

**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 PRINTExample: If typing, type  
over the lines

Friends of Farr

ADDRESS (number and street)

555 Capitol Mall, Suite 1425

Check if different  
than previously  
reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

STATE DISTRICT

C00290429

3. IS THIS  
REPORTNEW  
(N)

OR

X

AMENDED  
(A)

CA

17

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

X 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

04

01

2004

through

06

30

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

Sidney Slade

Signature of Treasurer

Electronically Filed by Sidney Slade

Date 07 21 2004

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

Friends of Farr

Report Covering the Period: From: M M D D Y Y Y Y To: Y M D D Y Y Y Y  
0 4 0 1 2 0 0 4 0 6 3 0 2 0 0 4

|                                                                                                          | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|----------------------------------------------------------------------------------------------------------|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)                                                                  |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(a)).....                                     | 80791.04                | 415033.59                          |
| (b) Total Contribution Refunds<br>(from Line 20(d)).....                                                 | 0.00                    | 100.00                             |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                     | 80791.04                | 414933.59                          |
| 7. Net Operating Expenditures                                                                            |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17).....                                                  | 54713.20                | 290162.69                          |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....                                       | 105.44                  | 3394.55                            |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                               | 54607.76                | 286768.14                          |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....                                      | 158755.41               |                                    |
| 9. Debts and Obligations Owed TO<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 250.00                  |                                    |
| 10. Debts and Obligations Owed BY<br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 0.00                    |                                    |

**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 02/2003)

Page 3

Write or Type Committee Name

Friends of Farr

Report Covering the Period: From: M M D J Y ~ ~ ~ To: V V U J Y Y ~ Y  
0 4 0 1 2 0 0 4 0 6 3 0 2 0 0 4

| I. RECEIPTS                                                                                               | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|-----------------------------------------------------------------------------------------------------------|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:                                                                |                               |                                    |
| (a) Individuals/Persons Other Than<br>Political Committees                                                | 33943.00                      |                                    |
| (i) Itemized (use Schedule A).....                                                                        | 5248.04                       |                                    |
| (ii) Unitemized.....                                                                                      |                               |                                    |
| (iii) TOTAL of contributions                                                                              | 39191.04                      | 199149.43                          |
| from individuals..... ▶                                                                                   |                               |                                    |
|                                                                                                           | 0.00                          | 284.16                             |
| (b) Political Party Committees.....                                                                       |                               |                                    |
| (c) Other Political Committees                                                                            | 41600.00                      | 215600.00                          |
| (such as PACS).....                                                                                       |                               |                                    |
|                                                                                                           | 0.00                          | 0.00                               |
| (d) The Candidate.....                                                                                    |                               |                                    |
| (e) TOTAL CONTRIBUTIONS                                                                                   |                               |                                    |
| (other than loans)                                                                                        | 80791.04                      | 415033.59                          |
| (add Lines 11(a)(iii), (b), (c), and (d))                                                                 |                               |                                    |
| 12. TRANSFERS FROM OTHER<br>AUTHORIZED COMMITTEES.....                                                    | 0.00                          | 0.00                               |
| 13. LOANS                                                                                                 |                               |                                    |
| (a) Made or Guaranteed by the<br>Candidate.....                                                           | 0.00                          | 0.00                               |
|                                                                                                           | 0.00                          | 0.00                               |
| (b) All Other Loans.....                                                                                  |                               |                                    |
| (c) TOTAL LOANS                                                                                           | 0.00                          | 0.00                               |
| (add Lines 13(a) and (b)).....                                                                            |                               |                                    |
| 14. OFFSETS TO OPERATING<br>EXPENDITURES                                                                  | 105.44                        | 3394.55                            |
| (Refunds, Rebates, etc.).....                                                                             |                               |                                    |
| 15. OTHER RECEIPTS                                                                                        |                               |                                    |
| (Dividends, Interest, etc.).....                                                                          | 42.17                         | 74.34                              |
| 16. TOTAL RECEIPTS (add Lines<br>11(e), 12, 13(c), 14, and 15)<br>(Carry Total to Line 24, page 4)..... ▶ | 80938.65                      | 418502.48                          |

**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.....                                                  | 54713.20 | 290162.69 |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES.....                             | 0.00     | 0.00      |
| 19. LOAN REPAYMENTS:                                                             |          |           |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                         | 0.00     | 0.00      |
| (b) Of all Other Loans.....                                                      | 0.00     | 0.00      |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                      | 0.00     | 0.00      |
| <hr/>                                                                            |          |           |
| 20. REFUNDS OF CONTRIBUTIONS TO:                                                 |          |           |
| (a) Individuals/Persons Other<br>Than Political Committees.....                  | 0.00     | 100.00    |
| (b) Political Party Committees.....                                              | 0.00     | 0.00      |
| (c) Other Political Committees<br>(such as PACs).....                            | 0.00     | 0.00      |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....           | 0.00     | 100.00    |
| <hr/>                                                                            |          |           |
| 21. OTHER DISBURSEMENTS.....                                                     | 7300.00  | 29323.00  |
| <hr/>                                                                            |          |           |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) [ > ] | 62013.20 | 319585.69 |

**III. CASH SUMMARY**

|                                                                                       |           |
|---------------------------------------------------------------------------------------|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | 139829.96 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 15, page3).....                             | 80938.65  |
| 25. SUBTOTAL (add Line 23 and Line 24).....                                           | 220768.61 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 62013.20  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 158755.41 |

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

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

FOR LINE NUMBER: PAGE 5 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                   |                                       |                                                                       |                                              |
|-------------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------|----------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Herb Adams   |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2004              |                                              |
| Mailing Address 11 Talbot Street                                  |                                       | Transaction ID: A3989                                                 |                                              |
| City<br>Salinas                                                   | State<br>CA                           | Zip Code<br>93801                                                     | Amount of Each Receipt this Period<br>300.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                              |
| Name of Employer<br>California Coastal RDC                        | Occupation<br>Chief Executive Officer |                                                                       | 300.00                                       |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼       | Election Cycle-to-Date ▼              |                                                                       |                                              |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Jo C. Barton |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 24 / 2004              |                                              |
| Mailing Address Coast Route 1                                     |                                       | Transaction ID: A3975                                                 |                                              |
| City<br>Monterey                                                  | State<br>CA                           | Zip Code<br>93940-9706                                                | Amount of Each Receipt this Period<br>500.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                              |
| Name of Employer<br>Nana's For Remarkable Kids                    | Occupation<br>Retail Sales            |                                                                       | 500.00                                       |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼       | Election Cycle-to-Date ▼              |                                                                       |                                              |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Sharon Bates |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 15 / 2004              |                                              |
| Mailing Address 527 Loma Alta                                     |                                       | Transaction ID: A3918                                                 |                                              |
| City<br>Camel                                                     | State<br>CA                           | Zip Code<br>93523                                                     | Amount of Each Receipt this Period<br>250.00 |
| FEC ID number of contributing federal political committee.<br>C   |                                       | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                              |
| Name of Employer<br>Unemployed                                    | Occupation<br>Unemployed              |                                                                       | 250.00                                       |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼       | Election Cycle-to-Date ▼              |                                                                       |                                              |

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

1050.00

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 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                        |       |                          |                                                                       |  |
|------------------------------------------------------------------------------------------------------------------------|-------|--------------------------|-----------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Letitia A. Bennett                                                |       |                          | Date of Receipt<br>M / D / Y<br>06 / 27 / 2004                        |  |
| Mailing Address 4076 Sunset Lane                                                                                       |       |                          | Transaction ID: A3990                                                 |  |
| City                                                                                                                   | State | Zip Code                 | Amount of Each Receipt this Period                                    |  |
| Pebble Beach                                                                                                           | CA    | 93853                    | 500.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                          | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Pro Quest Company                                                                                  |       | Occupation               | 500.00                                                                |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼ | 500.00                                                                |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Howard H. Classen                                                 |       |                          | Date of Receipt<br>M / D / Y<br>06 / 22 / 2004                        |  |
| Mailing Address 1075 Elkhorn Road                                                                                      |       |                          | Transaction ID: A3959                                                 |  |
| City                                                                                                                   | State | Zip Code                 | Amount of Each Receipt this Period                                    |  |
| Watsonville                                                                                                            | CA    | 95076-9200               | 250.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                          | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer                                                                                                       |       | Occupation               | 250.00                                                                |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼ | 250.00                                                                |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Shan Crockett, M.D.                                               |       |                          | Date of Receipt<br>M / D / Y<br>06 / 21 / 2004                        |  |
| Mailing Address 312D Mission Drive                                                                                     |       |                          | Transaction ID: A3960                                                 |  |
| City                                                                                                                   | State | Zip Code                 | Amount of Each Receipt this Period                                    |  |
| Santa Cruz                                                                                                             | CA    | 95085                    | 250.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                          | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Shan Crockett, Psychiatrist                                                                        |       | Occupation               | 250.00                                                                |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼ | 250.00                                                                |  |

SUBTOTAL of Receipts This Page (optional) ▶

1000.00

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 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                          |                                     |                                                                       |                                               |
|--------------------------------------------------------------------------|-------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Claudia E. Daniels  |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 17 / 2004              |                                               |
| Mailing Address 92 Corona Road                                           |                                     | Transaction ID: A3987                                                 |                                               |
| City<br>Carmel                                                           | State<br>CA                         | Zip Code<br>93823                                                     | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C          |                                     | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                               |
| Name of Employer<br>Helsler, Stewart & Daniels                           | Occupation<br>Attorney              |                                                                       |                                               |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼              | Election Cycle-to-Date ▼<br>1000.00 |                                                                       |                                               |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Karen Darling       |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2004              |                                               |
| Mailing Address 314 West Cliff Drive                                     |                                     | Transaction ID: A3982                                                 |                                               |
| City<br>Santa Cruz                                                       | State<br>CA                         | Zip Code<br>95060                                                     | Amount of Each Receipt this Period<br>308.00  |
| FEC ID number of contributing federal political committee.<br>C          |                                     | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                               |
| Name of Employer<br>The Darling House                                    | Occupation<br>Inn Keeper            |                                                                       |                                               |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼              | Election Cycle-to-Date ▼<br>308.00  |                                                                       |                                               |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Sherrod Stone Davis |                                     | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 14 / 2004              |                                               |
| Mailing Address 814 Magellan Lane                                        |                                     | Transaction ID: A3887                                                 |                                               |
| City<br>Foster City                                                      | State<br>CA                         | Zip Code<br>94404                                                     | Amount of Each Receipt this Period<br>250.00  |
| FEC ID number of contributing federal political committee.<br>C          |                                     | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                               |
| Name of Employer<br>Retired                                              | Occupation<br>Retired               |                                                                       |                                               |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼              | Election Cycle-to-Date ▼<br>1500.00 |                                                                       |                                               |

