

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For 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

CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

ADDRESS (number and street)

422 LINCOLN AVENUE

Check if different than previously reported. (ACC)

ALAMEDA

CA

94501

2. FEC IDENTIFICATION NUMBER

C00393272

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT NEW (N) OR AMENDED (A)

CA 09

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)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

In the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 01 01 2005 through 03 31 2005

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. Brion Wikes

Signature of Treasurer Electronically Filed by Mr. Brion Wikes Date 04 11 2005

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

FEC FORM 3
(Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Report Covering the Period: From: ^M 0 ^M 1 ^D 0 ^D 1 ^Y 2 ^Y 0 ^Y 0 ^Y 5 To: ^V 0 ^M 3 ^D 3 ^D 1 ^Y 2 ^Y 0 ^Y 0 ^Y 5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a)).....	15366.00	71551.59
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	3375.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	15366.00	68176.59
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	10853.54	109725.29
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	83.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	10853.54	109641.99
8. Cash on Hand at Close of Reporting Period (from Line 27).....	10119.93	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	7130.69	

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

FEC Form 3 (Revised 02/2005)

Page 3

Write or Type Committee Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Report Covering the Period: From: ^{M M} 01 ^{Y Y} 01 ^{V V} 2005 To: ^{M M} 03 ^{Y Y} 31 ^{V V} 2005

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	980.00	8150.00
(ii) Unitemized.....	14386.00	65401.59
(iii) TOTAL of contributions from Individuals..... ▶	15366.00	71551.59
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	15366.00	71551.59
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	83.30
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	15366.00	71634.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	10853.54	109725.29
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
<hr/>		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
<hr/>		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	3375.00
(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 20(a), (b), and (c)).....	0.00	3375.00
<hr/>		
21. OTHER DISBURSEMENTS.....	0.00	0.00
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	10853.54	113100.29

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5607.47
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	15366.00
25. SUBTOTAL (add Line 23 and Line 24).....	20973.47
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	10853.54
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	10119.93

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17

(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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)
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial) A. Mr. James A. Deganahl		Date of Receipt M / D / Y 01 / 10 / 2005
Mailing Address 2575 S French Ave		Transaction ID: SA11A1.33044
City Sanford	State FL	Zip Code 32773-5319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Ret	Occupation RETIRED	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) B. Mr. Glenn H. Fishbeck		Date of Receipt M / D / Y 02 / 09 / 2005
Mailing Address 773B W Shore Rd		Transaction ID: SA11A1.32566
City Pasadena	State MD	Zip Code 21122-1519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer U.S. DEPT. OF DEFENSE	Occupation ANALYST	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Mr. William C. Halaner		Date of Receipt M / D / Y 01 / 17 / 2005
Mailing Address 505 S Main St		Transaction ID: SA11A1.33097
City Pinckneyville	State IL	Zip Code 62274-1739
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	405.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 6 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial) A. Mr. W. H. Kleiner		Date of Receipt M / D / Y 01 / 25 / 2005
Mailing Address 1725 88th Pl NE		Transaction ID: SA11A1.33004
City Clyde Hill	State WA	Zip Code 98004-3213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Ret	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Mr. Steven Kuraski		Date of Receipt M / D / Y 01 / 17 / 2005
Mailing Address 8411 Laurel Ave		Transaction ID: SA11A1.33008
City Indianhead Park	State IL	Zip Code 60525-4464
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer None	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) C. Mr. Chester E. Strala		Date of Receipt M / D / Y 01 / 19 / 2005
Mailing Address PO Box 458		Transaction ID: SA11A1.33038
City Jonesboro	State AR	Zip Code 72403-0458
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer Retired	Occupation Retired	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	225.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

A. Full Name (Last, First, Middle Initial) Dr. Richard Tern Mailing Address 10532 Cutton Willow Dr City State Zip Code Las Vegas NV 89134-7346 FEC ID number of contributing federal political committee. C Name of Employer Occupation Retired Receipt For: 2004 Election Cycle-to-Date ▼ Primary X General Other (specify) ▼ 400.00		Date of Receipt M / D / Y Y Y Y 01 / 17 / 2005 Transaction ID: SA11A1.32642 Amount of Each Receipt this Period 200.00 Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
B. Full Name (Last, First, Middle Initial) Mr. Wilson Young Mailing Address 17978 Knight Dr City State Zip Code Castro Valley CA 94546-1218 FEC ID number of contributing federal political committee. C Name of Employer Occupation S W S President Receipt For: 2004 Election Cycle-to-Date ▼ Primary X General Other (specify) ▼ 350.00		Date of Receipt M / D / Y Y Y Y 01 / 24 / 2005 Transaction ID: SA11A1.33040 Amount of Each Receipt this Period 150.00 Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	350.00
TOTAL This Period (last page this line number only)	▶	980.00

**SCHEDULE B (FEC Form 3)
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"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial)
A. Direct Mail Processors

Mailing Address 1150 Conrad Court

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Caging - direct mail

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.33268
Date of Disbursement
01 / 21 / 2005

Amount of Each Disbursement this Period
1305.91

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Direct Mail Processors

Mailing Address 1150 Conrad Court

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement
Caging - direct mail

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.33269
Date of Disbursement
02 / 18 / 2005

