

**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 X 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 11 01 2003 through 03 31 2004

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 M D D Y Y Y Y To: M M D D Y Y Y Y
1 1 0 1 2 0 0 3 0 3 3 1 2 0 0 4

	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)).....	27474.84	27474.84
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	27474.84	27474.84
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	13928.92	13928.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	13928.92	13928.92
8. Cash on Hand at Close of Reporting Period (from Line 27).....	18945.92	
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).....	7319.97	

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 02/2003)

Page 3

Write or Type Committee Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Report Covering the Period: From: ^{M M} 1 1 ^{Y Y} 0 1 ^{V V} 2 0 0 3 To: ^{Y M} 0 3 ^{Y P} 3 1 ^{Y Y} 2 0 0 4

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).....	7750.00	7750.00
(ii) Unitemized.....	18177.84	18177.84
(iii) TOTAL of contributions	25927.84	25927.84
from Individuals..... ▶		
	1547.00	1547.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACS).....	0.00	0.00
	0.00	0.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans)	27474.84	27474.84
(add Lines 11(a)(iii), (b), (c), and (d))		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	4000.00	4000.00
	0.00	0.00
(b) All Other Loans.....		
(c) TOTAL LOANS	4000.00	4000.00
(add Lines 13(a) and (b)).....		
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	1400.00	1400.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	32874.84	32874.84

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.....	13928.92	13928.92
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	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
<hr/>		
21. OTHER DISBURSEMENTS.....	0.00	0.00
<hr/>		
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	13928.92	13928.92
<hr/>		
III. CASH SUMMARY		
<hr/>		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....		0.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....		32874.84
25. SUBTOTAL (add Line 23 and Line 24).....		32874.84
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....		13928.92
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....		18945.92

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

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

FOR LINE NUMBER: PAGE 6 / 20

(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. Robert J. Eichenberg		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2004
Mailing Address 1 Collins Is		Transaction ID: SA11A1.4109
City Newport Beach	State CA	Zip Code 92662-1003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation None	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Mr. Robert J. Eichenberg		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2004
Mailing Address 1 Collins Is		Transaction ID: SA11A1.5910
City Newport Beach	State CA	Zip Code 92662-1003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer None	Occupation None	Contribution - Primary Debit Reduction Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 <input checked="" type="checkbox"/> Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Mr. Robert Jaab		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2004
Mailing Address PO Box 428		Transaction ID: SA11A1.4113
City Mango	State FL	Zip Code 33550-0428
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Self Employed	Occupation Investor	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))
Receipt For: 2004 Primary <input checked="" type="checkbox"/> General Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	4500.00
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 / 20

(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. KETELSON FOR AMERICA		Date of Receipt M / D / Y 03 / 30 / 2004
Mailing Address 2817 CALAVERAS DRIVE		Transaction ID: SA11A1.5968
City FAIRFIELD	State CA	Zip Code 94534
FEC ID number of contributing federal political committee. C C00396663		Amount of Each Receipt this Period 2000.00
Name of Employer	Occupation	In-kind - Resort Timeshare stay 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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) B. Rogelio Menendez		Date of Receipt M / D / Y 03 / 31 / 2004
Mailing Address 10470 Vista del Sol suite 100		Transaction ID: SA11A1.4111
City El Paso	State TX	Zip Code 79925
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Allergy and Asthma Center	Occupation Physician	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 ▼ 500.00	

Full Name (Last, First, Middle Initial) C. Brian Penrix		Date of Receipt M / D / Y 03 / 08 / 2004
Mailing Address 11987 Brookstone Drive		Transaction ID: SA11A1.4115
City Truckee	State CA	Zip Code 96161-6289
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Brian G Penrix Attorney at Law	Occupation Attorney	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 ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	3000.00
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 / 20

(check only one)

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

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

Full Name (Last, First, Middle Initial) A. Mr. Johnny Zamora		Date of Receipt M / D / Y 03 / 30 / 2004
Mailing Address 2228 E Ave Q		Transaction ID: SA11A1.4117
City Palmdale	State CA	Zip Code 93550-4140
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Western Pacific Roofing Co.	Occupation Roofing Contractor	Contribution Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(B-1))
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	7750.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 20

(check only one)

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

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

Full Name (Last, First, Middle Initial) A. VICTORY 2004/CALIFORNIA REPUBLICAN PARTY		Date of Receipt M / D / Y 11 / 18 / 2003
Mailing Address 1903 W Magnolia Blvd		Transaction ID: SA11B.4101
City	State	Zip Code
Burbank	CA	91506
FEC ID number of contributing federal political committee. C C00140590		Amount of Each Receipt this Period 1547.00
Name of Employer	Occupation	In-kind - Filing Fee
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 1547.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(4)(1)(A)-1)

