

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2008 DEC 04 AM 11:25

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

California Water Service Group

ADDRESS (number and street) 1720 North First Street

Check if different than previously reported. (ACC)

San Jose CA 95112

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C 00357608

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on MM / DD / YYYY in the State of

- (d) 30-Day POST-Election Report for the:
- | | | |
|---|---------------------------------------|--|
| <input checked="" type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|---|---------------------------------------|--|

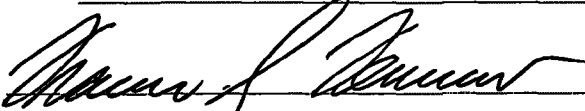
Election on 11 / 04 / 2008 in the State of CA

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

10 / 01 / 2008 through 11 / 24 / 2008

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 Francis S. Ferraro

Signature of Treasurer 

Date MM / DD / YYYY

12 / 01 / 2008

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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FEC FORM 3X
Rev. 12/2004

28039940189

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

California Water Service Group

Report Covering the Period:

From:

MM / DD / YYYY
10 / 01 / 2008

To:

MM / DD / YYYY
11 / 24 / 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2008"/>		20,967.55
(b) Cash on Hand at Beginning of Reporting Period.....	17,603.55	
(c) Total Receipts (from Line 19)	3,210.00	9,846.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	20,813.55	30,813.55
7. Total Disbursements (from Line 31)	6,500.00	16,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14,313.55	14,313.55
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	



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

28039940190

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

California Water Service Group

Report Covering the Period: From:

MM / DD / YYYY
10 / 01 / 2008

To:

MM / DD / YYYY
11 / 24 / 2008

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A).....

2,775.00

4,330.00

(ii) Unitemized.....

435.00

5,516.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

3,210.00

9,846.00

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

3,210.00

9,846.00

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

3,210.00

9,846.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

3,210.00

9,846.00

28039940191

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0	0
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,500.00	16,500.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6,500.00	16,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	6,500.00	16,500.00

28039940192

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	3,210.00	9,846.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,210.00	9,846.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0	0

28039940193

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 7	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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	

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)
California Water Service Group

A. Full Name (Last, First, Middle Initial) Bailey, Scott			Date of Receipt payroll deduction <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 2042 2nd Street				
City Selma	State CA	Zip Code 93662		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <input type="text"/> 125.00 (\$25 biweekly)	
Name of Employer CA Water Service Company		Occupation District Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 600.00		

B. Full Name (Last, First, Middle Initial) Caldwell, Jack			Date of Receipt payroll deduction <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 201 South First Street				
City Dixon	State CA	Zip Code 95620		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <input type="text"/> 75.00 (\$15 biweekly)	
Name of Employer CA Water Service Company		Occupation Local Manager		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 360.00		

C. Full Name (Last, First, Middle Initial) Duncan, Darin			Date of Receipt payroll deduction <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 3351 El Camino Real, Suite 190				
City Atherton	State CA	Zip Code 94207		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period <input type="text"/> 75.00 (\$15 biweekly)	
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text"/> 360.00		

SUBTOTAL of Receipts This Page (optional).....	<input type="text"/> 275.00
TOTAL This Period (last page this line number only).....	<input type="text"/>

28039940194

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 7

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)

California Water Service Group

<p>A. Full Name (Last, First, Middle Initial) Ferraro, Francis, S.</p> <p>Mailing Address 1720 North First Street</p> <p>City San Jose State CA Zip Code 95112</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CA Water Service Company Occupation Vice President, Corp. Dev.</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 960.00</p>		<p>Date of Receipt payroll deduction M M M / D D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period 200.00 (\$40 biweekly)</p>
<p>B. Full Name (Last, First, Middle Initial) Rossi, Michael, J.</p> <p>Mailing Address 1720 North First Street</p> <p>City San Jose State CA Zip Code 95112</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CA Water Service Company Occupation V.P., Eng. & Water Quality</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 480.00</p>		<p>Date of Receipt payroll deduction M M M / D D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period 100.00 (\$20 biweekly)</p>
<p>C. Full Name (Last, First, Middle Initial) Armendariz, Daniel</p> <p>Mailing Address 195 South N Street</p> <p>City Livermore State CA Zip Code 94550</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CA Water Service Company Occupation Superintendent</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 240.00</p>		<p>Date of Receipt payroll deduction M M M / D D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period 50.00 (\$10 biweekly)</p>
<p>SUBTOTAL of Receipts This Page (optional).....▶</p>		<p>350.00</p>
<p>TOTAL This Period (last page this line number only).....▶</p>		<p></p>

