

# 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  
Los Angeles County Lincoln Clubs Political Action Committee

ADDRESS (number and street) 343 N. Citrus Avenue  
 Check if different than previously reported. (ACC)  
Los Angeles CA 90036

2. **FEC IDENTIFICATION NUMBER** C00248658  
**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 \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 06 30 2007

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 Mr. Douglas R. Boyd, Sr.

Signature of Treasurer Electronically Filed by Mr. Douglas R. Boyd, Sr. Date 07 31 2007

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 DISBURSEMENTS**

Write or Type Committee Name  
Los Angeles County Lincoln Clubs Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		87212.53
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	87212.53									
(c) Total Receipts (from Line 19) .....	4850.00	4850.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	92062.53	92062.53								
7. Total Disbursements (from Line 31) .....	72406.17	72406.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19656.36	19656.36								
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) .....	0.00									

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

Los Angeles County Lincoln Clubs Political Action Committee

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	4250.00	4250.00
(i) Itemized (use Schedule A) .....	100.00	100.00
(ii) Unitemized .....	4350.00	4350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	500.00	500.00
(c) Other Political Committees (such as PACs) .....	4850.00	4850.00
(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.) .....	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)) .....	4850.00	4850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4850.00	4850.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	70906.17	70906.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	70906.17	70906.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
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.....	500.00	500.00
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))..	72406.17	72406.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	72406.17	72406.17

**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) .....	4850.00	4850.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4850.00	4850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	70906.17	70906.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	70906.17	70906.17

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Los Angeles County Lincoln Clubs Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Tom Franklin

Mailing Address 10961 1/2 Roebling Ave.

City State Zip Code  
Los Angeles CA 90024

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

Name of Employer S/E Occupation  
Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2007

Transaction ID: SA11A1.6133

Amount of Each Receipt this Period  
500.00

Membership

**B.** Full Name (Last, First, Middle Initial)  
Peter kesterson

Mailing Address 1000 S. Catalina Ave. #208

City State Zip Code  
Redondo beach CA 90277

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

Name of Employer Kellu Williams Occupation  
Realtor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 19 / 2007

Transaction ID: SA11A1.6141

Amount of Each Receipt this Period  
500.00

Membership

**C.** Full Name (Last, First, Middle Initial)  
Mr. Eugene I. Masuda

Mailing Address 3010 San Pasqual Street

City State Zip Code  
Pasadena CA 91107

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

Name of Employer Pacifico Emplmnt. Agency Corp Occupation  
President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 18 / 2007

Transaction ID: SA11A1.6136

Amount of Each Receipt this Period  
500.00

Membership

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Los Angeles County Lincoln Clubs Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Kathleen D. Middleton

Mailing Address 24335 Mornington Drive

City State Zip Code  
Valencia CA 91355

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

Name of Employer N/A Occupation Homemaker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
06 / 29 / 2007

Transaction ID: SA11A1.6223

Amount of Each Receipt this Period  
500.00

Membership

**B.** Full Name (Last, First, Middle Initial)  
Lara Robert

Mailing Address 9066 Heron Ave.

City State Zip Code  
Fountain Valley CA 92708

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

Name of Employer City Of Torrance Occupation Police Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 30 / 2007

Transaction ID: SA11A1.6139

Amount of Each Receipt this Period  
500.00

Membership

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Margaret A. Sheppard

Mailing Address 1558 Hillcrest Ave.