Amount of Each Disbursement this Period
1079.54

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. eDonation/Campaign Solutions

Mailing Address 118 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Fundraising Fees

Candidate Name

Office Sought: House Senate President
State: District

Disbursement For: 2004
Primary X General
Other (specify) ▼

Category/
Type

Transaction ID: SB17.33280
Date of Disbursement
01 / 31 / 2005

Amount of Each Disbursement this Period
41.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ 2426.45

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

**SCHEDULE B (FEC Form 3)
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"/>	17 20a	<input type="checkbox"/>	18 20b	<input type="checkbox"/>	19a 20c	<input type="checkbox"/>	19b 21
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NAME OF COMMITTEE (In Full)
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial)

A. HSP Direct

Mailing Address 2325 Dulles Corner Blvd
Suite 47D

City Hemdon State VA Zip Code 20171

Purpose of Disbursement
Creative - direct mail

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.3327D

Date of Disbursement

01 / 07 / 2005

Amount of Each Disbursement this Period

2428.72

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

B. HSP Direct

Mailing Address 2325 Dulles Corner Blvd
Suite 47D

City Hemdon State VA Zip Code 20171

Purpose of Disbursement
Creative - direct mail

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.33271

Date of Disbursement

01 / 21 / 2005

Amount of Each Disbursement this Period

2186.00

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)

C. MDI Imaging & Mail

Mailing Address 21721 Filigree Court

City Ashburn State VA Zip Code 20147

Purpose of Disbursement
Postage - direct mail

Candidate Name

Office Sought: House Senate President
Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
Type

Transaction ID: SB17.33272

Date of Disbursement

01 / 27 / 2005

Amount of Each Disbursement this Period

2383.85

Refund or Disposal of Excess
Contributions Required Under
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

6998.66

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

SCHEDULE B (FEC Form 3)
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"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial)
A. Patriot Data Services

Mailing Address 11951 Freedom Drive
 Suite 1120

City Reston State VA Zip Code 20190

Purpose of Disbursement
 Data Services - direct mail

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.33273
 Date of Disbursement
 01 / 21 / 2005

Amount of Each Disbursement this Period
 452.68

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Patriot Data Services

Mailing Address 11951 Freedom Drive
 Suite 1120

City Reston State VA Zip Code 20190

Purpose of Disbursement
 Data Services - direct mail

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.33274
 Date of Disbursement
 02 / 03 / 2005

Amount of Each Disbursement this Period
 224.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Patriot Data Services

Mailing Address 11951 Freedom Drive
 Suite 1120

City Reston State VA Zip Code 20190

Purpose of Disbursement
 Data Services - direct mail

Candidate Name

Office Sought: House Senate President
 State: District

Disbursement For: 2004
 Primary X General
 Other (specify) ▼

Category/
 Type

Transaction ID: SB17.33275
 Date of Disbursement
 02 / 18 / 2005

Amount of Each Disbursement this Period
 140.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **816.68**

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

SCHEDULE B (FEC Form 3)
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"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
	20a		20b		20c		21

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NAME OF COMMITTEE (In Full)
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial)

A. US Postmaster

Mailing Address 200 Lawyers Rd Nw

City Vienna State VA Zip Code 22180-9998

Purpose of Disbursement
 Postage - direct mail

Candidate Name

Office Sought: House Senate President
 Disbursement For: 2004 Primary X General Other (specify) ▼

State: District

Category/
 Type

Transaction ID: SB17.33279

Date of Disbursement

01 / 04 / 2005

Amount of Each Disbursement this Period

412.00

Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶

412.00

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

10653.79

SCHEDULE C (FEC Form 3)

LOANS

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

NAME OF COMMITTEE (In Full)
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Transaction ID: SC/10.4100

LOAN SOURCE Full Name (Last, First, Middle Initial) CLAUDIA BERMUDEZ, - Personal funds	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 151 LAKEBIDE DRIVE #111	
City OAKLAND State CA ZIP Code 94612	
Original Amount of Loan 4000.00	Cumulative Payment To Date 2100.00
	Balance Outstanding at Close of This Period 1900.00

TERMS	Date Incurred	Date Due	Interest Rate	Secured:
	02 nd 11 th 2004	On Demand	0 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)	1900.00
TOTALS This Period (last page in this line only)	1900.00
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

NAME OF COMMITTEE (In Full)

CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

FOR LINE NUMBER:
(check only one)

9
 10

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
CLAUDIA BERMUDEZ

Nature of Debt (Purpose):
Campaigning expenses

Mailing Address 151 LAKESIDE DRIVE #111

City	State	ZIP Code
OAKLAND	CA	94612

Outstanding Balance Beginning This Period

Transaction ID: SD10.33298

5230.69

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

5230.69

1) SUBTOTALS This Period This Page (optional)	▶	5230.69
2) TOTALS This Period (last page this line number only)	▶	5230.69
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only)	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33044

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33037

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33004

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33009

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33006

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.32642

Form/Schedule: SA11A1 HSP-041505

Transaction ID: SA11A1.33040