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

1558.00

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 8 / 80

(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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                        |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Susan Draper<br>Mailing Address 28047 Atherton Drive<br>City State Zip Code<br>Carmel CA 93823<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Laidig/Draper Properties<br>Occupation<br>Real Estate & Investments<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>500.00     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 23 2004<br>Transaction ID: A3949<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Bruce D. Dunlap<br>Mailing Address 4079 Constanilla Way<br>City State Zip Code<br>Pebble Beach CA 93953<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Bruce Dunlap, CPA<br>Occupation<br>Certified Public Accountant<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>250.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 21 2004<br>Transaction ID: A3961<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>K. Adele Ellis<br>Mailing Address 414 Westwood Lane<br>City State Zip Code<br>Aptos CA 95003<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Occupation<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>250.00                                                                |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A3983<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)



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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 / 80

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                        |       |                                    |                                                                       |  |
|------------------------------------------------------------------------------------------------------------------------|-------|------------------------------------|-----------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Mark R. Ellis                                                     |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 8 / 2 0 0 4         |  |
| Mailing Address P.O. Box 1133                                                                                          |       |                                    | Transaction ID: A3994                                                 |  |
| City                                                                                                                   | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Aptos                                                                                                                  | CA    | 95001                              | 250.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Eric Miller Architects                                                                             |       | Occupation<br>Architectural Design |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>250.00 |                                                                       |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Myron E. Etienne, Jr.                                             |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 7 / 2 0 0 4         |  |
| Mailing Address 968B Sycamore Court                                                                                    |       |                                    | Transaction ID: A3998                                                 |  |
| City                                                                                                                   | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Carmel                                                                                                                 | CA    | 93923                              | 100.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Noland, Hamerly, Etienne & Hoss                                                                    |       | Occupation<br>Attorney             |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>350.00 |                                                                       |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Francesca Farr                                                    |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 7 / 2 0 0 4         |  |
| Mailing Address P.O. Box 3305                                                                                          |       |                                    | Transaction ID: A3995                                                 |  |
| City                                                                                                                   | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Carmel                                                                                                                 | CA    | 93921                              | 500.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                                    |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer                                                                                                       |       | Occupation                         |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General <input type="checkbox"/><br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>500.00 |                                                                       |  |

SUBTOTAL of Receipts This Page (optional) ..... **850.00**

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  
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(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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                            |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>J. Patricia Faul<br>Mailing Address P.O. Box 4365<br><br>City Carmel State CA Zip Code 93821<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Retired Occupation Retired<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 350.00             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3956<br>Amount of Each Receipt this Period<br>250.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Mary L. Flaig<br>Mailing Address 706 19th St.<br><br>City Pacific Grove State CA Zip Code 93950<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Student Occupation Student<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 500.00          |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 21 2004<br>Transaction ID: A3957<br>Amount of Each Receipt this Period<br>500.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Virginia F. Fry<br>Mailing Address 18 El Caminito Del Norte<br><br>City Monterey State CA Zip Code 93940<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Retired Occupation Retired<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3958<br>Amount of Each Receipt this Period<br>250.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 1000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Alan G. Giberson, M.D.<br>Mailing Address 52 Holman Road<br>City State Zip Code<br>Carmel Valley CA 93824<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Pacific Partners Management, Inc.<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Physician<br>Election Cycle-to-Date ▼<br>500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3986<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Robert E. Giese<br>Mailing Address 916 Beauford Place<br>City State Zip Code<br>Pacific Grove CA 93950<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Robert Giese, Physician<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Physician<br>Election Cycle-to-Date ▼<br>250.00              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 19 2004<br>Transaction ID: A3885<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Mary Reese Green<br>Mailing Address P.O. Box 3284<br>City State Zip Code<br>Monterey CA 93940<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Homemaker<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Homemaker<br>Election Cycle-to-Date ▼<br>500.00                                     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 15 2004<br>Transaction ID: A3921<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

1250.00

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Maryanna Haskins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 8 Hacienda Carmel<br>City State Zip Code<br>Carmel CA 93823<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>1500.00                        |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 23 2004<br>Transaction ID: A3950<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Katherine A. Herbmann</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 33300 East Carmel Valley Road<br>City State Zip Code<br>Carmel Valley CA 93824<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>800.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 23 2004<br>Transaction ID: A3945<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. Barbara E. James</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 27407 Schulte Road<br>City State Zip Code<br>Carmel CA 93823<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>700.00                        |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 24 2004<br>Transaction ID: A3845<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 1500.00

TOTAL This Period (last page this line number only)

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Nancy E. Jenkins</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 28 Spanish Bay Circle<br>City State Zip Code<br>Pebble Beach CA 93953<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Homemaker<br>Occupation Homemaker<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>2000.00     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 14 2004<br>Transaction ID: A3904<br>Amount of Each Receipt this Period<br>2000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Ann Jory</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1120 Forest Avenue<br>City State Zip Code<br>Pacific Grove CA 93950<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Ann Jory, Attorney at Law<br>Occupation Attorney<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>250.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 12 2004<br>Transaction ID: A3891<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>C. Stephen B. Kahn</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 28320 Scenic Road<br>City State Zip Code<br>Camel CA 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>500.00                      |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 15 2004<br>Transaction ID: A3923<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |

SUBTOTAL of Receipts This Page (optional) ▶

2750.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Michael E. Langton</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 118 West Adams Street, Suite 700<br>City Jacksonville State FL Zip Code 32202<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer LB Jax Development<br>Occupation Real Estate<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 20 2004<br>Transaction ID: A3850<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. David S. Lewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 30500 Aurora Del Mar<br>City Carmel State CA Zip Code 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer David Lewis Consulting<br>Occupation Consultant<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 700.00                    |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 23 2004<br>Transaction ID: A3842<br>Amount of Each Receipt this Period<br>100.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. David S. Lewis</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 30500 Aurora Del Mar<br>City Carmel State CA Zip Code 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer David Lewis Consulting<br>Occupation Consultant<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 700.00                    |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>08 30 2004<br>Transaction ID: A4029<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

1100.00

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

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

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or each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

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| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Francis P. Lloyd<br>Mailing Address 257B5 Hatton Road<br>City State Zip Code<br>Carmel CA 93823<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Francis P. Lloyd, Attorney<br>Occupation Attorney<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>500.00               |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3998<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Carol R. Lowrey<br>Mailing Address 23012 Muleta Place<br>City State Zip Code<br>Salinas CA 93908<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Washington Union School District<br>Occupation Art Coordinator<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>625.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 04 2004<br>Transaction ID: A3856<br>Amount of Each Receipt this Period<br>125.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Carol R. Lowrey<br>Mailing Address 23012 Muleta Place<br>City State Zip Code<br>Salinas CA 93908<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Washington Union School District<br>Occupation Art Coordinator<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>625.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3989<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

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

1125.00

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

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(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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Andy Matsui</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 4012 Sun Ridge Road<br>City State Zip Code<br>Pebble Beach CA 93953<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Matsui Nursery, Inc.<br>Occupation President<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>1000.00  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 15 2004<br>Transaction ID: A3924<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Patricia A. Meluszewski</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 984 Eagan Avenue<br>City State Zip Code<br>Pacific Grove CA 93950<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Century 21<br>Occupation Real Estate<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A4000<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>C. James W. McElvany</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 2845 Ribera Road<br>City State Zip Code<br>Camel CA 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>2000.00                     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 14 2004<br>Transaction ID: A3915<br>Amount of Each Receipt this Period<br>2000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 3500.00

TOTAL This Period (last page this line number only)



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Use separate schedule(s)  
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(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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                        |
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| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Deborah E. McFarland<br>Mailing Address 4287 Embassy Park Drive NW<br>City Washington State DC Zip Code 20016<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>2000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4012<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Linda McLennan<br>Mailing Address P.O. Box 4529<br>City Carmel State CA Zip Code 93921<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Cyberware<br>Occupation Software Engineer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>250.00             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 14 2004<br>Transaction ID: A3916<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Neal W. McMahon<br>Mailing Address P.O. Box 221580<br>City Carmel State CA Zip Code 93922<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer<br>Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>500.00                                      |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 14 2004<br>Transaction ID: A39D8<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 1250.00

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(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)

Friends of Farr

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Naomi Miller<br>Mailing Address 4000 Rio Road 42<br>City Carmel State CA Zip Code 93821<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer APR Fellow<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Public Relations<br>Election Cycle-to-Date ▼<br>250.00        |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 23 / 2004<br>Transaction ID: A3952<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Katherine P. Minott<br>Mailing Address 745 Oak Hill Road<br>City Aptos State CA Zip Code 95003<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Retired<br>Election Cycle-to-Date ▼<br>2750.00            |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2004<br>Transaction ID: A4001<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Hendat M. Mitteldorf<br>Mailing Address 942 Coral Drive<br>City Pebble Beach State CA Zip Code 93553-2503<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br>Occupation Retired<br>Election Cycle-to-Date ▼<br>1000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 18 / 2004<br>Transaction ID: A3940<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 1250.00

TOTAL This Period (last page this line number only)

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**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                          |                                                           |                                                                                                      |                                                   |
|--------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------|------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>Monroga Band of Mission Indians Native American Right Fund-B</b> |                                                           | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 7 / 2 0 0 4                                        |                                                   |
| Mailing Address P.O. Box 386                                                                                             |                                                           | Transaction ID: A4002                                                                                |                                                   |
| City<br><b>Cabazon</b>                                                                                                   | State<br><b>CA</b>                                        | Zip Code<br><b>92230-0366</b>                                                                        | Amount of Each Receipt this Period<br><br>1000.00 |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                   |                                                           |                                                                                                      |                                                   |
| Name of Employer<br><br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                      | Occupation<br><br>Election Cycle-to-Date ▼<br><br>3000.00 | Federally Permissible Funds<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                                   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>William E. Morris</b>                                            |                                                           | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 4 / 2 8 / 2 0 0 4                                        |                                                   |
| Mailing Address 99 South East Mizner Blvd.                                                                               |                                                           | Transaction ID: A3851                                                                                |                                                   |
| City<br><b>Boca Raton</b>                                                                                                | State<br><b>FL</b>                                        | Zip Code<br><b>33432</b>                                                                             | Amount of Each Receipt this Period<br><br>500.00  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                   |                                                           |                                                                                                      |                                                   |
| Name of Employer<br><b>SouthCoast Partners</b>                                                                           | Occupation<br><b>Real Estate</b>                          | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))                                |                                                   |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                                              | Election Cycle-to-Date ▼<br><br>500.00                    |                                                                                                      |                                                   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>Louis B. Muhty</b>                                               |                                                           | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 2 / 2 0 0 4                                        |                                                   |
| Mailing Address 717 Walnut Ave.                                                                                          |                                                           | Transaction ID: A3962                                                                                |                                                   |
| City<br><b>Santa Cruz</b>                                                                                                | State<br><b>CA</b>                                        | Zip Code<br><b>95060</b>                                                                             | Amount of Each Receipt this Period<br><br>500.00  |
| FEC ID number of contributing federal political committee.<br><b>C</b>                                                   |                                                           |                                                                                                      |                                                   |
| Name of Employer<br><b>Retired</b>                                                                                       | Occupation<br><b>Retired</b>                              | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))                                |                                                   |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                                              | Election Cycle-to-Date ▼<br><br>700.00                    |                                                                                                      |                                                   |

SUBTOTAL of Receipts This Page (optional) 2000.00

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**SCHEDULE A (FEC Form 3 )**  
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| <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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                         |  |                                                                                                                                                                                                         |
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| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Patricia Pfeil Nicewander<br>Mailing Address 258B1 Wisteria Court<br>City State Zip Code<br>Corral De Tierra CA 93908-1539<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Northrup Grumman<br>Occupation Information Systems Analyst<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ 500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 21 2004<br>Transaction ID: A3963<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Joyce Nicholas<br>Mailing Address 90 Del Mesa Carmel<br>City State Zip Code<br>Carmel CA 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ 1000.00                                                         |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3964<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Emmett O'Boyle<br>Mailing Address 22940 Guidotti Drive<br>City State Zip Code<br>Salinas CA 93508<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Rucka, O'Boyle, Lombardo & McKenna<br>Occupation Attorney<br>Election Cycle-to-Date ▼<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ 1250.00                          |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4003<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |

SUBTOTAL of Receipts This Page (optional) 1750.00

TOTAL This Period (last page this line number only)

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**ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
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(check only one)

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| <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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                   |  |                                                                                                                                                                                                        |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Karl K. Orr<br>Mailing Address 2 Victoria Vale<br>City Monterey State CA Zip Code 93940<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 250.00                              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 23 2004<br>Transaction ID: A3953<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Leon E. Panetta<br>Mailing Address 15 Panetta Road<br>City Carmel Valley State CA Zip Code 93924<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Leon E. Panetta & Associates<br>Occupation Owner<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 250.00  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3965<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Victoria Peach<br>Mailing Address 28695 Pancho Way<br>City Carmel State CA Zip Code 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Victoria Peach, Realtor<br>Occupation Real Estate Broker<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 750.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3976<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 750.00

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**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Full Name (Last, First, Middle Initial)</b><br>Marian R. Penn<br><b>Mailing Address</b> 833D Brookdale Drive<br><br>City State Zip Code<br>Carmel CA 93823<br><br><b>FEC ID number of contributing federal political committee.</b> C<br><br><b>Name of Employer</b> Marian R. Penn, Consulting<br><b>Occupation</b> Consultant<br><br><b>Receipt For:</b> 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br><br><b>Election Cycle-to-Date</b> ▼<br>500.00                  |  | <b>Date of Receipt</b><br>M M / D D / Y Y Y Y<br>06 24 2004<br><br><b>Transaction ID:</b> A3973<br><br><b>Amount of Each Receipt this Period</b><br>500.00<br><br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Full Name (Last, First, Middle Initial)</b><br>Thomas A. Petersen<br><b>Mailing Address</b> 251 Via Gayuba<br><br>City State Zip Code<br>Monterey CA 93940-4322<br><br><b>FEC ID number of contributing federal political committee.</b> C<br><br><b>Name of Employer</b> Monterey Institute<br><b>Occupation</b> Education Director<br><br><b>Receipt For:</b> 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br><br><b>Election Cycle-to-Date</b> ▼<br>250.00             |  | <b>Date of Receipt</b><br>M M / D D / Y Y Y Y<br>06 17 2004<br><br><b>Transaction ID:</b> A3941<br><br><b>Amount of Each Receipt this Period</b><br>250.00<br><br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. Full Name (Last, First, Middle Initial)</b><br>Robert Putnam<br><b>Mailing Address</b> P.O. Box 1503<br><br>City State Zip Code<br>Sacramento CA 95812<br><br><b>FEC ID number of contributing federal political committee.</b> C<br><br><b>Name of Employer</b> Robert Putnam, Philanthro-<br>pist<br><b>Occupation</b> Philanthropist/Investor<br><br><b>Receipt For:</b> 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼<br><br><b>Election Cycle-to-Date</b> ▼<br>500.00 |  | <b>Date of Receipt</b><br>M M / D D / Y Y Y Y<br>04 09 2004<br><br><b>Transaction ID:</b> A3835<br><br><b>Amount of Each Receipt this Period</b><br>500.00<br><br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |

**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)  
or each category of the  
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|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Sandra Rees<br>Mailing Address 4131 Sunset Lane<br>City State Zip Code<br>Pebble Beach CA 93853<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 350.00                              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3986<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Ray Roeder<br>Mailing Address 4851 Freedom Blvd.<br>City State Zip Code<br>Aptos CA 95003<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer The RINC Organization<br>Occupation Realtor<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2100.00                     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 04 2004<br>Transaction ID: A3877<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Comina J. Rucka<br>Mailing Address 24455 Varada Del Arroyo<br>City State Zip Code<br>Salinas CA 95508<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Comina J. Rucka, Consulting<br>Occupation Consultant<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A4005<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |

SUBTOTAL of Receipts This Page (optional) 1750.00

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(check only one)

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| <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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                        |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Marcia M. Shortt<br>Mailing Address 2926 Annwood<br>City Cincinnati State OH Zip Code 45206<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 250.00                                          |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A4006<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Matthew Simis<br>Mailing Address P.O. Box 7596<br>City Spreckels State CA Zip Code 93362<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Tanimura and Antle, Inc. Finance Manager<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 250.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 12 2004<br>Transaction ID: A3883<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>A. Kitham Smith<br>Mailing Address 118 Anthony Street<br>City Santa Cruz State CA Zip Code 95060<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Retired Retired<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 300.00                  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 14 2004<br>Transaction ID: A3912<br>Amount of Each Receipt this Period<br>100.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 600.00

TOTAL This Period (last page this line number only)



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**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

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| <b>A. Morgan E. Stock</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address P.O. Box 1182<br>City State Zip Code<br>Pebble Beach CA 93853<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 400.00                                |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4021<br>Amount of Each Receipt this Period<br>300.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Paul Sweet</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 914 Whann Avenue<br>City State Zip Code<br>McLean VA 22101<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer University of Maryland<br>Occupation Administration<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 500.00                  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 10 2004<br>Transaction ID: A3829<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. Steven L. Swig</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1834 California Street<br>City State Zip Code<br>San Francisco CA 94109<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Steven L. Swig, Investments<br>Occupation Investor<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 07 2004<br>Transaction ID: A3830<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

1300.00

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

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                               |       |                                    |                                                                       |  |
|-----------------------------------------------------------------------------------------------|-------|------------------------------------|-----------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>J. Richard Thesing                       |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 27 / 2004              |  |
| Mailing Address 84 Alejandra                                                                  |       |                                    | Transaction ID: A3987                                                 |  |
| City                                                                                          | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Atherton                                                                                      | CA    | 94027                              | 500.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                           |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Retired                                                                   |       | Occupation<br>Retired              |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>500.00 |                                                                       |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Priscilla Helm Walton                    |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 18 / 2004              |  |
| Mailing Address 118 White Oaks Lane                                                           |       |                                    | Transaction ID: A3943                                                 |  |
| City                                                                                          | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Carmel Valley                                                                                 | CA    | 93924                              | 750.00                                                                |  |
| FEC ID number of contributing federal political committee. <b>C</b>                           |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>University of California<br>Santa Cruz                                    |       | Occupation<br>Professor            |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>750.00 |                                                                       |  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Joseph Wampler                           |       |                                    | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 14 / 2004              |  |
| Mailing Address 2386 Empire Grade                                                             |       |                                    | Transaction ID: A3913                                                 |  |
| City                                                                                          | State | Zip Code                           | Amount of Each Receipt this Period                                    |  |
| Santa Cruz                                                                                    | CA    | 95060-9701                         | 60.00                                                                 |  |
| FEC ID number of contributing federal political committee. <b>C</b>                           |       |                                    | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Retired                                                                   |       | Occupation<br>Retired              |                                                                       |  |
| Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ |       | Election Cycle-to-Date ▼<br>310.00 |                                                                       |  |

SUBTOTAL of Receipts This Page (optional) ▶

1310.00

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  
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(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)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                     |  |                                                                                                                                                                                                        |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Joseph Wampler<br>Mailing Address 2386 Empire Grade<br>City State Zip Code<br>Santa Cruz CA 95060-9701<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>310.00                                           |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 23 2004<br>Transaction ID: A3954<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Eleanor Wasson<br>Mailing Address 860 Escalona Drive<br>City State Zip Code<br>Santa Cruz CA 95060<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Retired<br>Occupation Retired<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>1050.00                                              |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 22 2004<br>Transaction ID: A3874<br>Amount of Each Receipt this Period<br>50.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Joel A. Weinstein<br>Mailing Address 140 Carmel Riviera Drive<br>City State Zip Code<br>Carmel CA 93923<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Wein-Glass Associates, Inc.<br>Occupation Manufacturers Representative<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼<br>Election Cycle-to-Date ▼<br>500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3988<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) 800.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
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Use separate schedule(s)  
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|-----------------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|
| <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)

Friends of Farr

|                                                                                                                                                                                                                                    |  |                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Malcolm S. Weintraub<br>Mailing Address P.O. Box 606<br><br>City Carmel State CA Zip Code 93821<br><br>FEC ID number of contributing federal political committee. <b>C</b>    |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 18 / 2004<br>Transaction ID: A3936<br>Amount of Each Receipt this Period<br><br>500.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer<br>Weintraub, Genshies, Chad-<br>iak, Sprowl<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                                                                                       |  | Occupation<br>Attorney<br>Election Cycle-to-Date ▼<br><br>500.00                                                                                                                                                   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>John Garrett Williams<br>Mailing Address 875 Linden Lane<br><br>City Davis State CA Zip Code 95616<br><br>FEC ID number of contributing federal political committee. <b>C</b> |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 21 / 2004<br>Transaction ID: A3967<br>Amount of Each Receipt this Period<br><br>250.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer<br>John Garrett Williams, Hy-<br>drologist<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                                                                                         |  | Occupation<br>Hydrologist<br>Election Cycle-to-Date ▼<br><br>350.00                                                                                                                                                |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Margaret Williams<br>Mailing Address Route 1 Box 87<br><br>City Carmel State CA Zip Code 93823<br><br>FEC ID number of contributing federal political committee. <b>C</b>     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 15 / 2004<br>Transaction ID: A3927<br>Amount of Each Receipt this Period<br><br>250.00<br><br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| Name of Employer<br>Mid Coast Investments<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                                                                                                                           |  | Occupation<br>Business Owner<br>Election Cycle-to-Date ▼<br><br>350.00                                                                                                                                             |

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

1000.00

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

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|                                                                 |                                       |                                                                       |                                               |
|-----------------------------------------------------------------|---------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------|
| NAME OF COMMITTEE (In Full)<br>Friends of Farr                  |                                       |                                                                       |                                               |
| Full Name (Last, First, Middle Initial)<br>A. Cary Yeh          |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 23 / 2004              |                                               |
| Mailing Address 724 Archer Street                               |                                       | Transaction ID: A3947                                                 |                                               |
| City<br>Monterey                                                | State<br>CA                           | Zip Code<br>93840                                                     | Amount of Each Receipt this Period<br>250.00  |
| FEC ID number of contributing federal political committee.<br>C |                                       | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                               |
| Name of Employer<br>CHOMP                                       | Occupation<br>Physician               | Election Cycle-to-Date ▼                                              |                                               |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼     | 250.00                                |                                                                       |                                               |
| Full Name (Last, First, Middle Initial)<br>B. Steve Zlotkin     |                                       | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 23 / 2004              |                                               |
| Mailing Address 5975 Rossi Lane                                 |                                       | Transaction ID: A3955                                                 |                                               |
| City<br>Gilroy                                                  | State<br>CA                           | Zip Code<br>95020                                                     | Amount of Each Receipt this Period<br>1000.00 |
| FEC ID number of contributing federal political committee.<br>C |                                       | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |                                               |
| Name of Employer<br>Overland Parts, Inc.                        | Occupation<br>Chief Executive Officer | Election Cycle-to-Date ▼                                              |                                               |
| Receipt For: 2004<br>Primary X General<br>Other (specify) ▼     | 1000.00                               |                                                                       |                                               |

|                                                           |   |          |
|-----------------------------------------------------------|---|----------|
| SUBTOTAL of Receipts This Page (optional) .....           | ▶ | 1250.00  |
| TOTAL This Period (last page this line number only) ..... | ▶ | 33943.00 |

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Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Automotive Free International Trade PAC<br>Mailing Address 1625 Prince Street, Suite 225<br>City State Zip Code<br>Alexandria VA 22314<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2500.00             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 14 2004<br>Transaction ID: A3832<br>Amount of Each Receipt this Period<br>1500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>American Federation of Teachers COPE Voluntary A/C<br>Mailing Address 555 New Jersey Avenue, NW<br>City State Zip Code<br>Washington DC 20001-2029<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 3000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 18 2004<br>Transaction ID: A3928<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>American Vintners Association for Progress Federal PAC<br>Mailing Address 1200 G Street, NW, 3360<br>City State Zip Code<br>Washington DC 20005<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 750.00     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4024<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |

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

2750.00

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

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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                   |  |  |                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>The ASCAP Legislative Fund for the Arts<br>Mailing Address 1 Lincoln Plaza<br>City State Zip Code<br>New York NY 10023<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 250.00                  |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3978<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>ATLA PAC-Assoc of Trial Lawyers America PAC<br>Mailing Address 1050 31st Street, NW<br>City State Zip Code<br>Washington DC 20007<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 6000.00      |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A4034<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Auction Market PAC of the Chicago Board Trade<br>Mailing Address 141 West Jackson Boulevard<br>City State Zip Code<br>Chicago IL 60604<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 1000.00 |  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4008<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

2250.00

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

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                             |  |                                                                                                                                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Bank of America Corporation PAC<br>Mailing Address 800 Peachtree Street, NE 3rd Floor<br>City Atlanta State GA Zip Code 30308-3615<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00               |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 18 2004<br>Transaction ID: A3929<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Bank of America Corporation PAC<br>Mailing Address 800 Peachtree Street, NE 3rd Floor<br>City Atlanta State GA Zip Code 30308-3615<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00               |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4010<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Bay Area Municipal Elections Committee - Federal<br>Mailing Address 125 South Market Street, Suite 1160<br>City San Jose State CA Zip Code 95113<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 1000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3948<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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



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or each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Blue Diamond Growers PAC<br>Mailing Address 1802 C Street<br>City State Zip Code<br>Sacramento CA 95814<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 3000.00                                                                    |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3980<br>Amount of Each Receipt this Period<br>3000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>CA Association of Winegrape Growers PAC<br>Mailing Address 801 University Avenue, #135<br>City State Zip Code<br>Sacramento CA 95825<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 1000.00                                       |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 18 2004<br>Transaction ID: A3930<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Committee on Letter Carriers Political Education, National Assn of Letter Carriers<br>Mailing Address 100 Indiana Avenue, NW<br>City State Zip Code<br>Washington DC 20001<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 3000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4035<br>Amount of Each Receipt this Period<br>1000.00<br>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)

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Use separate schedule(s)  
or each category of the  
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☐ 11a ☐ 11b ☒ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                         |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Dairy Farmers of America, Inc. DEPAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 10220 N. Ambassador Drive<br>City State Zip Code<br>Kansas City MO 65153<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>2000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 18 2004<br>Transaction ID: A3931<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. Farm Credit PAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 50 F Street, NW, Ste. 900<br>City State Zip Code<br>Washington DC 20001<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>3000.00                       |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 18 2004<br>Transaction ID: A3837<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. Federal Wildland Fire Service Association PAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address P.O. Box 2232<br>City State Zip Code<br>Nevada City CA 95559<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>350.00     |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>04 14 2004<br>Transaction ID: A3833<br>Amount of Each Receipt this Period<br>100.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |

SUBTOTAL of Receipts This Page (optional) ▶

2100.00

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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Federal Wildland Fire Service Association PAC<br>Mailing Address P.O. Box 2232<br><br>City Nevada City State CA Zip Code 95854<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Occupation<br><br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 350.00                                                  |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3996<br>Amount of Each Receipt this Period<br><br>250.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>General Atomics Federal PAC<br>Mailing Address P.O. Box 2293D<br><br>City San Diego State CA Zip Code 92112<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Occupation<br><br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00                                                                    |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3981<br>Amount of Each Receipt this Period<br><br>1000.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Hotel Employees and Restaurant Employees International Union - To Insure Progress<br>Mailing Address 1219 28th Street Northwest<br><br>City Washington State DC Zip Code 20007<br><br>FEC ID number of contributing federal political committee. <b>C</b><br><br>Name of Employer Occupation<br><br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 4000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 27 2004<br>Transaction ID: A3987<br>Amount of Each Receipt this Period<br><br>1000.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |

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

2250.00

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

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

Use separate schedule(s)  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                            |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Human Rights Campaign PAC<br>Mailing Address 164D Rhode Island Avenue,<br>Northwest<br>City State Zip Code<br>Washington DC 20036<br>FEC ID number of contributing<br>federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00                        |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3982<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Int'l Brotherhood Boilermaker Educ Fund (LEAP)<br>Mailing Address 753 State Avenue, Suite 570<br>City State Zip Code<br>Kansas City KS 66101<br>FEC ID number of contributing<br>federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00             |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4011<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>International Longshore & Warehouse Union Political Action Fund<br>Mailing Address 118B Franklin Street<br>City State Zip Code<br>San Francisco CA 94109<br>FEC ID number of contributing<br>federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4025<br>Amount of Each Receipt this Period<br>2000.00<br>Limit Increased Due to Opponent's<br>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) ▶

**SCHEDULE A (FEC Form 3 )**  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Int'l Union of Operating Engineers (EPEC)<br>Mailing Address 1125 Seventeenth St. N.W.<br><br>City State Zip Code<br>Washington DC 20036<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>1500.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>05 21 2004<br>Transaction ID: A3870<br>Amount of Each Receipt this Period<br>500.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Machinists Non-Partisan Political League<br>Mailing Address 8000 Machinist Place<br><br>City State Zip Code<br>Upper Marlboro MD 20772<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>8000.00   |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 22 2004<br>Transaction ID: A3944<br>Amount of Each Receipt this Period<br>3000.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Marijuana Policy Project Medical Marijuana PAC<br>Mailing Address P.O. Box 77492<br><br>City State Zip Code<br>Washington DC 20013<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary <input checked="" type="checkbox"/> General<br>Other (specify) ▼ Election Cycle-to-Date ▼<br>5000.00       |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4036<br>Amount of Each Receipt this Period<br>4000.00<br><br>Limit Increased Due to Opponent's<br>Spending (2 U.S.C. 441a(f)(441a-1)) |

SUBTOTAL of Receipts This Page (optional) ▶

7500.00

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                                                                                                                                |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. National Council of Farmer Cooperatives PAC</b><br>Mailing Address 50 F Street, N.W., Ste. 800<br>City Washington State DC Zip Code 20001<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 2000.00                         |  | Date of Receipt<br>m / d / y 04 / 05 / 2004<br>Transaction ID: A3816<br>Amount of Each Receipt this Period<br>500.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))  |
| <b>B. NATCA PAC/National Air Traffic Controllers Association PAC</b><br>Mailing Address 1325 Massachusetts Avenue, Northwest<br>City Washington State DC Zip Code 20005<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 3000.00 |  | Date of Receipt<br>m / d / y 06 / 18 / 2004<br>Transaction ID: A3932<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. National Chicken Council PAC</b><br>Mailing Address 1015 15th Street, Northwest, Suite 930<br>City Washington State DC Zip Code 20005<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 1000.00                             |  | Date of Receipt<br>m / d / y 06 / 30 / 2004<br>Transaction ID: A4013<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

**SUBTOTAL** of Receipts This Page (optional) 2500.00

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                         |                                                   |                                                                       |  |
|---------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------------------|--|
| Full Name (Last, First, Middle Initial)<br><b>A. National Rural Letter Carriers Association PAC</b>     |                                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 30 / 2004              |  |
| Mailing Address 1830 Duke Street, 4th Floor                                                             |                                                   | Transaction ID: A4026                                                 |  |
| City State Zip Code<br>Alexandria VA 22314-3465                                                         | Amount of Each Receipt this Period<br>1000.00     |                                                                       |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                     |                                                   | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                         | Occupation<br>Election Cycle-to-Date ▼<br>4000.00 |                                                                       |  |
| Full Name (Last, First, Middle Initial)<br><b>B. Pacific Gas &amp; Electric Corporation Energy PAC</b>  |                                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 24 / 2004              |  |
| Mailing Address 77 Beale Street                                                                         |                                                   | Transaction ID: A3983                                                 |  |
| City State Zip Code<br>San Francisco CA 94177                                                           | Amount of Each Receipt this Period<br>1000.00     |                                                                       |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                     |                                                   | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                         | Occupation<br>Election Cycle-to-Date ▼<br>4000.00 |                                                                       |  |
| Full Name (Last, First, Middle Initial)<br><b>C. PEACH-PAC California Canning Peach Association PAC</b> |                                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 / 18 / 2004              |  |
| Mailing Address P.O. Box 7001                                                                           |                                                   | Transaction ID: A3933                                                 |  |
| City State Zip Code<br>Lafayette CA 94549                                                               | Amount of Each Receipt this Period<br>1000.00     |                                                                       |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                     |                                                   | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                         | Occupation<br>Election Cycle-to-Date ▼<br>2000.00 |                                                                       |  |

SUBTOTAL of Receipts This Page (optional) 3000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3 )**  
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Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                                       |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Pfizer Inc. PAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 235 East 42nd Street<br>City New York State NY Zip Code 10017<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00                               |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4027<br>Amount of Each Receipt this Period<br>2000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))                               |
| <b>B. Peg Pinard for State Senate</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 555 Capitol Mall, Suite 1425<br>City Sacramento State CA Zip Code 95814<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 250.00          |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 18 2004<br>Transaction ID: A3935<br>Amount of Each Receipt this Period<br>250.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))<br>Federally Permissible Funds |
| <b>C. Pitachio PAC - Western Pitachio Area PAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 517 C Street, Northeast<br>City Washington State DC Zip Code 20002<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4015<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1))                               |

SUBTOTAL of Receipts This Page (optional) ▶

3250.00

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



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Use separate schedule(s)  
or each category of the  
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12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                            |  |                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>A. Realtors Political Action Committee - RPAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 430 North Michigan Avenue<br>City Chicago State IL Zip Code 60611<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 6000.00 |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 24 2004<br>Transaction ID: A3984<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>B. SAFFAC - Society of American Florists</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 1601 Duke Street<br>City Alexandria State VA Zip Code 22314-9466<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 3000.00       |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 28 2004<br>Transaction ID: A4016<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |
| <b>C. Treasury Employees PAC</b><br>Full Name (Last, First, Middle Initial)<br>Mailing Address 901 E Street, Northwest, Suite 600<br>City Washington State DC Zip Code 20004<br>FEC ID number of contributing federal political committee. <b>C</b><br>Name of Employer Occupation<br>Receipt For: 2004 Election Cycle-to-Date ▼<br>Primary X General<br>Other (specify) ▼ 1000.00         |  | Date of Receipt<br>M M / D D / Y Y Y Y<br>06 30 2004<br>Transaction ID: A4017<br>Amount of Each Receipt this Period<br>1000.00<br>Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |

**SUBTOTAL** of Receipts This Page (optional) 3000.00

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

|                                                                                                            |                                                   |                                                                       |  |
|------------------------------------------------------------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------------------------|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>United Auto Workers V CAP                             |                                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 1 8 / 2 0 0 4         |  |
| Mailing Address 8000 East Jefferson Avenue                                                                 |                                                   | Transaction ID: A3984                                                 |  |
| City State Zip Code<br>Detroit MI 48214-3863                                                               | Amount of Each Receipt this Period<br>1000.00     |                                                                       |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                        |                                                   | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                            | Occupation<br>Election Cycle-to-Date ▼<br>7000.00 |                                                                       |  |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>United Fresh Fruit & Vegetable Association - FRESHFAC |                                                   | Date of Receipt<br>M M / D D / Y Y Y Y<br>0 6 / 2 4 / 2 0 0 4         |  |
| Mailing Address 1901 Pennsylvania Avenue, NW,<br>Suite 1100                                                |                                                   | Transaction ID: A3985                                                 |  |
| City State Zip Code<br>Washington DC 20006                                                                 | Amount of Each Receipt this Period<br>1000.00     |                                                                       |  |
| FEC ID number of contributing federal political committee. <b>C</b>                                        |                                                   | Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(f)(441a-1)) |  |
| Name of Employer<br>Receipt For: 2004<br>Primary X General<br>Other (specify) ▼                            | Occupation<br>Election Cycle-to-Date ▼<br>1000.00 |                                                                       |  |

SUBTOTAL of Receipts This Page (optional) ▶

2000.00

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

41600.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)  
A. Airport Road Self-Storage Inc.

Mailing Address 847 Airport Road

City Monterey State CA Zip Code 95814

Purpose of Disbursement  
Storage Rental

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1216

Date of Disbursement

05 / 03 / 2004

Amount of Each Disbursement this Period

84.00

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

Full Name (Last, First, Middle Initial)  
B. Airport Road Self-Storage Inc.

Mailing Address 847 Airport Road

City Monterey State CA Zip Code 95814

Purpose of Disbursement  
Storage Rental

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1252

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

84.00

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

Full Name (Last, First, Middle Initial)  
C. Airport Road Self-Storage Inc.

Mailing Address 847 Airport Road

City Monterey State CA Zip Code 95814

Purpose of Disbursement  
Storage Rental

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1298

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

84.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

252.00

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  
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(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Andrews Printing & Stationery , Inc.

Mailing Address P.O. Box 185

City  
Seaside

State  
CA

Zip Code  
93955

Purpose of Disbursement  
Printing

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1228

Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

10.38

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

Full Name (Last, First, Middle Initial)

B. AT&T Wireless

Mailing Address P.O. Box 78075

City  
Phoenix

State  
AZ

Zip Code  
85062-9075

Purpose of Disbursement  
Phone

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1185

Date of Disbursement

04 / 02 / 2004

Amount of Each Disbursement this Period

93.12

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

Full Name (Last, First, Middle Initial)

C. AT&T Wireless

Mailing Address P.O. Box 78075

City  
Phoenix

State  
AZ

Zip Code  
85062-9075

Purpose of Disbursement  
Phone

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1236

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

88.33

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

SUBTOTAL of Disbursements This Page (optional) ▶

191.83

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. AT&T Wireless

Mailing Address P.O. Box 79075

City  
Phoenix

State  
AZ

Zip Code  
85062-9075

Purpose of Disbursement  
Phone

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1259

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

91.05

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

Full Name (Last, First, Middle Initial)

B. Blue Cross of California

Mailing Address P.O. Box 54010

City  
Los Angeles

State  
CA

Zip Code  
90054-0010

Purpose of Disbursement  
Insurance Premium

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1220

Date of Disbursement

06 / 04 / 2004

Amount of Each Disbursement this Period

1094.00

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

Full Name (Last, First, Middle Initial)

C. Blue Cross of California

Mailing Address P.O. Box 54010

City  
Los Angeles

State  
CA

Zip Code  
90054-0010

Purpose of Disbursement  
Insurance Premium

Candidate Name

001  
Category/  
Type

Office Sought: House  
Senate  
President

Disbursement For:  
Primary General  
Other (specify) ▼

State: District

Transaction ID: B1269

Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

1094.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2279.05

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                 |  |                                                                                                                                                                                                                |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B11B6</p> <p>Date of Disbursement 04 / 05 / 2004</p> <p>Amount of Each Disbursement this Period 90.19</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B12D8</p> <p>Date of Disbursement 04 / 27 / 2004</p> <p>Amount of Each Disbursement this Period 21.17</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B12D9</p> <p>Date of Disbursement 04 / 27 / 2004</p> <p>Amount of Each Disbursement this Period 38.67</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) ▶</p>                                                                                                                                                                                                                                                                                                  |  | <p><b>151.03</b></p>                                                                                                                                                                                           |
| <p><b>TOTAL</b> This Period (last page this line number only) ▶</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)

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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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                        |  |                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1210</p> <p>Date of Disbursement 04 / 28 / 2004</p> <p>Amount of Each Disbursement this Period 30.17</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1240</p> <p>Date of Disbursement 05 / 20 / 2004</p> <p>Amount of Each Disbursement this Period 17.81</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Federal Express Corp.</b></p> <p>Mailing Address P.O. Box 7221</p> <p>City Pasadena State CA Zip Code 91109-7321</p> <p>Purpose of Disbursement Shipping</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1274</p> <p>Date of Disbursement 06 / 16 / 2004</p> <p>Amount of Each Disbursement this Period 53.93</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) ▶</p>                                                                                                                                                                                                                                                                                                         |  | <p><b>101.91</b></p>                                                                                                                                                                                           |
| <p><b>TOTAL</b> This Period (last page this line number only) ▶</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)

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Federal Express Corp.

Mailing Address P.O. Box 7221

City Pasadena State CA Zip Code 91109-7321

Purpose of Disbursement  
Shipping

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1278

Date of Disbursement

06 / 22 / 2004

Amount of Each Disbursement this Period

80.13

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

Full Name (Last, First, Middle Initial)

B. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1191

Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

1807.48

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

Full Name (Last, First, Middle Initial)

C. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1199

Date of Disbursement

04 / 19 / 2004

Amount of Each Disbursement this Period

74.18

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

SUBTOTAL of Disbursements This Page (optional) ▶

1961.79

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                      |  |                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Plasha Fielding</b></p> <p>Mailing Address 1241 2nd Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement Travel</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1200</p> <p>Date of Disbursement 04 / 19 / 2004</p> <p>Amount of Each Disbursement this Period 78.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>   |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Plasha Fielding</b></p> <p>Mailing Address 1241 2nd Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement Salary</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1211</p> <p>Date of Disbursement 04 / 30 / 2004</p> <p>Amount of Each Disbursement this Period 1807.48</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Plasha Fielding</b></p> <p>Mailing Address 1241 2nd Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement Rent</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>   |  | <p>Transaction ID: B1217</p> <p>Date of Disbursement 05 / 03 / 2004</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>  |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) ▶</p>                                                                                                                                                                                                                                                                                       |  | <p><b>2185.48</b></p>                                                                                                                                                                                            |
| <p><b>TOTAL</b> This Period (last page this line number only) ▶</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)

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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)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Dominic Lazzarino

Mailing Address P.O. Box 221681

City Carmel State CA Zip Code 93922-1681

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: S81

Date of Disbursement

05 / 03 / 2004

Amount of Each Disbursement this Period

300.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1231

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

1807.48

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

Full Name (Last, First, Middle Initial)

C. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1242

Date of Disbursement

05 / 31 / 2004

Amount of Each Disbursement this Period

1807.48

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

SUBTOTAL of Disbursements This Page (optional) ▶

3614.96

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                          |  |  |                                                                                                                                                                                                                                                      |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Plasha Fielding</b></p> <p>Mailing Address 1241 2nd Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement<br/>Campaign Office Rent</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p> |  |  | <p>Transaction ID: B1258<br/>Date of Disbursement<br/>06 / 02 / 2004</p> <p>Amount of Each Disbursement this Period<br/>300.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>                         |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Dominic Lazzarino</b></p> <p>Mailing Address P.O. Box 221681</p> <p>City Carmel State CA Zip Code 93922-1681</p> <p>Purpose of Disbursement<br/>Rent</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p>            |  |  | <p>Transaction ID: S85<br/>Date of Disbursement<br/>06 / 02 / 2004</p> <p>Amount of Each Disbursement this Period<br/>300.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Plasha Fielding</b></p> <p>Mailing Address 1241 2nd Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement<br/>Salary</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p>               |  |  | <p>Transaction ID: B1264<br/>Date of Disbursement<br/>06 / 15 / 2004</p> <p>Amount of Each Disbursement this Period<br/>1807.48</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>                        |
| <p><b>SUBTOTAL of Disbursements This Page (optional)</b></p>                                                                                                                                                                                                                                                                                                                                             |  |  | <p><b>2107.48</b></p>                                                                                                                                                                                                                                |
| <p><b>TOTAL This Period (last page this line number only)</b></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)

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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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Salary

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1293

Date of Disbursement

06 / 29 / 2004

Amount of Each Disbursement this Period

1807.48

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

Full Name (Last, First, Middle Initial)

B. Plasha Fielding

Mailing Address 1241 2nd Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Campaign Office Rent

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1297

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

300.00

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

Full Name (Last, First, Middle Initial)

C. Dominic Lazzarino

Mailing Address P.O. Box 221881

City Carmel State CA Zip Code 93922-1881

Purpose of Disbursement  
Rent

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: S92

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

300.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2107.48

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |  |                                                                                                                                                                                                                                  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/>A. John Franzen dba Franzen &amp; Company Strategic Communicat-<br/>ions</p> <p>Mailing Address 610 C Street, Northeast</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement<br/>Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: House Senate President<br/>State: District</p> <p>Disbursement For: Primary General<br/>Other (specify) ▼</p> <p>003<br/>Category/<br/>Type</p> |  | <p>Transaction ID: B1222</p> <p>Date of Disbursement<br/>05 / 12 / 2004</p> <p>Amount of Each Disbursement this Period<br/>2000.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/>B. John Franzen dba Franzen &amp; Company Strategic Communicat-<br/>ions</p> <p>Mailing Address 610 C Street, Northeast</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement<br/>Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: House Senate President<br/>State: District</p> <p>Disbursement For: Primary General<br/>Other (specify) ▼</p> <p>003<br/>Category/<br/>Type</p> |  | <p>Transaction ID: B1223</p> <p>Date of Disbursement<br/>05 / 12 / 2004</p> <p>Amount of Each Disbursement this Period<br/>360.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>  |
| <p>Full Name (Last, First, Middle Initial)<br/>C. John Franzen dba Franzen &amp; Company Strategic Communicat-<br/>ions</p> <p>Mailing Address 610 C Street, Northeast</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement<br/>Media Consulting</p> <p>Candidate Name</p> <p>Office Sought: House Senate President<br/>State: District</p> <p>Disbursement For: Primary General<br/>Other (specify) ▼</p> <p>003<br/>Category/<br/>Type</p> |  | <p>Transaction ID: B1256</p> <p>Date of Disbursement<br/>05 / 28 / 2004</p> <p>Amount of Each Disbursement this Period<br/>4000.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>                                                                                                                                                                                                                                                                                                                                                                                                    |  | <p><b>6360.00</b></p>                                                                                                                                                                                                            |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</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)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. John Franzen dba Franzen & Company Strategic Communicat-  
ions

Mailing Address 610 C Street, Northeast

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Media Consulting

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: B1299

Date of Disbursement

06 / 30 / 2004

Amount of Each Disbursement this Period

4000.00

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

Full Name (Last, First, Middle Initial)

B. Mary J. Grace

Mailing Address 1071 Roosevelt Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Postage

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1279

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

16.61

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

Full Name (Last, First, Middle Initial)

C. Mary J. Grace

Mailing Address 1071 Roosevelt Street

City Monterey State CA Zip Code 93940

Purpose of Disbursement  
Box Rental

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1280

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

26.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

4044.61

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Kieloch Consulting, Inc.

Mailing Address 301 4th Street, NE, Suite 200

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

003  
Category/  
Type

Transaction ID: B1214

Date of Disbursement

04 / 30 / 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. Kieloch Consulting, Inc.

Mailing Address 301 4th Street, NE, Suite 200

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1254

Date of Disbursement

05 / 28 / 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)

C. Kieloch Consulting, Inc.

Mailing Address 301 4th Street, NE, Suite 200

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Catering

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1278

Date of Disbursement

06 / 22 / 2004

Amount of Each Disbursement this Period

300.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

5300.00

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)

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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)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Kieloch Consulting, Inc.

Mailing Address 301 4th Street, NE, Suite 200

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

003  
Category/  
Type

Transaction ID: B1296

Date of Disbursement

06 / 30 / 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. The KRKC Stations

Mailing Address P.O. Box 628

City King City State CA Zip Code 93930

Purpose of Disbursement  
Radio Advertisement

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

004  
Category/  
Type

Transaction ID: B1229

Date of Disbursement

06 / 12 / 2004

Amount of Each Disbursement this Period

100.00

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

Full Name (Last, First, Middle Initial)

C. The KRKC Stations

Mailing Address P.O. Box 628

City King City State CA Zip Code 93930

Purpose of Disbursement  
Radio Advertisement

Candidate Name

Office Sought: House  
Senate  
President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

004  
Category/  
Type

Transaction ID: B1273

Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

200.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

2800.00

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)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                              |  |                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. National Democratic Club</b></p> <p>Mailing Address 30 Ivy Street, Southeast</p> <p>City Washington State DC Zip Code 20003-4071</p> <p>Purpose of Disbursement Membership Dues</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>                       |  | <p>Transaction ID: B1225</p> <p>Date of Disbursement 05 / 12 / 2004</p> <p>Amount of Each Disbursement this Period 100.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>  |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. National Democratic Club</b></p> <p>Mailing Address 30 Ivy Street, Southeast</p> <p>City Washington State DC Zip Code 20003-4071</p> <p>Purpose of Disbursement Membership Dues</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>                       |  | <p>Transaction ID: B1255</p> <p>Date of Disbursement 05 / 28 / 2004</p> <p>Amount of Each Disbursement this Period 50.00</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>   |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Olson, Hagel &amp; Fishburn, LLP</b></p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement Legal &amp; Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1194</p> <p>Date of Disbursement 04 / 15 / 2004</p> <p>Amount of Each Disbursement this Period 5198.98</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p> <p><b>TOTAL</b> This Period (last page this line number only) .....</p>                                                                                                                                                                                                                                                                   |  | <p><b>5348.98</b></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)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Olson, Hagel &amp; Fishburn, LLP</b></p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement<br/>Legal &amp; Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1234</p> <p>Date of Disbursement<br/>05 / 14 / 2004</p> <p>Amount of Each Disbursement this Period<br/>3127.75</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Olson, Hagel &amp; Fishburn, LLP</b></p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement<br/>Legal &amp; Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1237</p> <p>Date of Disbursement<br/>05 / 14 / 2004</p> <p>Amount of Each Disbursement this Period<br/>14.15</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>   |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Olson, Hagel &amp; Fishburn, LLP</b></p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement<br/>Legal &amp; Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1267</p> <p>Date of Disbursement<br/>06 / 15 / 2004</p> <p>Amount of Each Disbursement this Period<br/>1337.17</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>                                                                                                                                                                                                                                                                                                                                               |  | <p><b>4479.07</b></p>                                                                                                                                                                                                            |
| <p><b>TOTAL</b> This Period (last page this line number only) .....</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)

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

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NAME OF COMMITTEE (In Full)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. Olson, Hagel &amp; Fishburn, LLP</b></p> <p>Mailing Address 555 Capitol Mall, Suite 1425</p> <p>City Sacramento State CA Zip Code 95814</p> <p>Purpose of Disbursement<br/>Legal &amp; Reporting Services</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1268</p> <p>Date of Disbursement<br/>06 / 15 / 2004</p> <p>Amount of Each Disbursement this Period<br/>737.50</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. Red Shift Internet Services, Inc.</b></p> <p>Mailing Address 712 Hawthorne Street, Department C</p> <p>City Monterey State CA Zip Code 93940-1102</p> <p>Purpose of Disbursement<br/>Website</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>              |  | <p>Transaction ID: B1195</p> <p>Date of Disbursement<br/>04 / 19 / 2004</p> <p>Amount of Each Disbursement this Period<br/>29.90</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>  |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. Red Shift Internet Services, Inc.</b></p> <p>Mailing Address 712 Hawthorne Street, Department C</p> <p>City Monterey State CA Zip Code 93940-1102</p> <p>Purpose of Disbursement<br/>Website</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>              |  | <p>Transaction ID: B1235</p> <p>Date of Disbursement<br/>05 / 14 / 2004</p> <p>Amount of Each Disbursement this Period<br/>29.90</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>  |
| <p><b>SUBTOTAL of Disbursements This Page (optional)</b></p>                                                                                                                                                                                                                                                                                                                                                     |  | <b>797.30</b>                                                                                                                                                                                                                   |
| <p><b>TOTAL This Period (last page this line number only)</b></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)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Red Shift Internet Services, Inc.

