

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

Emken 2010

ADDRESS (number and street) PO Box 1158

Check if different than previously reported. (ACC)

Danville CA 94526

2. **FEC IDENTIFICATION NUMBER** C00468595

CITY STATE ZIP CODE STATE DISTRICT

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

CA 11

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 05 20 2010 through 06 30 2010

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 Paul Kilgore

Signature of Treasurer Electronically Filed by Paul Kilgore Date 07 15 2010

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

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Emken 2010

Report Covering the Period: From:

M	M
0	5

D	D
2	0

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	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(e)).....	13735.00	250001.00
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	1000.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	13735.00	249001.00
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	97019.44	408331.21
(b) Total Offsets to Operating Expenditures (from Line 14).....	104.59	104.59
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	96914.85	408226.62
8. Cash on Hand at Close of Reporting Period (from Line 27).....	40774.38	
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).....	200000.00	

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 12/2003)

Write or Type Committee Name
Emken 2010

Report Covering the Period: From:

M	M
0	5

D	D
2	0

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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	12550.00	232946.01
(i) Itemized (use Schedule A).....	1185.00	11821.00
(ii) Unitemized.....	13735.00	244767.01
(iii) TOTAL of contributions from individuals..... ▶	0.00	0.00
(b) Political Party Committees.....	0.00	5233.99
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	13735.00	250001.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	0.00	300000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	300000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	104.59	104.59
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)..... ▶	13839.59	550105.59

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	97019.44	408331.21
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	100000.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	100000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	1000.00
(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	1000.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	97019.44	509331.21

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	123954.23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	13839.59
25. SUBTOTAL (add Line 23 and Line 24).....	137793.82
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	97019.44
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	40774.38

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 / 34
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Curtis Arledge		Date of Receipt
	Mailing Address 61 Holly Ln		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Darien	CT	06820-3308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Black Rock		Occupation CFO	Transaction ID: 00525.C367
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="2400.00"/>
		<input type="text" value="2400.00"/>	Reattribution Memo [MEMO ITEM] Note: Reattribution from Spouse

B.	Full Name (Last, First, Middle Initial) Curtis Arledge		Date of Receipt
	Mailing Address 61 Holly Ln		<input type="text" value="05"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Darien	CT	06820-3308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Black Rock		Occupation CFO	Transaction ID: 00525.C366
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="2400.00"/>
		<input type="text" value="4800.00"/>	Reattribution Memo [MEMO ITEM] Note: Reattribution from Spouse

C.	Full Name (Last, First, Middle Initial) Diane Arledge		Date of Receipt
	Mailing Address 61 Holly Ln		<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Darien	CT	06820-3308
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer None		Occupation Homemaker	Transaction ID: 42
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼	Amount of Each Receipt this Period <input type="text" value="6200.00"/>
		<input type="text" value="9600.00"/>	MEMO [MEMO ITEM] Supporting Info from Prev. Period

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial)
Diane Arledge
Mailing Address 61 Holly Ln
City Darien State CT Zip Code 06820-3308
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 05 / 24 / 2010
Transaction ID: 00525.C365
Amount of Each Receipt this Period -4800.00
Reattribution Memo
[MEMO ITEM]
Note: Reattribution to Spouse

B. Full Name (Last, First, Middle Initial)
Elizabeth Bechtel
Mailing Address PO Box 193809
City San Francisco State CA Zip Code 94119-3809
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00
Date of Receipt 06 / 30 / 2010
Transaction ID: 00714.C408
Amount of Each Receipt this Period 2400.00
Reattribution Memo
[MEMO ITEM]
NOTE: Reattribution from Spouse

C. Full Name (Last, First, Middle Initial)
Stephen Bechtel
Mailing Address PO Box 193809
City San Francisco State CA Zip Code 94119-3809
FEC ID number of contributing federal political committee. **C**
Name of Employer The Fremont Group Occupation Chairman
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 4800.00
Date of Receipt 05 / 07 / 2010
Transaction ID: 43
Amount of Each Receipt this Period 2400.00
MEMO
[MEMO ITEM]
Supporting Info from Prev. Period

SUBTOTAL of Receipts This Page (optional) ▶ 0.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 34

(check only one)

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

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial)
Stephen Bechtel

Mailing Address PO Box 193809

City State Zip Code
San Francisco CA 94119-3809

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

Name of Employer Occupation
The Fremont Group Chairman

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2400.00

Date of Receipt

M M / D D / Y Y Y Y
06 / 30 / 2010

Transaction ID: 00714.C407

Amount of Each Receipt this Period

-2400.00

Reattribution Memo

[MEMO ITEM]

NOTE: Reattribution to Spouse

B.

Full Name (Last, First, Middle Initial)
Carole Boyett

Mailing Address 3304 Fleur De Lis Dr

City State Zip Code
Modesto CA 95356-9305

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

Name of Employer Occupation
None Retired

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 25 / 2010

Transaction ID: 00525.C371

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Todd Callahan

Mailing Address 1852 Bonanza St Apt 101

City State Zip Code
Walnut Creek CA 94596-4319

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

Name of Employer Occupation
KB Homes Developer

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 750.00

Date of Receipt

M M / D D / Y Y Y Y
05 / 28 / 2010

Transaction ID: 00528.C380

Amount of Each Receipt this Period

250.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

<p>A. Full Name (Last, First, Middle Initial) Deborah Clausen</p> <p>Mailing Address 617 Windmill Ln</p> <p>City Pleasanton State CA Zip Code 94566-7479</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Winte Vineyards Occupation Director</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 05 / 28 / 2010</p> <p>Transaction ID: 00528.C381</p> <p>Amount of Each Receipt this Period 500.00</p> <p>Receipt</p>
---	--

<p>B. Full Name (Last, First, Middle Initial) Stephen Crowe</p> <p>Mailing Address 214 S Ridge Ct</p> <p>City Danville State CA Zip Code 94506-5813</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>	<p>Date of Receipt 05 / 24 / 2010</p> <p>Transaction ID: 00524.C364</p> <p>Amount of Each Receipt this Period 200.00</p> <p>Receipt</p>
--	--

<p>C. Full Name (Last, First, Middle Initial) Dennis Emken</p> <p>Mailing Address 2379 Granite Way</p> <p>City Saint George State UT Zip Code 84790-6390</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer None Occupation Retired</p> <p>Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>	<p>Date of Receipt 06 / 04 / 2010</p> <p>Transaction ID: 00607.C391</p> <p>Amount of Each Receipt this Period 100.00</p> <p>Receipt</p>
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SUBTOTAL of Receipts This Page (optional)	800.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 34
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Leonard Fryer	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 40 Rhett Pl	Transaction ID: 00526.C373
	City State Zip Code Danville CA 94526-4902	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Mission Valley Homes Owner	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) Leonard Fryer	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 40 Rhett Pl	Transaction ID: 00527.C374
	City State Zip Code Danville CA 94526-4902	Amount of Each Receipt this Period 700.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Mission Valley Homes Owner	
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	

C.	Full Name (Last, First, Middle Initial) Michael Anne Fryer	Date of Receipt MM / DD / YYYY 05 / 26 / 2010
	Mailing Address 40 Rhett Pl	Transaction ID: 00526.C372
	City State Zip Code Danville CA 94526-4902	Amount of Each Receipt this Period 1900.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation None Retired	
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial)
Gregory Gingrey
Mailing Address PO Box 4446
City Rockville State MD Zip Code 20849-4446
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 2000.00
Date of Receipt: 06 / 01 / 2010
Transaction ID: 00601.C384
Amount of Each Receipt this Period: 1000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Mark Nadler
Mailing Address PO Box 506
City Alamo State CA Zip Code 94526-0506
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Dentist
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt: 06 / 01 / 2010
Transaction ID: 00607.C395
Amount of Each Receipt this Period: 100.00
Receipt

C. Full Name (Last, First, Middle Initial)
Mark OBrien
Mailing Address 33 Udayakavi Ln
City Danville State CA Zip Code 94526-1400
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼ 500.00
Date of Receipt: 05 / 24 / 2010
Transaction ID: 00524.C362
Amount of Each Receipt this Period: 500.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 1600.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial)
Kay Owens
Mailing Address 15 Calle Gaulteria
City San Clemente State CA Zip Code 92673-7003
FEC ID number of contributing federal political committee. **C**
Name of Employer Trovena Occupation Bookkeeper
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 400.00
Date of Receipt 06 / 01 / 2010
Transaction ID: 00607.C396
Amount of Each Receipt this Period 100.00
Receipt

