

Officeholder, Candidate, and Controlled Committee Campaign Statement - Long Form  
(Government Code Sections 84200-84216.5)

COVER PAGE - LONG FORM

SEE INSTRUCTIONS ON REVERSE

Check one of the following boxes to indicate the type of statement being filed:

- Pre-election Statement
- Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)
- Special Odd-Year Campaign Report
- Semi-annual Statement
- Termination Statement (Attach a completed Form 415 to this statement.)

**Officeholder, Candidate, and Controlled Committee Included in this Statement**

NAME OF OFFICEHOLDER OR CANDIDATE

Rita "Chris" Jean Quackenbush

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

State Senate, District 6

RESIDENTIAL OR BUSINESS ADDRESS (NO. AND STREET)

1064 Ski Park Court

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Rio Linda, CA 95673 916-991-4131

COMMITTEE NAME I.D. NUMBER

Quackenbush for State Senate 1998 972168

COMMITTEE ADDRESS (NO. AND STREET)

1064 Ski Park Court

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Rio Linda, CA 95673 916-991-4131

NAME OF TREASURER

Betty Presley

PERMANENT ADDRESS OF TREASURER (NO. AND STREET)

1251 E. Dyer Road, #100

CITY STATE ZIP CODE AREA CODE/DAYTIME PHONE

Santa Ana, CA 92705 714-540-9561

**III Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 5/21/98 AT Santa Ana, CA DATE CITY AND STATE

An officeholder or candidate who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed 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 5/21/98 AT Rio Linda, CA DATE CITY AND STATE

Executed on \_\_\_\_\_ AT \_\_\_\_\_ DATE CITY AND STATE

Executed on \_\_\_\_\_ AT \_\_\_\_\_ DATE CITY AND STATE

Statement covers period from <u>3/18/98</u> through <u>5/16/98</u>	Date Stamp <u>95 MAY 22</u> CALIFORNIA SECRET OF STATE
Date of election if applicable: (Month, Day, Year) <u>6/02/98</u>	Page <u>1</u> of <u>43</u> ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED EXCEPT WHERE SHOWN OTHERWISE GIL JAMES SECRETARY OF STATE

**II Other Committees Not Included in this Statement:** List any other committees not included in this consolidated statement that are controlled by you and any committees of which you have knowledge that are primarily formed to receive contributions or to make expenditures on behalf of your candidacy.

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE
COMMITTEE ADDRESS	<input type="checkbox"/> YES <input type="checkbox"/> NO

CITY	STATE	ZIP CODE	AREA CODE/DAYTIME PHONE
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COMMITTEE NAME	I.D. NUMBER
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NAME OF TREASURER	CONTROLLED COMMITTEE
COMMITTEE ADDRESS	<input type="checkbox"/> YES <input type="checkbox"/> NO

CITY	STATE	ZIP CODE	AREA CODE/DAYTIME PHONE
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Attach additional information on appropriately labeled continuation sheets.

By Betty Presley SIGNATURE OF TREASURER

By \_\_\_\_\_ SIGNATURE OF CANDIDATE/OFFICEHOLDER

By \_\_\_\_\_ SIGNATURE OF CANDIDATE/OFFICEHOLDER

# Campaign Disclosure Statement Summary Page

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period  
from 3/18/98  
through 5/16/98

CALIFORNIA  
REGISTRATION  
NUMBER  
**490**

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I.D. NUMBER

972168

## INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Quackenbush for State Senate 1998

## Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
Monetary Contributions ..... Schedule A, Line 3	\$ 82,123.00	\$ 18,726.00	\$ 100,849.00
Loans Received ..... Schedule B, Line 7	150,000.00	100,000.00	250,000.00
<b>SUBTOTAL CASH CONTRIBUTIONS</b> ..... Add Lines 1 + 2	<b>\$ 232,123.00</b>	<b>\$ 118,726.00</b>	<b>\$ 350,849.00</b>
Non-monetary Contributions ..... Schedule C, Line 3	6,091.71	2,669.00	8,760.71
<b>SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)</b> ..... Add Lines 3 + 4	<b>\$ 238,214.71</b>	<b>\$ 121,395.00</b>	<b>\$ 359,609.71</b>
Enforceable Promises (Exclude Loan Guarantees, Line 18 below) ..... Schedule D, Line 7			
<b>TOTAL CONTRIBUTIONS RECEIVED</b> ..... Add Lines 5 + 6	<b>\$ 238,214.71</b>	<b>\$ 121,395.00</b>	<b>\$ 359,609.71</b>