Mailing Address 712 Hawthorne Street, Department C

City Monterey State CA Zip Code 93940-1102

Purpose of Disbursement  
Website

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1271

Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

29.90

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

Full Name (Last, First, Middle Initial)

B. River City Business Service

Mailing Address 5435 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1192

Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

883.77

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

Full Name (Last, First, Middle Initial)

C. River City Business Service

Mailing Address 5435 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1193

Date of Disbursement

04 / 15 / 2004

Amount of Each Disbursement this Period

34.50

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

SUBTOTAL of Disbursements This Page (optional) ▶

948.17

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1212

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

883.77

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

Full Name (Last, First, Middle Initial)

B. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1213

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

34.50

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

Full Name (Last, First, Middle Initial)

C. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1232

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

883.77

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

SUBTOTAL of Disbursements This Page (optional) ▶

1802.04

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

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

State: District

Transaction ID: B1233

Date of Disbursement

05 / 14 / 2004

Amount of Each Disbursement this Period

34.50

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

001  
Category/  
Type

Full Name (Last, First, Middle Initial)

B. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

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

State: District

Transaction ID: B1243

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

883.77

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

001  
Category/  
Type

Full Name (Last, First, Middle Initial)

C. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

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

State: District

Transaction ID: B1244

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

34.50

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

001  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional) ▶

952.77

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1265

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

883.77

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

Full Name (Last, First, Middle Initial)

B. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1266

Date of Disbursement

06 / 15 / 2004

Amount of Each Disbursement this Period

35.50

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

Full Name (Last, First, Middle Initial)

C. River City Business Service

Mailing Address 5435 Madison Avenue

City State Zip Code  
Sacramento CA 95841

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1294

Date of Disbursement

06 / 29 / 2004

Amount of Each Disbursement this Period

883.77

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

SUBTOTAL of Disbursements This Page (optional) ▶

1803.04

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. River City Business Service

Mailing Address 5435 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
Payroll Services

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1295

Date of Disbursement

06 / 29 / 2004

Amount of Each Disbursement this Period

35.50

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

Full Name (Last, First, Middle Initial)

B. SBC

Mailing Address Payment Center

City Sacramento State CA Zip Code 95887

Purpose of Disbursement  
Phone

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1218

Date of Disbursement

06 / 09 / 2004

Amount of Each Disbursement this Period

353.76

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

Full Name (Last, First, Middle Initial)

C. SBC

Mailing Address Payment Center

City Sacramento State CA Zip Code 95887

Purpose of Disbursement  
Phone

Candidate Name

Office Sought: House  
Senate  
President

State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1270

Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

278.14

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

SUBTOTAL of Disbursements This Page (optional) ▶

668.40

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)

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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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. SBC

Mailing Address Payment Center

City Sacramento State CA Zip Code 95887

Purpose of Disbursement  
Phone

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B12B1

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

428.28

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

Full Name (Last, First, Middle Initial)

B. South County Newspapers

Mailing Address P.O. Box 710

City King City State CA Zip Code 95030-0710

Purpose of Disbursement  
Advertisement

Candidate Name

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

State: District

004  
Category/  
Type

Transaction ID: B1272

Date of Disbursement

06 / 16 / 2004

Amount of Each Disbursement this Period

198.00

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

Full Name (Last, First, Middle Initial)

C. State Compensation Insurance Fund

Mailing Address P.O. Box 7854

City San Francisco State CA Zip Code 94120-7854

Purpose of Disbursement  
Insurance

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1215

Date of Disbursement

04 / 30 / 2004

Amount of Each Disbursement this Period

128.50

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

SUBTOTAL of Disbursements This Page (optional) ▶

755.78

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)  
A. State Compensation Insurance Fund

Mailing Address P.O. Box 7854

City State Zip Code  
San Francisco CA 94120-7854

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1241  
Date of Disbursement

05 / 27 / 2004

Amount of Each Disbursement this Period

128.50

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

Full Name (Last, First, Middle Initial)  
B. US Bank

Mailing Address P.O. Box 780429

City State Zip Code  
St. Louis MO 63178-0429

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1187  
Date of Disbursement

04 / 01 / 2004

Amount of Each Disbursement this Period

96.90

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

Full Name (Last, First, Middle Initial)  
C. US Bank

Mailing Address P.O. Box 780429

City State Zip Code  
St. Louis MO 63178-0429

Purpose of Disbursement  
Postage paid for by Postal Store

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1203  
Date of Disbursement

04 / 23 / 2004

Amount of Each Disbursement this Period

24.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

249.40

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)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                                                                                  |  |                                                                                                                                                                                                                                                   |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. US Postmaster</b></p> <p>Mailing Address 800 K Street, Northwest #16</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement<br/>Postage paid for by Postal Store</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p> |  | <p>Transaction ID: S93<br/>Date of Disbursement<br/>04 / 23 / 2004</p> <p>Amount of Each Disbursement this Period<br/>24.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53<br/><b>[MEMO ITEM]</b></p>  |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. US Bank</b></p> <p>Mailing Address P.O. Box 760429</p> <p>City St. Louis State MO Zip Code 63179-0429</p> <p>Purpose of Disbursement<br/>Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p>                               |  | <p>Transaction ID: B12D4<br/>Date of Disbursement<br/>04 / 23 / 2004</p> <p>Amount of Each Disbursement this Period<br/>260.42</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p>                      |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. PC People</b></p> <p>Mailing Address 534 Abrego Street</p> <p>City Monterey State CA Zip Code 93940</p> <p>Purpose of Disbursement<br/>Office Equipment</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> <p>001<br/>Category/<br/>Type</p>                                 |  | <p>Transaction ID: S94<br/>Date of Disbursement<br/>04 / 23 / 2004</p> <p>Amount of Each Disbursement this Period<br/>260.42</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53<br/><b>[MEMO ITEM]</b></p> |
| <p><b>SUBTOTAL</b> of Disbursements This Page (optional) ▶</p>                                                                                                                                                                                                                                                                                                                                                                   |  | <p><b>260.42</b></p>                                                                                                                                                                                                                              |
| <p><b>TOTAL</b> This Period (last page this line number only) ▶</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)

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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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address P.O. Box 790429

City St. Louis State MO Zip Code 63179-0429

Purpose of Disbursement  
Office Supplies

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1205

Date of Disbursement

04 / 23 / 2004

Amount of Each Disbursement this Period

7.13

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

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address P.O. Box 790429

City St. Louis State MO Zip Code 63179-0429

Purpose of Disbursement  
Meals with Constituents

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1206

Date of Disbursement

04 / 23 / 2004

Amount of Each Disbursement this Period

49.72

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

Full Name (Last, First, Middle Initial)

C. US Bank

Mailing Address P.O. Box 790429

City St. Louis State MO Zip Code 63179-0429

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For:  
Primary General  
Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1207

Date of Disbursement

04 / 23 / 2004

Amount of Each Disbursement this Period

35.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

91.85

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. US Bank</b></p> <p>Mailing Address P.O. Box 790429</p> <p>City St. Louis State MO Zip Code 63179-0429</p> <p>Purpose of Disbursement<br/>Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1221</p> <p>Date of Disbursement<br/>04 / 02 / 2004</p> <p>Amount of Each Disbursement this Period<br/>20.47</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. US Bank</b></p> <p>Mailing Address P.O. Box 790429</p> <p>City St. Louis State MO Zip Code 63179-0429</p> <p>Purpose of Disbursement<br/>Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1260</p> <p>Date of Disbursement<br/>05 / 05 / 2004</p> <p>Amount of Each Disbursement this Period<br/>20.47</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. US Bank</b></p> <p>Mailing Address P.O. Box 790429</p> <p>City St. Louis State MO Zip Code 63179-0429</p> <p>Purpose of Disbursement<br/>Bank Fee</p> <p>Candidate Name</p> <p>Office Sought: House Senate President State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: B1261</p> <p>Date of Disbursement<br/>05 / 03 / 2004</p> <p>Amount of Each Disbursement this Period<br/>25.00</p> <p>Refund or Disposal of Excess<br/>Contributions Required Under<br/>11 C.F.R. 400.53</p> |

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

**65.94**

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. US Bank

Mailing Address P.O. Box 790429

City St. Louis State MO Zip Code 63179-0429

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1262

Date of Disbursement

06 / 02 / 2004

Amount of Each Disbursement this Period

20.47

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

Full Name (Last, First, Middle Initial)

B. US Bank

Mailing Address P.O. Box 790429

City St. Louis State MO Zip Code 63179-0429

Purpose of Disbursement  
Bank Fee

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

001  
Category/  
Type

Transaction ID: B1263

Date of Disbursement

06 / 02 / 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)

C. U.S. Bank

Mailing Address P.O. Box 6309

City Fargo State ND Zip Code 58125-8309

Purpose of Disbursement  
Fundraising Postage paid by Postal Store

Candidate Name

Office Sought: House Senate President  
State: District

Disbursement For: Primary General Other (specify) ▼

003  
Category/  
Type

Transaction ID: B1262

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

223.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

268.47

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

**A. US Postmaster**

Mailing Address 800 K Street, Northwest #16

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Fundraising Postage paid by Postal Store

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: S86

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

228.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. U.S. Bank**

Mailing Address P.O. Box 6309

City Fargo State ND Zip Code 58125-6309

Purpose of Disbursement  
Office Supplies

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B12B3

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

248.68

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

Full Name (Last, First, Middle Initial)

**C. Office Depot**

Mailing Address 850 La Playa

City San Diego State CA Zip Code 92161

Purpose of Disbursement  
Office Supplies

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: S87

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

248.68

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

248.68

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. U.S. Bank

Mailing Address P.O. Box 6309

City State Zip Code  
Fargo ND 58125-6309

Purpose of Disbursement  
Food & Beverages for Volunteers

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1284

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

74.74

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

Full Name (Last, First, Middle Initial)