City State Zip Code  
Glendale CA 91202

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

Name of Employer N/A Occupation Housewife

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2007

Transaction ID: SA11A1.6135

Amount of Each Receipt this Period  
500.00

Membership

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Nancy S. Spero		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 4948 Calvin		Transaction ID: SA11A1.6137
City State Zip Code Tarzana CA 91356	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>	Membership	
Name of Employer N/A Occupation Retired	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Dr. Patrick J. Wade		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 7
Mailing Address 1461 E. Chevy Chase Dr., #101		Transaction ID: SA11A1.6131
City State Zip Code Glendale CA 91206	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	Membership	
Name of Employer Glendale Neurological Medical Center Occupation Surgeon	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Mrs. Colleen McAndrews Wood		Date of Receipt M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 594 E. Channel Rd.		Transaction ID: SA11A1.6134
City State Zip Code Santa Monica CA 90402	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>	Membership	
Name of Employer Bell, McAndrews, Hiltachk & Davidian Occupation Attorney	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	4250.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 28
	(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)  
Los Angeles County Lincoln Clubs Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Buck McKeon for Congress

Mailing Address 24265 San Fernando Road

City State Zip Code  
Newhall CA 91321

FEC ID number of contributing federal political committee. **C** C00258244

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	0	7

Transaction ID: SA11C.6132

Amount of Each Receipt this Period  
500.00

Membership

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	500.00

**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 / 28

<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. ALL STAR Photographics, Inc.</b>		<b>Transaction ID: SB21B.6153</b>	
Mailing Address 12 Redhawk Street		Date of Disbursement MM / DD / YYYY 01 / 19 / 2007	
City Irvine	State CA	Zip Code 92604	Amount of Each Disbursement this Period 1120.60
Purpose of Disbursement Photography at Award Event		004 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. Andevan Company</b>		<b>Transaction ID: SB21B.6177</b>	
Mailing Address 299 S. Lake Street		Date of Disbursement MM / DD / YYYY 02 / 28 / 2007	
City Burbank	State CA	Zip Code 91502	Amount of Each Disbursement this Period 1504.68
Purpose of Disbursement Lincoln Presentation Busts		003 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. Concentric Communications</b>		<b>Transaction ID: SB21B.6170</b>	
Mailing Address 6055 East Washington Blv, Ste. 228		Date of Disbursement MM / DD / YYYY 02 / 15 / 2007	
City Commerce	State CA	Zip Code 90040	Amount of Each Disbursement this Period 962.68
Purpose of Disbursement Professional 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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3587.96</b>
<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)  
Los Angeles County Lincoln Clubs Political Action Committee

<b>A. Concentric Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 6055 East Washington Blv, Ste. 228 City Commerce State CA Zip Code 90040 Purpose of Disbursement Reimbursement for expenses 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>Transaction ID: SB21B.6182</b> Date of Disbursement 03 / 09 / 2007 Amount of Each Disbursement this Period 641.27 001 Category/ Type
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<b>B. Concentric Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 6055 East Washington Blv, Ste. 228 City Commerce State CA Zip Code 90040 Purpose of Disbursement Professional Services 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>Transaction ID: SB21B.6195</b> Date of Disbursement 03 / 31 / 2007 Amount of Each Disbursement this Period 5250.00 001 Category/ Type
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<b>C. Concentric Communications</b> Full Name (Last, First, Middle Initial) Mailing Address 6055 East Washington Blv, Ste. 228 City Commerce State CA Zip Code 90040 Purpose of Disbursement Consulting Services 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>Transaction ID: SB21B.6208</b> Date of Disbursement 04 / 13 / 2007 Amount of Each Disbursement this Period 286.49 001 Category/ Type
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6177.76
<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 12 / 28