B. Full Name (Last, First, Middle Initial)
Kevin Sanguinetti
Mailing Address 5733 Leonardini Rd
City Stockton State CA Zip Code 95215-1821
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 300.00
Date of Receipt 06 / 14 / 2010
Transaction ID: 00621.C403
Amount of Each Receipt this Period 300.00
Receipt

C. Full Name (Last, First, Middle Initial)
Tina Schumann
Mailing Address 465 Red Wing Dr
City Alamo State CA Zip Code 94507-2709
FEC ID number of contributing federal political committee. **C**
Name of Employer None Occupation Homemaker
Receipt For: 2010
 Primary General
 Other (specify) ▼
Election Cycle-to-Date ▼ 250.00
Date of Receipt 06 / 14 / 2010
Transaction ID: 00621.C402
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional) ► 650.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial)
William Shopoff
Mailing Address 3 Camel Point Dr
City Laguna Beach State CA Zip Code 92651-6988
FEC ID number of contributing federal political committee. **C**
Name of Employer The Shopoff Group, LLC Occupation President
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 500.00
Date of Receipt 06 / 07 / 2010
Transaction ID: 00614.C399
Amount of Each Receipt this Period 500.00
Receipt

B. Full Name (Last, First, Middle Initial)
Gary Smith
Mailing Address 215 Piedmont Ln
City Danville State CA Zip Code 94526-1413
FEC ID number of contributing federal political committee. **C**
Name of Employer EAI Inc. Occupation Manager
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 250.00
Date of Receipt 05 / 28 / 2010
Transaction ID: 00528.C379
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Nancy Tengler
Mailing Address 240 Bolla Ave
City Alamo State CA Zip Code 94507-1619
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: 2010
 Primary General
 Other (specify) ▼ Election Cycle-to-Date ▼ 1400.00
Date of Receipt 06 / 08 / 2010
Transaction ID: 00621.C404
Amount of Each Receipt this Period 1400.00
In-Kind
Field Consulting

SUBTOTAL of Receipts This Page (optional) ► 2150.00
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 13 / 34
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial)
Gregory Tomlinson

Mailing Address 6031 Turnberry Dr

City State Zip Code
Dublin CA 94568-7456

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

Name of Employer Granite Realty Advisors, Inc. Occupation Investor

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	1	/	2	0	1	0

Transaction ID: 00607.C397

Amount of Each Receipt this Period
100.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Coni Whisler

Mailing Address 84 Cumberland Ct

City State Zip Code
Danville CA 94526-1819

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2010 Election Cycle-to-Date ▼
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	4	/	2	0	1	0

Transaction ID: 00524.C363

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
TOTAL This Period (last page this line number only)	▶	12550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 34
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial) Contra Costa Republican Party		Date of Receipt
Mailing Address 800 S Broadway Ste 102		<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
City	State	Zip Code
Walnut Creek	CA	94596-5225
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: 00607.C385
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="104.59"/>
Receipt For: 2010	Election Cycle-to-Date ▼	Offsets to Operating Expenditure
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="104.59"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="104.59"/>
TOTAL This Period (last page this line number only)	<input type="text" value="104.59"/>

**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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 00614.E245 Date of Disbursement 05 / 20 / 2010
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 37.50
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES
B.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 00707.E262 Date of Disbursement 05 / 20 / 2010
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 453.75
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES
C.	Full Name (Last, First, Middle Initial) Aristotle International, Inc.	Transaction ID: 00614.E246 Date of Disbursement 05 / 29 / 2010
	Mailing Address 205 Pennsylvania Ave SE	Amount of Each Disbursement this Period 116.25
	City Washington State DC Zip Code 20003-1164	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional)	▶	607.50
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

<p>A. Full Name (Last, First, Middle Initial) Aristotle International, Inc.</p> <p>Mailing Address 205 Pennsylvania Ave SE</p> <p>City Washington State DC Zip Code 20003-1164</p> <p>Purpose of Disbursement Transaction Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00707.E263</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="37.50"/></p> <p>TRANSACTION FEES</p>
<p>B. Full Name (Last, First, Middle Initial) Comcast</p> <p>Mailing Address PO Box 34744</p> <p>City Seattle State WA Zip Code 98124-1744</p> <p>Purpose of Disbursement Phone and Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00528.E219</p> <p>Date of Disbursement</p> <p><input type="text" value="05"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="198.08"/></p> <p>PHONE AND INTERNET SERVICE</p>
<p>C. Full Name (Last, First, Middle Initial) Elizabeth Emken</p> <p>Mailing Address 243 Morris Ranch Ct</p> <p>City Danville State CA Zip Code 94526-3928</p> <p>Purpose of Disbursement See Below</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 00628.E257</p> <p>Date of Disbursement</p> <p><input type="text" value="06"/> <input type="text" value="23"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="784.38"/></p> <p>SEE BELOW</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="1019.96"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Elizabeth Emken <hr/> Mailing Address 243 Morris Ranch Ct <hr/> City Danville State CA Zip Code 94526-3928 <hr/> Purpose of Disbursement Mileage Reimbursement Candidate Name Category/Type <hr/> 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:	Transaction ID: 00628.E258 Date of Disbursement 06 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 207.90 <hr/> [MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
B.	Full Name (Last, First, Middle Initial) Staples <hr/> Mailing Address 500 Staples Dr <hr/> City Framingham State MA Zip Code 01702-4478 <hr/> Purpose of Disbursement Office Equipment Candidate Name Category/Type <hr/> 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:	Transaction ID: 00628.E259 Date of Disbursement 06 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 109.24 <hr/> [MEMO ITEM] MEMO: OFFICE EQUIPMENT
C.	Full Name (Last, First, Middle Initial) Verizon Wireless <hr/> Mailing Address 133 Calkins Rd <hr/> City Rochester State NY Zip Code 14623-4207 <hr/> Purpose of Disbursement Telephone Candidate Name Category/Type <hr/> 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:	Transaction ID: 00628.E260 Date of Disbursement 06 / 23 / 2010 <hr/> Amount of Each Disbursement this Period 323.98 <hr/> [MEMO ITEM] MEMO: TELEPHONE

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)

PAGE 18 / 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial) Office Depot Mailing Address 6600 N Military Trl City Boca Raton State FL Zip Code 33496-2434 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00628.E261 Date of Disbursement 06 / 23 / 2010
	Amount of Each Disbursement this Period 76.46
	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Category/Type
B. Full Name (Last, First, Middle Initial) Costco Mailing Address PO Box 34331 City Seattle State WA Zip Code 98124-1331 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00714.E274 Date of Disbursement 06 / 23 / 2010
	Amount of Each Disbursement this Period 66.80
	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	Category/Type
C. Full Name (Last, First, Middle Initial) Engage LLC Mailing Address 707 8th St SE Ste 200 City Washington State DC Zip Code 20003-2862 Purpose of Disbursement Advertising 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) ▼	Transaction ID: 00621.E255 Date of Disbursement 06 / 14 / 2010
	Amount of Each Disbursement this Period 6031.15
	ADVERTISING
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

6031.15

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)

PAGE 19 / 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial)
Fabrizio McLaughlin & Associates

Transaction ID: 00628.E256

Mailing Address 915 King St Fl 2

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	1	0

City State Zip Code
Alexandria VA 22314-3091

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Polling

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

POLLING

State: District:

B.

Full Name (Last, First, Middle Initial)
iContribute, LLC

Transaction ID: 00614.E235

Mailing Address 707 8th St SE Ste 200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	1	0

City State Zip Code
Washington DC 20003-2862

Amount of Each Disbursement this Period

35.00

Purpose of Disbursement
Transaction Fees

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

TRANSACTION FEES

State: District:

C.

Full Name (Last, First, Middle Initial)
iContribute, LLC

Transaction ID: 00614.E236

Mailing Address 707 8th St SE Ste 200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	1	0

City State Zip Code
Washington DC 20003-2862

Amount of Each Disbursement this Period

320.25

Purpose of Disbursement
Transaction Fees

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

TRANSACTION FEES

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5355.25

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

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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)

PAGE 20 / 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) iContribute, LLC	Transaction ID: 00614.E237 Date of Disbursement MM / DD / YYYY 05 / 25 / 2010
	Mailing Address 707 8th St SE Ste 200	Amount of Each Disbursement this Period 3.50
	City Washington State DC Zip Code 20003-2862	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES

B.	Full Name (Last, First, Middle Initial) iContribute, LLC	Transaction ID: 00614.E238 Date of Disbursement MM / DD / YYYY 05 / 29 / 2010
	Mailing Address 707 8th St SE Ste 200	Amount of Each Disbursement this Period 7.00
	City Washington State DC Zip Code 20003-2862	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES

C.	Full Name (Last, First, Middle Initial) iContribute, LLC	Transaction ID: 00614.E239 Date of Disbursement MM / DD / YYYY 06 / 01 / 2010
	Mailing Address 707 8th St SE Ste 200	Amount of Each Disbursement this Period 23.45
	City Washington State DC Zip Code 20003-2862	
	Purpose of Disbursement Transaction Fees Candidate Name	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) ▼
		TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional)	▶	33.95
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) iContribute, LLC Mailing Address 707 8th St SE Ste 200 City Washington State DC Zip Code 20003-2862 Purpose of Disbursement Transaction Fees 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) ▼	Transaction ID: 00614.E240 Date of Disbursement 06 / 02 / 2010	Amount of Each Disbursement this Period 7.00 TRANSACTION FEES
B.	Full Name (Last, First, Middle Initial) iContribute, LLC Mailing Address 707 8th St SE Ste 200 City Washington State DC Zip Code 20003-2862 Purpose of Disbursement Transaction Fees 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) ▼	Transaction ID: 00614.E241 Date of Disbursement 06 / 03 / 2010	Amount of Each Disbursement this Period 1.75 TRANSACTION FEES
C.	Full Name (Last, First, Middle Initial) iContribute, LLC Mailing Address 707 8th St SE Ste 200 City Washington State DC Zip Code 20003-2862 Purpose of Disbursement Transaction Fees 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) ▼	Transaction ID: 00614.E242 Date of Disbursement 06 / 04 / 2010	Amount of Each Disbursement this Period 8.75 TRANSACTION FEES

SUBTOTAL of Disbursements This Page (optional) ► 17.50

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial)
iContribute, LLC

Transaction ID: 00614.E243
Date of Disbursement

Mailing Address 707 8th St SE Ste 200

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	0

City Washington State DC Zip Code 20003-2862

Amount of Each Disbursement this Period

12.25

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

TRANSACTION FEES

B.

Full Name (Last, First, Middle Initial)
iContribute, LLC

Transaction ID: 00614.E244
Date of Disbursement

Mailing Address 707 8th St SE Ste 200

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	0

City Washington State DC Zip Code 20003-2862

Amount of Each Disbursement this Period

1.75

Purpose of Disbursement
Transaction Fees
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

TRANSACTION FEES

C.

Full Name (Last, First, Middle Initial)
IKON Public Affairs Group, LLC

Transaction ID: 00525.E215
Date of Disbursement

Mailing Address 1101 30th St NW Ste 220

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	5		2	0	1	0

City Washington State DC Zip Code 20007-3769

Amount of Each Disbursement this Period

9853.00

Purpose of Disbursement
Direct Marketing
Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

DIRECT MARKETING

SUBTOTAL of Disbursements This Page (optional)

9867.00

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) IKON Public Affairs Group, LLC <hr/> Mailing Address 1101 30th St NW Ste 220 <hr/> City Washington State DC Zip Code 20007-3769 <hr/> Purpose of Disbursement Direct Marketing Candidate Name <hr/> 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) ▼	Transaction ID: 00526.E216 Date of Disbursement 05 / 26 / 2010 <hr/> Amount of Each Disbursement this Period 16210.00 <hr/> DIRECT MARKETING	
B.	Full Name (Last, First, Middle Initial) IKON Public Affairs Group, LLC <hr/> Mailing Address 1101 30th St NW Ste 220 <hr/> City Washington State DC Zip Code 20007-3769 <hr/> Purpose of Disbursement Direct Marketing Candidate Name <hr/> 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) ▼	Transaction ID: 00527.E217 Date of Disbursement 05 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 18598.00 <hr/> DIRECT MARKETING	
C.	Full Name (Last, First, Middle Initial) IKON Public Affairs Group, LLC <hr/> Mailing Address 1101 30th St NW Ste 220 <hr/> City Washington State DC Zip Code 20007-3769 <hr/> Purpose of Disbursement Direct Marketing Candidate Name <hr/> 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) ▼	Transaction ID: 00607.E231 Date of Disbursement 06 / 02 / 2010 <hr/> Amount of Each Disbursement this Period 19053.00 <hr/> DIRECT MARKETING	

SUBTOTAL of Disbursements This Page (optional) ▶	53861.00
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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A. Full Name (Last, First, Middle Initial)
IKON Public Affairs Group, LLC

Mailing Address 1101 30th St NW Ste 220

City Washington State DC Zip Code 20007-3769

Purpose of Disbursement
Campaign Strategy

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00607.E232
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	0

Amount of Each Disbursement this Period

2500.00

CAMPAIGN STRATEGY

B. Full Name (Last, First, Middle Initial)
IKON Public Affairs Group, LLC

Mailing Address 1101 30th St NW Ste 220

City Washington State DC Zip Code 20007-3769

Purpose of Disbursement
Direct Marketing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00607.E233
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	4		2	0	1	0

Amount of Each Disbursement this Period

2185.00

DIRECT MARKETING

C. Full Name (Last, First, Middle Initial)
Anahita Nemat

Mailing Address PO Box 1158

City Alamo State CA Zip Code 94507-7158

Purpose of Disbursement
Field Consulting

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 00528.E218
Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	0

Amount of Each Disbursement this Period

2300.00

FIELD CONSULTING

SUBTOTAL of Disbursements This Page (optional)

6985.00

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)

PAGE 25 / 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Nuvio Corp <hr/> Mailing Address 1211 Puerta Del Sol Ste 260 <hr/> City San Clemente State CA Zip Code 92673-6306 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> 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) ▼	Transaction ID: 00614.E247 Date of Disbursement 05 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 128.50 <hr/> TELEPHONE	
B.	Full Name (Last, First, Middle Initial) Nuvio Corp <hr/> Mailing Address 1211 Puerta Del Sol Ste 260 <hr/> City San Clemente State CA Zip Code 92673-6306 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> 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) ▼	Transaction ID: 00707.E266 Date of Disbursement 06 / 03 / 2010 <hr/> Amount of Each Disbursement this Period 442.44 <hr/> TELEPHONE	
C.	Full Name (Last, First, Middle Initial) Office Depot <hr/> Mailing Address 6600 N Military Trl <hr/> City Boca Raton State FL Zip Code 33496-2434 <hr/> Purpose of Disbursement Office Supplies Candidate Name <hr/> 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) ▼	Transaction ID: 00614.E249 Date of Disbursement 05 / 20 / 2010 <hr/> Amount of Each Disbursement this Period 76.46 <hr/> OFFICE SUPPLIES	

SUBTOTAL of Disbursements This Page (optional) ▶

647.40

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Office Depot Mailing Address 6600 N Military Trl City Boca Raton State FL Zip Code 33496-2434 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00707.E267 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 1 0 Amount of Each Disbursement this Period 158.39 OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Professional Data Services, Inc. Mailing Address 264 N Lumpkin St # 202 City Athens State GA Zip Code 30601-2742 Purpose of Disbursement Compliance Consulting 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) ▼	Transaction ID: 00528.E229 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 8 / 2 0 1 0 Amount of Each Disbursement this Period 1787.50 COMPLIANCE CONSULTING
C.	Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00614.E250 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 1 0 Amount of Each Disbursement this Period 80.29 OFFICE SUPPLIES

SUBTOTAL of Disbursements This Page (optional) ▶

2026.18

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00707.E264 Date of Disbursement 06 / 03 / 2010 Amount of Each Disbursement this Period 160.58 OFFICE SUPPLIES
B.	Full Name (Last, First, Middle Initial) Staples Mailing Address 500 Staples Dr City Framingham State MA Zip Code 01702-4478 Purpose of Disbursement Office Supplies 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) ▼	Transaction ID: 00707.E265 Date of Disbursement 06 / 08 / 2010 Amount of Each Disbursement this Period 27.30 OFFICE SUPPLIES
C.	Full Name (Last, First, Middle Initial) Nicole Stygar Mailing Address PO Box 1158 City Alamo State CA Zip Code 94507-7158 Purpose of Disbursement Field Consulting 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) ▼	Transaction ID: 00528.E227 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 2477.00 FIELD CONSULTING