B. U.S. Bank

Mailing Address P.O. Box 6309

City State Zip Code  
Fargo ND 58125-6309

Purpose of Disbursement  
Fundraising Supplies

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: B1285

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

53.57

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

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address P.O. Box 6309

City State Zip Code  
Fargo ND 58125-6309

Purpose of Disbursement  
Fundraising Lists

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: B1286

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

126.06

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

SUBTOTAL of Disbursements This Page (optional) ▶

254.37

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



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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                                                          |  |                                                                                                                                                                                                                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Full Name (Last, First, Middle Initial)<br/><b>A. U.S. Bank</b></p> <p>Mailing Address P.O. Box 6309</p> <p>City Fargo State ND Zip Code 58125-6309</p> <p>Purpose of Disbursement Fundraising Catering</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>      |  | <p>Transaction ID: B12B7</p> <p>Date of Disbursement 06 / 25 / 2004</p> <p>Amount of Each Disbursement this Period 63.23</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>                          |
| <p>Full Name (Last, First, Middle Initial)<br/><b>B. U.S. Bank</b></p> <p>Mailing Address P.O. Box 6309</p> <p>City Fargo State ND Zip Code 58125-6309</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p>                   |  | <p>Transaction ID: B12B8</p> <p>Date of Disbursement 06 / 28 / 2004</p> <p>Amount of Each Disbursement this Period 124.46</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p>                         |
| <p>Full Name (Last, First, Middle Initial)<br/><b>C. US Postmaster</b></p> <p>Mailing Address 800 K Street, Northwest #18</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: House Senate President</p> <p>State: District</p> <p>Disbursement For: Primary General Other (specify) ▼</p> |  | <p>Transaction ID: S88</p> <p>Date of Disbursement 06 / 28 / 2004</p> <p>Amount of Each Disbursement this Period 124.46</p> <p>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</p> <p><b>[MEMO ITEM]</b></p> |

**SUBTOTAL** of Disbursements This Page (optional) ..... **187.69**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. U.S. Bank

Mailing Address P.O. Box 6309

City Fargo State ND Zip Code 58125-8309

Purpose of Disbursement  
Food & Beverages for Meeting

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B12B9

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

96.19

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

Full Name (Last, First, Middle Initial)

B. Tarp's Roadhouse

Mailing Address 2999 Monterey Salinas Highway

City Monterey State CA Zip Code 95040

Purpose of Disbursement  
Food & Beverages for Meeting

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: S89

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

66.68

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. U.S. Bank

Mailing Address P.O. Box 6309

City Fargo State ND Zip Code 58125-8309

Purpose of Disbursement  
Hats & Shirts

Candidate Name

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

State: District

008  
Category/  
Type

Transaction ID: B1290

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

608.72

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

SUBTOTAL of Disbursements This Page (optional) ▶

705.91

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

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

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

FOR LINE NUMBER:  
(check only one)

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|                                        |                              |                              |                              |
|----------------------------------------|------------------------------|------------------------------|------------------------------|
| <input checked="" type="checkbox"/> 17 | <input type="checkbox"/> 18  | <input type="checkbox"/> 19a | <input type="checkbox"/> 19b |
| <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)  
Friends of Farr

|                                                                                                                                                                                                                                                                                                                                           |  |                                                                                                                                                                                                                  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>A. Cypress Sporting Goods</b><br>Mailing Address 2315 Fremont Street<br>City Monterey State CA Zip Code<br>Purpose of Disbursement Hats & Shirts<br>Candidate Name<br>Office Sought: House Senate President<br>State: District Disbursement For: Primary General Other (specify) ▼          |  | Transaction ID: S90<br>Date of Disbursement 05 / 28 / 2004<br>Amount of Each Disbursement this Period 609.72<br>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53<br><b>[MEMO ITEM]</b> |
| Full Name (Last, First, Middle Initial)<br><b>B. U.S. Bank</b><br>Mailing Address P.O. Box 6309<br>City Fargo State ND Zip Code 58125-6309<br>Purpose of Disbursement Printing<br>Candidate Name<br>Office Sought: House Senate President State: District Disbursement For: Primary General Other (specify) ▼                             |  | Transaction ID: B1291<br>Date of Disbursement 05 / 28 / 2004<br>Amount of Each Disbursement this Period 40.76<br>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                      |
| Full Name (Last, First, Middle Initial)<br><b>C. U.S. Bank</b><br>Mailing Address P.O. Box 6309<br>City Fargo State ND Zip Code 58125-6309<br>Purpose of Disbursement Postage paid for by the Postal Store<br>Candidate Name<br>Office Sought: House Senate President State: District Disbursement For: Primary General Other (specify) ▼ |  | Transaction ID: B1292<br>Date of Disbursement 05 / 28 / 2004<br>Amount of Each Disbursement this Period 224.00<br>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53                     |
| <b>SUBTOTAL of Disbursements This Page (optional)</b>                                                                                                                                                                                                                                                                                     |  | <b>264.76</b>                                                                                                                                                                                                    |
| <b>TOTAL This Period (last page this line number only)</b>                                                                                                                                                                                                                                                                                |  |                                                                                                                                                                                                                  |

**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 |
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. US Postmaster

Mailing Address 800 K Street, Northwest #18

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Postage paid for by the Postal Store

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: S91  
Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

224.00

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. U.S. Bank

Mailing Address P.O. Box 6309

City Fargo State ND Zip Code 58125-6309

Purpose of Disbursement  
Fundraising Postage

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: B1318  
Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

185.00

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

Full Name (Last, First, Middle Initial)

C. US Postmaster

Mailing Address 800 K Street, Northwest #18

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Fundraising Postage

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: S95  
Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

185.00

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

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

185.00

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 77 / 80

|                                        |                             |                              |                              |
|----------------------------------------|-----------------------------|------------------------------|------------------------------|
| <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)  
Friends of Farr

Full Name (Last, First, Middle Initial)

A. U.S. Bank

Mailing Address P.O. Box 6309

City State Zip Code  
Fargo ND 58125-6309

Purpose of Disbursement  
Food & Beverages for Meeting

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B1319

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

24.47

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

Full Name (Last, First, Middle Initial)

B. Tarp's Roadhouse

Mailing Address 2999 Monterey Salinas Highway

City State Zip Code  
Monterey CA 93940

Purpose of Disbursement  
Food & Beverages for Meeting

Candidate Name

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

State: District

001  
Category/  
Type

Transaction ID: B396

Date of Disbursement

06 / 25 / 2004

Amount of Each Disbursement this Period

24.47

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. World Cuisine Inc.

Mailing Address 301 4th Street, NE, #202

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Fundraising Catering

Candidate Name

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

State: District

003  
Category/  
Type

Transaction ID: B1277

Date of Disbursement

06 / 22 / 2004

Amount of Each Disbursement this Period

680.00

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

SUBTOTAL of Disbursements This Page (optional) ▶

704.47

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

54500.13

# **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 type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input checked="" type="checkbox"/> 19b<br>21 |
|------------------------------------|------------------------------------|-------------------------------------|-----------------------------------------------|

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Carmel High School Baseball

Mailing Address P.O. Box 222780

City Carmel State CA Zip Code 93922

Purpose of Disbursement  
Civic Donation

Candidate Name

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

State: District

012  
Category/  
Type

Transaction ID: B13D9

Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

300.00

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

Full Name (Last, First, Middle Initial)

B. Jim Costa for Congress

Mailing Address 2300 Tulare Street

City Fresno State CA Zip Code 93721

Purpose of Disbursement  
Contribution

Candidate Name

Jim Costa

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

State: CA District 20

011  
Category/  
Type

Transaction ID: B1310

Date of Disbursement

05 / 28 / 2004

Amount of Each Disbursement this Period

1000.00

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

Full Name (Last, First, Middle Initial)

C. Democratic Congressional Campaign Committee

Mailing Address 430 South Capitol Street

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Excess Campaign Funds to Natl. Comm.

Candidate Name

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

State: District

011  
Category/  
Type

Transaction ID: B1311

Date of Disbursement

05 / 12 / 2004

Amount of Each Disbursement this Period

5000.00

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

SUBTOTAL of Disbursements This Page (optional) ►

6300.00

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)

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

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NAME OF COMMITTEE (In Full)

Friends of Farr

Full Name (Last, First, Middle Initial)

A. Herseth for Congress

Mailing Address P.O. Box 884

City  
Brookings

State  
SD

Zip Code  
57006

Purpose of Disbursement  
Contribution

Candidate Name  
Stephanie Marie Herseth

Office Sought: ☒ House  
Senate  
President

State: SD District

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

011  
Category/  
Type

Transaction ID: B1312

Date of Disbursement

05 / 19 / 2004

Amount of Each Disbursement this Period

1000.00

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

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

7300.00

**SCHEDULE C (FEC Form 3 )**

**LOANS**

|                                                                               |                                         |                              |
|-------------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | PAGE 80 / 80                            |                              |
|                                                                               | FOR LINE NUMBER:<br>(check only one)    |                              |
|                                                                               | <input checked="" type="checkbox"/> 13a | <input type="checkbox"/> 13b |

|                                                                                                                                                                                                              |          |                                    |                                                                                                                                        |  |  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------|--|--|
| NAME OF COMMITTEE (In Full)<br>Friends of Farr                                                                                                                                                               |          |                                    | Transaction ID: C1                                                                                                                     |  |  |
| <b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial)<br>Democratic Women's Club                                                                                                                        |          |                                    | <b>Election:</b><br><input type="checkbox"/> Primary<br><input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |  |  |
| Mailing Address 104 Adobe Street                                                                                                                                                                             |          |                                    |                                                                                                                                        |  |  |
| City Santa Cruz                                                                                                                                                                                              | State CA | ZIP Code 95060                     |                                                                                                                                        |  |  |
| Original Amount of Loan<br>250.00                                                                                                                                                                            |          | Cumulative Payment To Date<br>0.00 | Balance Outstanding at Close of This Period<br>250.00                                                                                  |  |  |
| <b>TERMS</b><br>Date Incurred 08 <sup>th</sup> 25 <sup>th</sup> 1998 <sup>th</sup> 19990825 Date Due Interest Rate 0.00 % (apr) Secured: <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:                                                                                                         |  |  |
| <b>SUBTOTALS</b> This Period This Page (optional) .....                                                                                                                                                      |          |                                    | 250.00                                                                                                                                 |  |  |
| <b>TOTALS</b> This Period (last page in this line only) .....                                                                                                                                                |          |                                    | 250.00                                                                                                                                 |  |  |
| Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.                                                                         |          |                                    |                                                                                                                                        |  |  |