SUBTOTAL of Receipts This Page (optional)	▶	1547.00
TOTAL This Period (last page this line number only)	▶	1547.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 11d	<input type="checkbox"/> 15
<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)
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

Full Name (Last, First, Middle Initial) A. CLAUDIA BERMUDEZ		Date of Receipt M / D / Y 03 / 30 / 2004
Mailing Address 151 LAKESIDE DRIVE #111		Transaction ID: SA11D.33292
City	State	Zip Code
OAKLAND	CA	94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 3319.97
Name of Employer	Occupation	Claudia Bermudez in kind to be reimbursed Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) [MEMO ITEM]
Receipt For: 2004 Primary X General Other (specify) ▼	Election Cycle-to-Date ▼ 00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 20

(check only one)

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

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

Full Name (Last, First, Middle Initial) A. CLAUDIA BERMUDEZ		Date of Receipt M / D / Y 02 / 11 / 2004
Mailing Address 151 LAKESIDE DRIVE #111		Transaction ID: SA13A.4100
City OAKLAND	State CA	Zip Code 94612
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4000.00
Name of Employer	Occupation	Loan - Due on demand
Receipt For: 2004 X Primary General Other (specify) ▼	Election Cycle-to-Date ▼ 4000.00	Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))

SUBTOTAL of Receipts This Page (optional)	▶	4000.00
TOTAL This Period (last page this line number only)	▶	4000.00

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. CALIFORNIA REPUBLICAN NATIONAL CONVENTION DELEGATION - 2004
 Mailing Address 1441 Fourth St
 City Santa Monica State CA Zip Code 90401
 Purpose of Disbursement
 Convention Fee - Candidate Appearance
 Candidate Name
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG
 Office Sought: House Disbursement For: 2004
 Senate Primary General
 President Other (specify) ▼
 State: CA District: D8

Transaction ID: SB17.5835
 Date of Disbursement
 01 / 27 / 2004
 Amount of Each Disbursement this Period
 750.00
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
B. Calnet Business Bank
 Mailing Address 1565 Exposition Blvd
 City Sacramento State CA Zip Code 95815
 Purpose of Disbursement
 Fundraising - On line Set up
 Candidate Name
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG
 Office Sought: House Disbursement For: 2004
 Senate Primary General
 President Other (specify) ▼
 State: CA District: D8

Transaction ID: SB17.5818
 Date of Disbursement
 03 / 11 / 2004
 Amount of Each Disbursement this Period
 2750.00
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

Full Name (Last, First, Middle Initial)
C. Calnet Business Bank
 Mailing Address 1565 Exposition Blvd
 City Sacramento State CA Zip Code 95815
 Purpose of Disbursement
 Banking Fees
 Candidate Name
 Office Sought: House Disbursement For: 2004
 Senate Primary General
 President Other (specify) ▼
 State: District

Transaction ID: SB17.5920
 Date of Disbursement
 03 / 11 / 2004
 Amount of Each Disbursement this Period
 98.45
 Refund or Disposal of Excess
 Contributions Required Under
 11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) ▶ **3599.45**
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)

PAGE 12 / 20

<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. eDonation/Campaign Solutions

Mailing Address 118 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Website Advertising

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D9

004
Category/
Type

Transaction ID: SB17.5913
Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

2500.00

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

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

Mailing Address 118 North Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Fundraising Fees

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D9

003
Category/
Type

Transaction ID: SB17.5917
Date of Disbursement

03 / 01 / 2004

Amount of Each Disbursement this Period

15.36

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

Full Name (Last, First, Middle Initial)
C. Hyatt Regency

Mailing Address 1333 Bayshore Hwy

City Burlingame State CA Zip Code 94010

Purpose of Disbursement
Lodging

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D9

003
Category/
Type

Transaction ID: SB17.5954
Date of Disbursement

02 / 20 / 2004

Amount of Each Disbursement this Period

237.91

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

SUBTOTAL of Disbursements This Page (optional) ▶

2753.27

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 13 / 20

<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. Hyatt Regency

Mailing Address 1333 Bayshore Hwy

City State Zip Code
Burlingame CA 94010

Purpose of Disbursement
Meal - Swiftwater Deli - Candidate App

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

002
Category/
Type

Transaction ID: SB17.5873

Date of Disbursement

02 / 21 / 2004

Amount of Each Disbursement this Period

19.25

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

Full Name (Last, First, Middle Initial)

