

**FEC FORM 3X**

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

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.   
California League of Conservation Voters

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER ▼**  **CITY ▲** **STATE ▲** **ZIP CODE ▲**  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day **POST-Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

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 Michael Hawk

Signature of Treasurer Michael Hawk [Electronically Filed] Date  /  /

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												<b>FEC FORM 3X</b> Rev. 12/2004
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

California League of Conservation Voters

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>	<input type="text" value="1746.65"/>	<input type="text" value="1746.65"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="452.02"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="7202.75"/>	<input type="text" value="8655.51"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7654.77"/>	<input type="text" value="10402.16"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4473.50"/>	<input type="text" value="6824.89"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="3181.27"/>	<input type="text" value="3181.27"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="90.42"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**California League of Conservation Voters**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4173.50	5106.26
(ii) Unitemized .....	3029.25	3549.25
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7202.75	8655.51
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7202.75	8655.51
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7202.75	8655.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7202.75	8655.51

**DETAILED SUMMARY PAGE**

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	1973.50	2210.26
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1973.50	2210.26
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	4614.63
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4473.50	6824.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4473.50	6824.89

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	7202.75	8655.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7202.75	8655.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1973.50	2210.26
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1973.50	2210.26

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA  
Transaction ID :

Updated Lines 7, 21(b)(c), 31, and 32 of column B

Form/Schedule:  
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

**A. CA League of Conservation Voters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 350 Frank H. Ogawa Plaza, Suite 10  
 City State Zip Code  
 Oakland CA 94612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2606.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2011  
**Transaction ID : PAYA270**  
 Amount of Each Receipt this Period  
 211.00  
 Accounting services

**B. CA League of Conservation Voters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 350 Frank H. Ogawa Plaza, Suite 10  
 City State Zip Code  
 Oakland CA 94612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2606.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 11 / 2011  
**Transaction ID : PAYA269**  
 Amount of Each Receipt this Period  
 185.00  
 Accounting services

**C. CA League of Conservation Voters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 350 Frank H. Ogawa Plaza, Suite 10  
 City State Zip Code  
 Oakland CA 94612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2606.26

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2011  
**Transaction ID : NONA268**  
 Amount of Each Receipt this Period  
 1453.50  
 Accounting services

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1849.50
<b>TOTAL</b> This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : PAYA270

Payments by sponsor for administrative expenses.

Form/Schedule: SA11AI

Transaction ID: PAYA269

Payments by sponsor for administrative expenses.



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : NONA268

Payments by sponsor for administrative expenses.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 10 OF 22  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

**A. CA League of Conservation Voters**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 350 Frank H. Ogawa Plaza, Suite 10  
 City State Zip Code  
 Oakland CA 94612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2606.26

Date of Receipt  
 06 / 20 / 2011  
**Transaction ID : NONA267**  
 Amount of Each Receipt this Period  
 124.00  
 Accounting services

**B. Kirsten Johansen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 365 Edgehill Way  
 City State Zip Code  
 San Francisco CA 94127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 University of California San Francisco Physician  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 06 / 09 / 2011  
**Transaction ID : INCA200**  
 Amount of Each Receipt this Period  
 250.00

**C. Gary Klein**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11891 Autumn Sunset Way  
 City State Zip Code  
 Rancho Cordova CA 95742  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 State of California Energy Planner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 200.00

Date of Receipt  
 06 / 08 / 2011  
**Transaction ID : INCA188**  
 Amount of Each Receipt this Period  
 200.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 574.00  
**TOTAL** This Period (last page this line number only)..... ▶

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : NONA267

Payments by sponsor for administrative expenses.

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER: PAGE 12 OF 22  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

**A. Mia Vonsadovszky**  
Full Name (Last, First, Middle Initial)  
Mailing Address 218 21st Street  
City Santa Monica State CA Zip Code 90402  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Same Name Occupation Self-Employed Writer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 350.00

Date of Receipt  
06 / 13 / 2011  
**Transaction ID : INCA248**  
Amount of Each Receipt this Period  
350.00

**B. Suzanne Whaley**  
Full Name (Last, First, Middle Initial)  
Mailing Address 630 Horseshoe Hills Rd  
City Bolinas State CA Zip Code 94924  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Same Name Occupation Self-Employed Investor  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 1400.00

Date of Receipt  
06 / 13 / 2011  
**Transaction ID : INCA250**  
Amount of Each Receipt this Period  
1400.00