<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Concentric Communications</b>		<b>Transaction ID:</b> SB21B.6220 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 6055 East Washington Blv, Ste. 228		Amount of Each Disbursement this Period 500.00
City Commerce State CA Zip Code 90040	001 Category/ Type	
Purpose of Disbursement Professional Services		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Ms Marilyn Epperson</b>		<b>Transaction ID:</b> SB21B.6159 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 300.00
City Los Angeles State CA Zip Code 90036	001 Category/ Type	
Purpose of Disbursement Acct. Svcs. Records and Reports		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Ms Marilyn Epperson</b>		<b>Transaction ID:</b> SB21B.6165 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 95.88
City Los Angeles State CA Zip Code 90036	001 Category/ Type	
Purpose of Disbursement Acct. Svcs. Records and Reports		
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) ..... ▶	895.88
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6180</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 300.00
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acct. Svcs. Records and Reports Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6184</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 75.50
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acct. Svcs. Records and Reports Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6189</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 800.00
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acct. Svcs. Records and Reports Candidate Name Category/Type 001	
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) ..... ▶	1175.50
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6206</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 20.49
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acc. Svcs. reimbursement photocopies 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6218</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 300.00
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acct. Svcs. Records and Reports 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Ms Marilyn Epperson</b>		<b>Transaction ID: SB21B.6219</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 343 N. Citrus Avenue		Amount of Each Disbursement this Period 300.00
City Los Angeles State CA Zip Code 90036	Purpose of Disbursement Acct. Svcs. Records and Reports 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) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	620.49
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Ms. Mary Louise Frawley</b>		<b>Transaction ID: SB21B.6163</b> Date of Disbursement MM / DD / YYYY 02 / 09 / 2007	
Mailing Address 10633 Wilkins Ave., #1		Amount of Each Disbursement this Period 2145.73	
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement Reimbursement for Meeting	Category/Type 001	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ms. Mary Louise Frawley</b>		<b>Transaction ID: SB21B.6178</b> Date of Disbursement MM / DD / YYYY 02 / 28 / 2007	
Mailing Address 10633 Wilkins Ave., #1		Amount of Each Disbursement this Period 2145.73	
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement Reimbursement for Meeing Venue	Category/Type 001	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary Louise Frawley</b>		<b>Transaction ID: SB21B.6204</b> Date of Disbursement MM / DD / YYYY 04 / 06 / 2007	
Mailing Address 10633 Wilkins Ave., #1		Amount of Each Disbursement this Period 1084.91	
City Los Angeles State CA Zip Code 90024	Purpose of Disbursement Reimbursement for meeting expenses	Category/Type 001	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5376.37
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Geezers</b>		<b>Transaction ID:</b> SB21B.6169 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 12120 Telegraph Road		Amount of Each Disbursement this Period 335.30
City Santa Fe Springs State CA Zip Code 90670	001 Category/ Type	
Purpose of Disbursement Meeting Venue Expense 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jaymar Printing</b>		<b>Transaction ID:</b> SB21B.6161 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7
Mailing Address 345 W. Foothill Blvd.		Amount of Each Disbursement this Period 1620.00
City Glendora State CA Zip Code 91741	004 Category/ Type	
Purpose of Disbursement Printing for Newsletter 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Jaymar Printing</b>		<b>Transaction ID:</b> SB21B.6207 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 345 W. Foothill Blvd.		Amount of Each Disbursement this Period 955.00
City Glendora State CA Zip Code 91741	003 Category/ Type	
Purpose of Disbursement Printing for newsletter 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) ..... ▶	2910.30
<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. JMS ONE CORP.</b>		<b>Transaction ID:</b> SB21B.6192 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 7
Mailing Address 2648 E. Workman Ave.		Amount of Each Disbursement this Period 6328.00
City West Covina State CA Zip Code 91791	Purpose of Disbursement Consulting Fees Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) <b>B. JMS ONE CORP.</b>		<b>Transaction ID:</b> SB21B.6193 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 2 7 / 2 0 0 7
Mailing Address 2648 E. Workman Ave.		Amount of Each Disbursement this Period 7473.00
City West Covina State CA Zip Code 91791	Purpose of Disbursement Consulting Fees Candidate Name Category/Type 001	
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) ▼

Full Name (Last, First, Middle Initial) <b>C. JMS ONE CORP.</b>		<b>Transaction ID:</b> SB21B.6216 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address 2648 E. Workman Ave.		Amount of Each Disbursement this Period 10000.00
City West Covina State CA Zip Code 91791	Purpose of Disbursement Consulting Fees Candidate Name Category/Type 001	
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) ..... ▶	23801.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. KD PARTNERS LLC</b>		<b>Transaction ID: SB21B.6150</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 6 / 2 0 0 7
Mailing Address 525 E. Colorado Blvd., Ste, 300		Amount of Each Disbursement this Period 1500.00
City Pasadena State CA Zip Code 91101		
Purpose of Disbursement Meeting Venue Candidate Name	001 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Wilbur W. Lorbeer</b>		<b>Transaction ID: SB21B.6167</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 2 / 2 0 0 7
Mailing Address 5320 E. Second St., Ste. 9		Amount of Each Disbursement this Period 225.00
City Long Beach State CA Zip Code 90803		
Purpose of Disbursement Reimbursement Meeting Venue Candidate Name	003 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Wilbur W. Lorbeer</b>		<b>Transaction ID: SB21B.6210</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 5320 E. Second St., Ste. 9		Amount of Each Disbursement this Period 296.98
City Long Beach State CA Zip Code 90803		
Purpose of Disbursement Reimbursement meeting event costs Candidate Name	003 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) ..... ▶	2021.98
<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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Marriott International</b>		<b>Transaction ID: SB21B.6188</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 6 / 2 0 0 7
Mailing Address P. O. Box 403003		Amount of Each Disbursement this Period 591.88
City Atlanta State GA Zip Code 30384	Purpose of Disbursement Meeting Venue Candidate Name 001 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Marriott International</b>		<b>Transaction ID: SB21B.6196</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7
Mailing Address P. O. Box 403003		Amount of Each Disbursement this Period 532.00
City Atlanta State GA Zip Code 30384	Purpose of Disbursement Meeting Venue Expense Candidate Name 001 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6143</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 2 / 2 0 0 7
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services Candidate Name 001 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) ..... ▶	3123.88
<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6158</b> Date of Disbursement 02 / 01 / 2007
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6179</b> Date of Disbursement 02 / 28 / 2007
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services Candidate Name Category/Type 001	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6194</b> Date of Disbursement 03 / 31 / 2007
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00
City Commerce State CA Zip Code 90040	Purpose of Disbursement Consulting Fees Candidate Name Category/Type 001	
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) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6213</b> Date of Disbursement 04 / 17 / 2007	
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 1841.75	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Reimbursement for expenses	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6214</b> Date of Disbursement 04 / 30 / 2007	
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6217</b> Date of Disbursement 05 / 31 / 2007	
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services	001 Category/Type	
Candidate Name	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5841.75
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6221</b> Date of Disbursement 06 / 30 / 2007	
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 2000.00	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Professional Services	001 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. Francisco Martinez</b>		<b>Transaction ID: SB21B.6222</b> Date of Disbursement 06 / 30 / 2007	
Mailing Address 6055 E. Washington Blvd., Ste. 228		Amount of Each Disbursement this Period 10.00	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Reimbursement expense Prof. Svcs.	001 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Pacific Palms</b>		<b>Transaction ID: SB21B.6145</b> Date of Disbursement 01 / 16 / 2007	
Mailing Address 1 Industry Hills Parkway		Amount of Each Disbursement this Period 621.57	
City City of Industry State CA Zip Code 91741	Purpose of Disbursement Meeting Venue	001 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) ..... ▶	2631.57
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Pacific Palms</b>		<b>Transaction ID:</b> SB21B.6168 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 1 Industry Hills Parkway		<b>Amount of Each Disbursement this Period</b> 544.03
City State Zip Code City of Industry CA 91741		
Purpose of Disbursement Meeting Candidate Name	001 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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Pacific Palms</b>		<b>Transaction ID:</b> SB21B.6197 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 7
Mailing Address 1 Industry Hills Parkway		<b>Amount of Each Disbursement this Period</b> 535.84
City State Zip Code City of Industry CA 91741		
Purpose of Disbursement Meeting Venue Expense Candidate Name	001 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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Mr. William M. Poindexter, Esq.</b>		<b>Transaction ID:</b> SB21B.6162 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7
Mailing Address 624 S. Grand Ave., Ste. 2420		<b>Amount of Each Disbursement this Period</b> 521.60
City State Zip Code Los Angeles CA 90017		
Purpose of Disbursement Reimbursement for Meeting Candidate Name	001 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) ..... ▶	1601.47
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

# 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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Mr. William M. Poindexter, Esq.</b>		<b>Transaction ID: SB21B.6171</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 7	
Mailing Address 624 S. Grand Ave., Ste. 2420		Amount of Each Disbursement this Period 585.00	
City Los Angeles State CA Zip Code 90017	Purpose of Disbursement Reimbursement for Meeting Expense	001 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) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mr. William M. Poindexter, Esq.</b>		<b>Transaction ID: SB21B.6205</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 0 7	
Mailing Address 624 S. Grand Ave., Ste. 2420		Amount of Each Disbursement this Period 505.00	
City Los Angeles State CA Zip Code 90017	Purpose of Disbursement Meeting venue expense reimbursement	001 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) ▼		

Full Name (Last, First, Middle Initial) <b>C. Republican Party of Los Angeles County</b>		<b>Transaction ID: SB21B.6183</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 0 7	
Mailing Address 6055 E. Washington Blvd.		Amount of Each Disbursement this Period 794.40	
City Commerce State CA Zip Code 90040	Purpose of Disbursement Reimbursement for meeting expenses	001 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) ..... ▶	1884.40
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Prof. Barbara S. Stone</b>		<b>Transaction ID: SB21B.6157</b> Date of Disbursement MM / DD / YYYY 01 / 22 / 2007
Mailing Address 15840 Arbela		Amount of Each Disbursement this Period 295.00
City Whittier State CA Zip Code 90603	Purpose of Disbursement Reimbursement for Board Meeting Expense 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Prof. Barbara S. Stone</b>		<b>Transaction ID: SB21B.6212</b> Date of Disbursement MM / DD / YYYY 04 / 16 / 2007
Mailing Address 15840 Arbela		Amount of Each Disbursement this Period 300.00
City Whittier State CA Zip Code 90603	Purpose of Disbursement Board Meeting Costs 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) ▼	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. TPC at VALENCIA</b>		<b>Transaction ID: SB21B.6187</b> Date of Disbursement MM / DD / YYYY 03 / 23 / 2007
Mailing Address 26550 Heritage View Lane		Amount of Each Disbursement this Period 1971.66
City Valencia State CA Zip Code 91381	Purpose of Disbursement Meeting Venue Expense 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) ▼	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2566.66
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**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)

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<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)

Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Vernon Van</b>		<b>Transaction ID: SB21B.6172</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 7	
Mailing Address P. O. Box 14749		Amount of Each Disbursement this Period 205.00	
City Long Beach State CA Zip Code 90803	Purpose of Disbursement Consulting Services 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) ▼	
		001 Category/ Type	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Sophie Wong</b>		<b>Transaction ID: SB21B.6209</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 565 Jade Tree Dr.		Amount of Each Disbursement this Period 300.00	
City Monterey Park State CA Zip Code 91754	Purpose of Disbursement Reimbursement event venue costs 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) ▼	
		003 Category/ Type	

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

505.00

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

70721.97

**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)

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<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)  
Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial) <b>A. Community College Coalition</b>		<b>Transaction ID: SB23.6181</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7
Mailing Address P. O. Box 389		Amount of Each Disbursement this Period 1000.00
City Winnetka	State CA Zip Code 91396	
Purpose of Disbursement Contribution		011 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) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

# 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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Los Angeles County Lincoln Clubs Political Action Committee

Full Name (Last, First, Middle Initial)

**A.** National Federation of Republican Women

Mailing Address 1281 E. Miramar Drive

City Fullerton State CA Zip Code 92831

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6203

Date of Disbursement

03 / 31 / 2007

Amount of Each Disbursement this Period

500.00

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

500.00

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

500.00