · · · · · · · · ·		All	ocated Activ	rity or Event \	ear-To-Date	3
	Activity or Count Identifies					ļ	,	3	-	
	Activity or Event Identifier:				Category Type	y/ Date	M U	/ D D	, A. A.	¥ ¥
	FEDERAL SHA	ARE +		NONFEDERAL S	SHARE	=		TOTAL AMO	UNT	
	, ,			, ,	_		,	,		
Ç.	Full Name (Last, First, Middle	Initie#)				Alloc	ated Activity	or Event:		
							Administrati	ve 🔲 Fundra	úsing 🔲	Exempt
	Mailing Address						Voter Drive	Direct	Candidate :	Support
	City	St	aie	Zip Code			Public Com	m (ref to part	y only) by i	PAC
	Dumana of Dishumament:					All	ocated Activ	Rity or Event 1	ear-To-Date	:
	Purpose of Disbursement:			Į						
	Activity or Event Identifier:					<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5	•	
					Category Type	// Date	ы ш	, ס ט י	Y Y	¥¥
	FEDERAL SHA	ARE +		NONFEDERAL S	SHARE	=		TOTAL AMO	UNT	
	, ,	•		, ,			,	1		
s	UBTOTAL of Allocated Federal	and NonFederal Activ	ity Ti	ıls Page				• •		
	FEDERAL SHA		•	_	HARE	=		TOTAL AMO	UNT	
	, ,	•		, ,			7	,	•	
T	OTAL This Period (last page for FEDERAL SHA	•	raJst	are to 21(a)(i) and : NONFEDERAL S		d share to	21(a)(ii))	TOTAL AMO	UNT	
		_			_		_		_	0

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 7//3/64
Delivery Confirmation™ or Signature Confir	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
PREPARER	9/14/00 DATE PREPARED
(3/2005)	