SUBTOTAL of Disbursements This Page (optional) ▶

2664.88

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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Nancy Tengler Mailing Address 240 Bolla Ave City Alamo State CA Zip Code 94507-1619 Purpose of Disbursement Field Consulting 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) ▼	Transaction ID: 00621.C4041K Date of Disbursement 06 / 08 / 2010 Amount of Each Disbursement this Period 1400.00 IN KIND: FIELD CONSULTING
B.	Full Name (Last, First, Middle Initial) Titus Campaigns and Consulting Mailing Address 4 Saratoga Cir City Sacramento State CA Zip Code 95864-7111 Purpose of Disbursement Campaign Strategy 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) ▼	Transaction ID: 00528.E230 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 3000.00 CAMPAIGN STRATEGY
C.	Full Name (Last, First, Middle Initial) Jeff Tomasich Mailing Address 12995 Hawkins Dr City San Ramon State CA Zip Code 94583-2410 Purpose of Disbursement See Below 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) ▼	Transaction ID: 00528.E220 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 2775.08 SEE BELOW

SUBTOTAL of Disbursements This Page (optional) ▶	7175.08
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Jeff Tomasich Mailing Address 12995 Hawkins Dr City San Ramon State CA Zip Code 94583-2410 Purpose of Disbursement Mileage Reimbursement 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) ▼	Transaction ID: 00528.E221 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 63.70 [MEMO ITEM] MEMO: MILEAGE REIMBURSEMENT
B.	Full Name (Last, First, Middle Initial) Jeff Tomasich Mailing Address 12995 Hawkins Dr City San Ramon State CA Zip Code 94583-2410 Purpose of Disbursement Fundraising Consulting 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) ▼	Transaction ID: 00528.E222 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 2300.00 [MEMO ITEM] MEMO: FUNDRAISING CONSULTING
C.	Full Name (Last, First, Middle Initial) USPS Mailing Address 475 Lenfant Plz SW # L City Washington State DC Zip Code 20260-0004 Purpose of Disbursement Postage 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) ▼	Transaction ID: 00528.E223 Date of Disbursement 05 / 28 / 2010 Amount of Each Disbursement this Period 206.02 [MEMO ITEM] MEMO: POSTAGE

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

PAGE 30 / 34

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) Staples	Transaction ID: 00528.E224
	Mailing Address 500 Staples Dr	Date of Disbursement 05 / 28 / 2010
	City Framingham State MA Zip Code 01702-4478	Amount of Each Disbursement this Period 123.43
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	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.	Full Name (Last, First, Middle Initial) Office Depot	Transaction ID: 00528.E225
	Mailing Address 6600 N Military Trl	Date of Disbursement 05 / 28 / 2010
	City Boca Raton State FL Zip Code 33496-2434	Amount of Each Disbursement this Period 81.93
	Purpose of Disbursement Office Supplies	[MEMO ITEM] MEMO: OFFICE SUPPLIES
	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:	

C.	Full Name (Last, First, Middle Initial) Jeff Tomasich	Transaction ID: 00621.E251
	Mailing Address 12995 Hawkins Dr	Date of Disbursement 06 / 15 / 2010
	City San Ramon State CA Zip Code 94583-2410	Amount of Each Disbursement this Period 557.87
	Purpose of Disbursement See Below	SEE BELOW
	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:	

SUBTOTAL of Disbursements This Page (optional)	557.87
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)