B. Image Light Photography

Mailing Address 3118 Dominic Drive

City State Zip Code
Castro Valley CA 94546

Purpose of Disbursement
Photography - Print Advertising

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

004
Category/
Type

Transaction ID: SB17.5856

Date of Disbursement

12 / 12 / 2003

Amount of Each Disbursement this Period

497.13

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

Full Name (Last, First, Middle Initial)

C. JetBlue Airways

Mailing Address P.O. Box 17435

City State Zip Code
Salt Lake City UT 84117-7435

Purpose of Disbursement
Travel - Airflight - Candidate Appearance

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

002
Category/
Type

Transaction ID: SB17.5958

Date of Disbursement

01 / 22 / 2004

Amount of Each Disbursement this Period

371.30

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

SUBTOTAL of Disbursements This Page (optional) ▶

881.68

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)

PAGE 14 / 20

<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. JetBlue Airways

Mailing Address P.O. Box 17435

City Salt Lake City State UT Zip Code 84117-7435

Purpose of Disbursement
Travel - Airflight - Candidate Appearance

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

002
Category/
Type

Transaction ID: SB17.5980

Date of Disbursement

01 / 27 / 2004

Amount of Each Disbursement this Period

25.00

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

Full Name (Last, First, Middle Initial)

B. JetBlue Airways

Mailing Address P.O. Box 17435

City Salt Lake City State UT Zip Code 84117-7435

Purpose of Disbursement
Travel - Airflight - Candidate Appearance

Candidate Name
CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

002
Category/
Type

Transaction ID: SB17.5981

Date of Disbursement

02 / 10 / 2004

Amount of Each Disbursement this Period

291.70

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

Full Name (Last, First, Middle Initial)

C. KETELSON FOR AMERICA

Mailing Address 2817 CALAVERAS DRIVE

City FAIRFIELD State CA Zip Code 94534

Purpose of Disbursement
In-kind - Resort Timeshare stay

Candidate Name

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

State: CA District: 10

Category/
Type

Transaction ID: SB17.5989

Date of Disbursement

03 / 30 / 2004

Amount of Each Disbursement this Period

2000.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2316.70

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 15 / 20

<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. Marriot Hotel

Mailing Address 1700 Jefferson Davis Hwy

City Arlington State VA Zip Code 22202

Purpose of Disbursement
 Lodging Expense

Candidate Name
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

002
 Category/
 Type

Transaction ID: SB17.5877

Date of Disbursement

01 / 23 / 2004

Amount of Each Disbursement this Period

229.38

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

Full Name (Last, First, Middle Initial)

B. Steven A. Castleton Consulting

Mailing Address P.O. Box 151

City West Islip State NY Zip Code 11705

Purpose of Disbursement
 Fundraising Consultant

Candidate Name
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

003
 Category/
 Type

Transaction ID: SB17.5815

Date of Disbursement

02 / 09 / 2004

Amount of Each Disbursement this Period

1500.00

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

Full Name (Last, First, Middle Initial)

C. VICTORY 2004/CALIFORNIA REPUBLICAN PARTY

Mailing Address 1903 W Magnolia Blvd

City Burbank State CA Zip Code B1508

Purpose of Disbursement
 In-kind - Filing Fee

Candidate Name
 CITIZENSFOR CLAUDIA BERMUDEZ FOR CONG

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

State: CA District: D8

Category/
 Type

Transaction ID: SB17.4103

Date of Disbursement

11 / 18 / 2003

Amount of Each Disbursement this Period

1547.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

3276.38

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

12827.48

SCHEDULE C (FEC Form 3)

LOANS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 16 / 20
	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	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4000.00	0.00	4000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M Y Y 02 11 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)	4000.00
TOTALS This Period (last page in this line only)	4000.00

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)	PAGE 17 / 20
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 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	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
3319.97	0.00	3319.97	

1) SUBTOTALS This Period This Page (optional)	▶	3319.97
2) TOTALS This Period (last page this line number only)	▶	3319.97
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 DM
Transaction ID: SA11A1.4109

Form/Schedule: SA11A1 DM
Transaction ID: SA11A1.4113

Form/Schedule: SA11A1 OL
Transaction ID: SA11A1.4111

Form/Schedule: SA11A1 BK
Transaction ID: SA11A1.4115