28039940195

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

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

FOR LINE NUMBER: PAGE 3 OF 7
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
California Water Service Group

A. Full Name (Last, First, Middle Initial)
Carrasco, Anthony

Mailing Address
341 North Delaware Street

City San Mateo State CA Zip Code 94401

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

Name of Employer CA Water Service Company Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

B. Full Name (Last, First, Middle Initial)
Cayas, Teresita

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Water Service Company Occupation Regulatory Analyst

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

C. Full Name (Last, First, Middle Initial)
Dean, Shannon

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Water Service Company Occupation Dir., Corp. Communications

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

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

150.00

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

28039940196

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

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

FOR LINE NUMBER: PAGE 4 OF 7
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
California Water Service Group

A. Full Name (Last, First, Middle Initial)
Ekstrom, Paul, G.

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

FEC ID number of contributing federal political committee. C

Name of Employer CA Water Service Company Occupation V.P., Cust. Serv. & Info. Sys.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

B. Full Name (Last, First, Middle Initial)
Green, James, E.

Mailing Address
3725 South H Street

City Bakersfield State CA Zip Code 93304

FEC ID number of contributing federal political committee. C

Name of Employer CA Water Service Company Occupation Supt.-Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

C. Full Name (Last, First, Middle Initial)
Karraker, David, R.

Mailing Address
3316 West Beverly Boulevard

City Montebello State CA Zip Code 90640

FEC ID number of contributing federal political committee. C

Name of Employer CA Water Service Company Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

28039940197

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5 OF 7	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)
California Water Service Group

A. Full Name (Last, First, Middle Initial)
McFarlane, Christine

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Water Service Company Occupation V.P., Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
MM / DD / YYYY

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

B. Full Name (Last, First, Middle Initial)
Mirwald, Philip

Mailing Address
216 North Valley Oaks Drive

City Visalia State CA Zip Code 93292

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

Name of Employer CA Water Service Company Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
MM / DD / YYYY

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

C. Full Name (Last, First, Middle Initial)
Moilan, Ross, M.

Mailing Address
1550 West Fremont Street

City Stockton State CA Zip Code 95203

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

Name of Employer CA Water Service Company Occupation District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
MM / DD / YYYY

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

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

28039940198

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 7	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
California Water Service Group

A. Full Name (Last, First, Middle Initial)
Peinado, Salvador

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

FEC ID number of contributing federal political committee. C

Name of Employer CA Water Service Company Occupation Manager of Purchasing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

B. Full Name (Last, First, Middle Initial)
Schuppe, Charles, R.

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

FEC ID number of contributing federal political committee. C

Name of Employer CA Water Service Company Occupation Commercial Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

C. Full Name (Last, First, Middle Initial)
Tamble, Terry

Mailing Address
67-1161 Mamalahoa Highway, Suite 5

City Kamuela State HI Zip Code 96743

FEC ID number of contributing federal political committee. C

Name of Employer Hawaii Water Service Company Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

SUBTOTAL of Receipts This Page (optional).....▶ 150.00

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

28039940199

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

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

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NAME OF COMMITTEE (In Full)
California Water Service Group

A. Full Name (Last, First, Middle Initial)
Valles, Rudy, A.

Mailing Address
3725 South H Street

City Bakersfield State CA Zip Code 93304

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

Name of Employer CA Water Service Company Occupation Asst. District Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt payroll deduction
MM / DD / YYYY

Amount of Each Receipt this Period
50.00
(\$10 biweekly)

B. Full Name (Last, First, Middle Initial)
Foy, Robert, W.

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Water Service Group Occupation Chairman of the Board

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2008

Amount of Each Receipt this Period
750.00

C. Full Name (Last, First, Middle Initial)
Nelson, Peter, C.

Mailing Address
1720 North First Street

City San Jose State CA Zip Code 95112

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

Name of Employer CA Water Service Group Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
10 / 10 / 2008

Amount of Each Receipt this Period
750.00

SUBTOTAL of Receipts This Page (optional).....▶ 1,550.00

TOTAL This Period (last page this line number only).....▶ 2,775.00

28039940200

**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 1 OF 5

<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)
California Water Service Group

Full Name (Last, First, Middle Initial) A. Mike Thompson for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address 5429 Madison Avenue		Amount of Each Disbursement this Period 500.00
City Sacramento	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Mike Thompson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 1		

Full Name (Last, First, Middle Initial) B. Wally Herger for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 1500		Amount of Each Disbursement this Period 500.00
City Chico	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Wally Herger		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 2		

Full Name (Last, First, Middle Initial) C. McClintock for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address 1700 Eureka Road, Suite 170		Amount of Each Disbursement this Period 500.00
City Roseville	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Tom McClintock		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 4		

SUBTOTAL of Disbursements This Page (optional).....▶	1,500.00
TOTAL This Period (last page this line number only).....▶	

28039940201

**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 2 OF 5				
	<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)
California Water Service Group

Full Name (Last, First, Middle Initial) A. Ellen Tauscher for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 1285		
City Alamo	State CA	Zip Code 94507
Purpose of Disbursement Contribution to Federal Candidate		Amount of Each Disbursement this Period 500.00
Candidate Name Ellen Tauscher		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 10	

Full Name (Last, First, Middle Initial) B. Jackie Speier for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 112		
City Burlingame	State CA	Zip Code 94010
Purpose of Disbursement Contribution to Federal Candidate		Amount of Each Disbursement this Period 500.00
Candidate Name Jackie Speier		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 12	

Full Name (Last, First, Middle Initial) C. Honda for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 110188		
City Campbell	State CA	Zip Code 95011
Purpose of Disbursement Contribution to Federal Candidate		Amount of Each Disbursement this Period 500.00
Candidate Name Michael Honda		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 15	

SUBTOTAL of Disbursements This Page (optional).....▶	1,500.00
TOTAL This Period (last page this line number only).....▶	

28039940202

**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 3 OF 5
	<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)
California Water Service Group

Full Name (Last, First, Middle Initial) A. Friends of Farr		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 122		Amount of Each Disbursement this Period 500.00
City Monterey	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Sam Farr		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 17	

Full Name (Last, First, Middle Initial) B. Friends of Dennis Cardoza		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 2749		Amount of Each Disbursement this Period 500.00
City Merced	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Dennis Cardoza		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 18	

Full Name (Last, First, Middle Initial) C. Jim Costa for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address 2037 West Bullard Avenue, PMB #355		Amount of Each Disbursement this Period 500.00
City Fresno	State CA	
Purpose of Disbursement Contribution to Federal Candidate		
Candidate Name Jim Costa		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 20	

SUBTOTAL of Disbursements This Page (optional).....	1,500.00
TOTAL This Period (last page this line number only).....	

28039940203

**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 4 OF 5

<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)
California Water Service Group

Full Name (Last, First, Middle Initial) A. Devin Nunes Campaign Committee		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 6545		Amount of Each Disbursement this Period 500.00
City Visalia	State CA	
Zip Code 93290	Category/ Type 011	
Purpose of Disbursement Contribution to Federal Candidate	Candidate Name Devin Nunes	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Kevin McCarthy for Congress		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 12667		Amount of Each Disbursement this Period 500.00
City Bakersfield	State CA	
Zip Code 93389	Category/ Type 011	
Purpose of Disbursement Contribution to Federal Candidate	Candidate Name Kevin McCarthy	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Mazie Hirono		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008
Mailing Address P.O. Box 677		Amount of Each Disbursement this Period 500.00
City Honolulu	State HI	
Zip Code 96809	Category/ Type 011	
Purpose of Disbursement Contribution to Federal Candidate	Candidate Name Mazie Hirono	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 2	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional).....▶	1,500.00
TOTAL This Period (last page this line number only).....▶	

28039940204

**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 5 OF 5				
	<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

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NAME OF COMMITTEE (In Full)
California Water Service Group

Full Name (Last, First, Middle Initial) A. People for Pearce		Date of Disbursement MM / DD / YYYY 10 / 29 / 2008	
Mailing Address 1005 21st Street, Suite B			
City Rio Rancho	State NM	Zip Code 87124	
Purpose of Disbursement Contribution to Federal Candidate		Amount of Each Disbursement this Period 500.00	
Candidate Name Steve Pearce		Category/Type 011	
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: NM	District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
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) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period	
Candidate Name		Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	500.00
TOTAL This Period (last page this line number only).....▶	6,500.00

28039940205

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

28039940206

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FEDEX</i>	Shipping Date <i>12/3/08</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

QAD
 PREPARER
 (3/2005)

12/4/08
 DATE PREPARED