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.	Full Name (Last, First, Middle Initial) FedEx Mailing Address 942 S Shady Grove Rd City Memphis State TN Zip Code 38120-4117 Purpose of Disbursement Shipping 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) ▼	Transaction ID: 00621.E252 Date of Disbursement 06 / 15 / 2010 Amount of Each Disbursement this Period 29.84 [MEMO ITEM] MEMO: SHIPPING
B.	Full Name (Last, First, Middle Initial) Costco Mailing Address PO Box 34331 City Seattle State WA Zip Code 98124-1331 Purpose of Disbursement Event Catering 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) ▼	Transaction ID: 00621.E253 Date of Disbursement 06 / 15 / 2010 Amount of Each Disbursement this Period 234.61 [MEMO ITEM] MEMO: EVENT CATERING EXPE-NSE
C.	Full Name (Last, First, Middle Initial) Kinders Meat Deli BBQ Mailing Address 105 Town and Country Dr Ste G City Danville State CA Zip Code 94526-3966 Purpose of Disbursement Event Catering 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) ▼	Transaction ID: 00621.E254 Date of Disbursement 06 / 15 / 2010 Amount of Each Disbursement this Period 249.60 [MEMO ITEM] MEMO: EVENT CATERING EXPE-NSE

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
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)

PAGE 32 / 34

<input checked="" type="checkbox"/>	17	<input type="checkbox"/>	18	<input type="checkbox"/>	19a	<input type="checkbox"/>	19b
<input type="checkbox"/>	20a	<input type="checkbox"/>	20b	<input type="checkbox"/>	20c	<input type="checkbox"/>	21

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NAME OF COMMITTEE (In Full)
Emken 2010

A.

Full Name (Last, First, Middle Initial)
USPS

Transaction ID: 00707.E269

Date of Disbursement

Mailing Address 475 Lenfant Plz SW # L

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

City Washington State DC Zip Code 20260-0004

Amount of Each Disbursement this Period

3.85

Purpose of Disbursement
Postage

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

POSTAGE

State: District:

SUBTOTAL of Disbursements This Page (optional)

3.85

TOTAL This Period (last page this line number only)

96853.57

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER:
(check only one) 13a
 13b

LOANS

NAME OF COMMITTEE (In Full)
Emken 2010

Transaction ID: LS00109.C118

LOAN SOURCE Full Name (Last, First, Middle Initial) Elizabeth Emken - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 243 Morris Ranch Ct	
City Danville State CA ZIP Code 94526-3928	

Original Amount of Loan <div style="border: 1px solid black; text-align: center; padding: 2px;">100000.00</div>	Cumulative Payment To Date <div style="border: 1px solid black; text-align: center; padding: 2px;">0.00</div>	Balance Outstanding at Close of This Period <div style="border: 1px solid black; text-align: center; padding: 2px;">100000.00</div>
--	--	--

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																		
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>1</td><td>2</td></tr> </table>	M	M	1	2	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>3</td><td>1</td></tr> </table>	D	D	3	1	<table style="font-size: small;"> <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>9</td></tr> </table>	Y	Y	Y	Y	2	0	0	9	20101231	.0000 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
M	M																				
1	2																				
D	D																				
3	1																				
Y	Y	Y	Y																		
2	0	0	9																		

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: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <div style="border: 1px solid black; width: 100px; height: 15px;"></div>

SUBTOTALS This Period This Page (optional)	<div style="border: 1px solid black; padding: 5px;">100000.00</div>
TOTALS This Period (last page in this line only)	<div style="border: 1px solid black; padding: 5px;"></div>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.	

SCHEDULE C (FEC Form 3)

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

FOR LINE NUMBER: (check only one) 13a 13b

LOANS

NAME OF COMMITTEE (In Full)
Emken 2010

Transaction ID: LS00410.C235

LOAN SOURCE Full Name (Last, First, Middle Initial) Elizabeth Emken - [PERSONAL FUNDS]	Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 243 Morris Ranch Ct	
City Danville State CA ZIP Code 94526-3928	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	100000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:																
<table style="font-size: small;"> <tr><td>M</td><td>M</td></tr> <tr><td>0</td><td>3</td></tr> </table>	M	M	0	3	<table style="font-size: small;"> <tr><td>D</td><td>D</td></tr> <tr><td>3</td><td>1</td></tr> </table>	D	D	3	1	<table style="font-size: small;"> <tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr> <tr><td>2</td><td>0</td><td>1</td><td>0</td></tr> </table>	Y	Y	Y	Y	2	0	1	0	20100331
M	M																		
0	3																		
D	D																		
3	1																		
Y	Y	Y	Y																
2	0	1	0																
			.0000 % (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: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional)	<input style="width: 100%;" type="text" value="10000.00"/>
TOTALS This Period (last page in this line only)	<input style="width: 100%;" type="text" value="20000.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.