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date

Date of Receipt  
/ /  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	4173.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

Full Name (Last, First, Middle Initial)

**A. CA League of Conservation Voters**

Mailing Address 350 Frank H. Ogawa Plaza, Suite 10

City State Zip Code  
Oakland CA 94612

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : PAYB269**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. CA League of Conservation Voters**

Mailing Address 350 Frank H. Ogawa Plaza, Suite 10

City State Zip Code  
Oakland CA 94612

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : PAYB270**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. CA League of Conservation Voters**

Mailing Address 350 Frank H. Ogawa Plaza, Suite 10

City State Zip Code  
Oakland CA 94612

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : NONB267**

Amount of Each Disbursement this Period

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : PAYB269

Payments by sponsor for administrative expenses.

Form/Schedule: SB21B

Transaction ID: PAYB270

Payments by sponsor for administrative expenses.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : NONB267

Payments by sponsor for administrative expenses.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

Full Name (Last, First, Middle Initial)

**A. CA League of Conservation Voters**

Mailing Address 350 Frank H. Ogawa Plaza, Suite 10

City State Zip Code  
Oakland CA 94612

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
06 / 20 / 2011

**Transaction ID : NONB268**

Amount of Each Disbursement this Period

1453.50

Full Name (Last, First, Middle Initial)

**B. ML Associates**

Mailing Address 1427 Lincoln Blvd., Ste. E

City State Zip Code  
Santa Monica CA 90401

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
05 / 11 / 2011

**Transaction ID : PAYBFT269**

Amount of Each Disbursement this Period

185.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. ML Associates**

Mailing Address 1427 Lincoln Blvd., Ste. E

City State Zip Code  
Santa Monica CA 90401

Purpose of Disbursement  
Accounting services

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /   
05 / 11 / 2011

**Transaction ID : PAYBFT270**

Amount of Each Disbursement this Period

211.00

**[MEMO ITEM]**

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

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

1453.50

1973.50



: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : NONB268

Payments by sponsor for administrative expenses.

Form/Schedule: SB21B

Transaction ID: PAYBFT269

Payments by sponsor for administrative expenses.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B

Transaction ID : PAYBFT270

Payments by sponsor for administrative expenses.

Form/Schedule:

Transaction ID:

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

Full Name (Last, First, Middle Initial)

**A. Janice Hahn for Congress**

Mailing Address 2513 Pacific Coast Hwy

City Lomita State CA Zip Code 90717

Purpose of Disbursement  
Contribution to Candidate

011

Candidate Name

**Janice Hahn for Congress**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2011  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 17 / 2011

**Transaction ID : EXPB252**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

2500.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 22
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ML Associates</b>	Nature of Debt (Purpose): Accounting services
Mailing Address 1427 Lincoln Blvd., Ste. E	
City State Zip Code Santa Monica CA 90401	

Outstanding Balance Beginning This Period 185.00	<b>Transaction ID : PAYD169</b>	
Amount Incurred This Period -185.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ML Associates</b>	Nature of Debt (Purpose): Accounting services
Mailing Address 1427 Lincoln Blvd., Ste. E	
City State Zip Code Santa Monica CA 90401	

Outstanding Balance Beginning This Period 90.42	<b>Transaction ID : PAYD175</b>	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 90.42

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ML Associates</b>	Nature of Debt (Purpose): Accounting services
Mailing Address 1427 Lincoln Blvd., Ste. E	
City State Zip Code Santa Monica CA 90401	

Outstanding Balance Beginning This Period 211.00	<b>Transaction ID : PAYD182</b>	
Amount Incurred This Period -211.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 0.00

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	90.42
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 22
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)  
**California League of Conservation Voters**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>ML Associates, LLC</b>	Nature of Debt (Purpose): Accounting Services
Mailing Address 8581 Santa Monica Blvd., #504	
City State Zip Code West Hollywood CA 90069	

Outstanding Balance Beginning This Period <input type="text" value="10.00"/>	<b>Transaction ID : PAYD104</b>	
Amount Incurred This Period <input type="text" value="-10.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>	Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>
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1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text" value="90.42"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text" value="0.00"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="90.42"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SD10

Transaction ID : PAYD104

Adjustment to correct invoice error by vendor. (No debt was forgiven)

Form/Schedule:

Transaction ID: