Recipient Committee Campaign Statement Cover Page

COVER PAGE

CALIFORNIA FORM **460**

For Official Use Only

Date Stamp

RECEIVED SEP 24 2020 CITY ADMINISTRATION

SEE INSTRUCTIONS ON REVERSE

Statement covers period
from 7/1/2020
through 9/19/2020

Date of election if applicable: (Month, Day, Year)
November 3, 2020

1. pe of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.

- [x] Officeholder, Candidate Controlled Committee
  - ○ State Candidate Election Committee
  - ○ Recall
  - *(Also Complete Part 5)*
- [ ] General Purpose Committee
  - ○ Sponsored
  - ○ Small Contributor Committee
  - ○ Political Party/Central Committee
- [ ] Primarily Formed Ballot Measure Committee
  - ○ Controlled
  - ○ Sponsored
  - *(Also Complete Part 6)*
- [ ] Primarily Formed Candidate/ Officeholder Committee
  - *(Also Complete Part 7)*

2. Type of Statement:

- [x] Preelection Statement
- [ ] Semi-annual Statement
- [ ] Termination Statement (Also file a Form 410 Termination)
- [ ] Amendment (Explain below)
- [ ] Quarterly Statement
- [ ] Special Odd-Year Report

1st Preelection statement

3. Committee Information

I.D. NUMBER: Not yet received

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE): Scott Bauer for Fourth Ward of Eureka City Council 2020

STREET ADDRESS (NO P.O. BOX): 1505 15th Street

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Eureka	CA	95501	707-672-6630

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX: P.O. Box 6263

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Eureka	CA	95502	707-672-6630

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER: Charlene Swenson

MAILING ADDRESS: P.O. Box 6263

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Eureka	CA	95501	707-[redacted] 268-0374

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 24 Sept 2020 (Date) By Charlene A Swenson (Signature of Treasurer or Assistant Treasurer)

Executed on 9/24/2020 (Date) By Scott Bauer (Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Executed on _____ (Date) By _____ (Signature of Controlling Officeholder, Candidate, State Measure Proponent)

Recipient Committee Campaign Statement Cover Page — Part 2

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Scott Bauer

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Eureka City Council, Fourth Ward

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY	STATE	ZIP
1505 15th Street	Eureka	CA	95501

Related Committees Not Included in this Statement: ***List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.***

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE	AREA CODE/PHONE

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? ☐ YES ☐ NO
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)	
CITY STATE ZIP CODE	AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Statement covers period from 7/1/2020 through 9/19/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER

Not yet received

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 5,079.00	$ 5,079.00
2. Loans Received	*Schedule B, Line 3*	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 5,079.00	$ 5,079.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	498.00	498.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 5,577.00	$ 5,577.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 1,668.00	$ 1,668.00
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 1,668.00	$ 1,668.00
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0	0
10. Nonmonetary Adjustment	*Schedule C, Line 3*	498.00	498.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 2,166.00	$ 2,166.00

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 0
13. Cash Receipts	*Column A, Line 3 above*	5,079.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0
15. Cash Payments	*Column A, Line 8 above*	1,668.00
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 3,411.00

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED ..... *Schedule B, Part 2* $ 0

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	*See instructions on reverse*	$
19. Outstanding Debts	*Add Line 2 + Line 9 in Column B above*	$ 0.00

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

Calendar Year Summary for Candidates Running in Both the State Primary and General Elections

	1/1 through 6/30	7/1 to Date
20. Contributions Received	$	$
21. Expenditures Made	$	$

Expenditure Limit Summary for State Candidates

22. **mulative Expenditures Made***
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
/ /	$
/ /	$

*Amounts in this section may be different from amounts reported in Column B.

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 7/1/2020
through 9/19/2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER
Not yet received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/27/2020	Eric and Michelle Gerdes 8111 Sitka Spgs, Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Eric Gerdes, Doctor, St Joseph's Hospital Michelle Gerdes, None	100.00	100.00	
8/27/2020	Jackie and Darryl Bosse 3471 Sunflower Drive Bullhead, AZ 86429	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	100.00	100.00	
9/4/2020	Elizabeth Murguia 3471 California Street Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	300.00	300.00	
8/27/2020	Alan and Charlene Swenson 1959 Wood Street Eureka, CA 95501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	100.00	100.00	
8/28/2020	Stephanie Capser P.O. Box 1364 La Quinta, CA 92247	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	300.00	300.00	
			SUBTOTAL $ 900.00			

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 4,350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 729.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 5,079.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period
from 7/1/2020
through 9/19/2020

CALIFORNIA FORM 460

NAME OF FILER
Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
8/31/2020	Geoff and Jennifer Hales 2564 Manzanita Drive Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Geoff Hales, Geologist, McBain Associates Jennifer Hales, Physicians Assistant, Orthopedic Spec.	200.00	200.00	
9/3/2020	Allan Katz 940 Lawrence Street Port Townsend, WA 98368	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	500.00	500.00	
9/14/2020	Mike Thompson for Congress 5429 Madison Avenue Sacramento, CA 95841 FEC #C00326363	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC	United States Congressman	500.00	500.00	
9/14/2020	Barry Douglas P.O. Box 6458 Eureka, CA 95502	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	200.00	200.00	
9/18/2020	Julie Neander 1812 Fisher Avenue McKinleyville, CA 95519	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy Director of Environmental Services, City of Arcata	250.00	250.00	
			SUBTOTAL $	1,650.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A

CALIFORNIA FORM 460

Statement covers period from 7/1/2020 through 9/19/2020

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER: Not yet received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/19/2020	California Association of Professional Scientists 455 Capitol Mall, Suite 500 Sacramento, CA 95814 I.D. #860894	☐ IND ☑ COM ☐ OTH ☐ PTY ☐ SCC		500.00	500.00	
9/2/2020	Krista Bauer 1059 Leff Street, Apt. B San Luis Obispo, CA 93401	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Human Resources Recruiter, SAP	150.00	150.00	
9/7/2020	Lacey Comer 4414 Lentell Road Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Registered Nurse, St. Joseph's Hospital	250.00	250.00	
9/2/2020	Terri Vroman-Little	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	First Five Playground Leader, Redwood Coast Montessori	100.00	100.00	
9/5/2020	Jake Larson 2035 Everding Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Self employed, Northern Building Company	250.00	250.00	
			SUBTOTAL $	1,250.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 4,350.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 729.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... TOTAL $ 5,079.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

Statement covers period
from 7/1/2020
through 9/19/2020

NAME OF FILER
Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER
Not yet received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
9/10/2020	Andrew Bundschuh 2291 Briarwood Circle Eureka, CA 95503	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Env. Permitting and Compliance Manager, County of Humboldt	100.00	100.00	
9/2/2020	Gerry Tollefson 314 I Street Eureka, CA 95501	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	None	100.00	100.00	
8/27/2020	The Key Real Estate Group 2121 J Street Eureka, CA 95501	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		250.00	250.00	
9/15/2020	Cheyenne Spetzler 3171 Greenwood Heights Drive Kneeland, CA 95549	☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Administrator, Open Door Community Health Centers	100.00	100.00	
		☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC				
				SUBTOTAL $ 550.00		

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule B – Part 1
Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from 7/1/2020 through 9/19/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER: Not yey received

FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD*	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Scott Bauer 1505 15th Street Eureka, CA 95501 †☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Senior Environmental Scientist, California Department of Fish and Wildlife	$ 0.00	$ 203.00	☑ PAID $ 203.00 ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ 203.00 8/12/2020 DATE INCURRED	CALENDAR YEAR $ 203.00 PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
†☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		$	$	☐ PAID $ ☐ FORGIVEN $	$ DATE DUE	% RATE $	$ DATE INCURRED	CALENDAR YEAR $ PER ELECTION** $
		SUBTOTALS	$ 203.00	$ 203.00	$	$		

(Enter (e) on Schedule E, Line 3)

Schedule B Summary

1. Loans received this period ..... $ 203.00
   (Total Column (b) plus unitemized loans of less than $100.)
2. Loans paid or forgiven this period ..... $ 203.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that are also itemized on Schedule A.)
3. Net change this period. (**Subtract** Line 2 from Line 1.) ..... NET $ 0.00
   Enter the net here and on the Summary Page, Column A, Line 2.

(May be a negative number)

†Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

Schedule C
Nonmonetary Contributions Received

Amounts may be rounded to whole dollars.

SCHEDULE C

CALIFORNIA FORM 460

Statement covers period from 7/1/2020 through 9/19/2020

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER

Not yet received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
9/10/20	Visual Concepts 820 N. Street Arcata, CA 95521	☐ IND ☐ COM ☑ OTH ☐ PTY ☐ SCC		Graphic design services	498.00	498.00	
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
		☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

Attach additional information on appropriately labeled continuation sheets. **SUBTOTAL $** 498.00

Schedule C Summary

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) ..... $ 498.00
2. Amount received this period – unitemized nonmonetary contributions of less than $100 ..... $ _____
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL $** 498.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule E
Payments Made

Amounts may be rounded to whole dollars.

Statement covers period
from 7/1/2020
through 9/19/2020

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Scott Bauer for Fourth Ward of Eureka City Council 2020

I.D. NUMBER
Not yet received

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CMP campaign paraphernalia/misc.
CNS campaign consultants
CTB contribution (explain nonmonetary)*
CVC civic donations
FIL candidate filing/ballot fees
FND fundraising events
IND independent expenditure supporting/opposing others (explain)*
LEG legal defense
LIT campaign literature and mailings
MBR member communications
MTG meetings and appearances
OFC office expenses
PET petition circulating
PHO phone banks
POL polling and survey research
POS postage, delivery and messenger services
PRO professional services (legal, accounting)
PRT print ads
RAD radio airtime and production costs
RFD returned contributions
SAL campaign workers' salaries
TEL t.v. or cable airtime and production costs
TRC candidate travel, lodging, and meals
TRS staff/spouse travel, lodging, and meals
TSF transfer between committees of the same candidate/sponsor
VOT voter registration
WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Visual Concepts 820 N Street, Ste. #2 Arcata, CA 95521	LIT		868.00
Times Printing 106 T Street Eureka, CA 95501	LIT		728.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL $ 1,596.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 1,596.00
2. Unitemized payments made this period of under $100 ..... $ 72.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... $
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL $** 1,668.00