## Expenditures Made

Cash Payments (Other than Loans Made) ..... Schedule E, Line 5	\$ 295,466.69	\$ 21,910.75	\$ 317,377.44
Loans Made ..... Schedule H, Line 7			
<b>SUBTOTAL CASH PAYMENTS</b> ..... Add Lines 8 + 9	<b>\$ 295,466.69</b>	<b>\$ 21,910.75</b>	<b>\$ 317,377.44</b>
Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 5	18,496.98	5,103.02	23,600.00
<b>TOTAL EXPENDITURES MADE</b> ..... Add Lines 10 + 11	<b>\$ 313,963.67</b>	<b>\$ 27,013.77</b>	<b>\$ 340,977.44</b>

## Current Cash Statement

3. Beginning Cash Balance ..... Previous Summary Page, Line 17	\$ 100,665.25		
4. Cash Receipts ..... Column A, Line 3 above	232,123.00		
5. Miscellaneous Increases to Cash ..... Schedule I, Line 4	1,224.09		
6. Cash Payments ..... Column A, Line 10 above	295,466.69		
<b>7. ENDING CASH BALANCE</b> ..... Add Lines 13 + 14 + 15, then subtract Line 16	<b>\$ 38,545.65</b>		

If this is a termination statement, Line 17 must be zero.

ENDING CASH BALANCE SHOULD  
NOT BE A NEGATIVE AMOUNT

8. LOAN GUARANTEES RECEIVED ..... Schedule B, Part I, Column (b) \$ -0-

Cash Equivalents and Outstanding Debts

9. Cash Equivalents ..... See instructions on reverse \$ -0-

## Summary for Candidates in Both June and November Elections

1/1 through 6/30 7/1 to Date

21. Contributions Received ..... \$

22. Expenditures Made ..... \$

\* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

# Schedule A Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE A

Statement covers period  
from 3/18/98  
through 5/16/98

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I.D. NUMBER 972168

**INSTRUCTIONS ON REVERSE**

**NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE**

Quackenbush for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<b>SUBTOTAL \$</b>					

**Monetary Contributions Summary**

Amount received this period — contributions of \$100 or more.  
(Include all Schedule A subtotals.) ..... \$ 79,421.00

Amount received this period — contributions of less than \$100.  
(Do not itemize.) ..... \$ 2,702.00

Total monetary contributions received this period. .... \$ 82,123.00

**chedule A (Continuation Sheet)  
etary Contributions Received**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

CALIFORNIA  
1993 FORM **490**

IF COMMITTEE:	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
embush for State Senate 1998	Mr. Michael T. Applegate PO Box 2728 Sacramento, CA 95812	Owner Applegate Trucking	250.00	250.00	
	Artonhead Management Company 6055 Lusk Blvd. San Diego, CA 92121		250.00	250.00	
	Atlantic Richfield Co 1201 K Street, #1990 Sacramento, CA 95614		500.00	1000.00	
	Atlantic Richfield Co 1201 K Street, #1990 Sacramento, CA 95614		500.00	1000.00	
	Mr. William T. Bagley 50 California St 34th San Francisco, CA 94111	Attorney Nossaman, Gunther, Knox & Elliott, LLP	200.00	200.00	
	Beach & O'Neill 10351 Fair Oaks Blvd. Fair Oaks, CA 95628		250.00	250.00	

**SUBTOTAL \$ 1950.00**

# Schedule A (Continuation Sheet) Netary Contributions Received

SCHEDULE A (cont.)  
CALIFORNIA  
1993 FORM 490

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

OF COMMITTEE:  
Skenbush for State Senate 1998

TE IVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Russell A. Beliveau 2041 Spanish Bar Court Gold River, CA 95670	<i>Information Requested</i>	100.00	100.00	
	Benificial Management Corporation 300 Benificial Center Peapack, NJ 07977		500.00	500.00	
	Blake Isaacson & Associates 296 Hartnell Place Sacramento, CA 95825		100.00	350.00	
	Blake Isaacson & Associates 296 Hartnell Place Sacramento, CA 95825		250.00	350.00	
	Mr. Gerhard Blauth PO Box 1042 North Highlands, CA 95660	Owner First American Pest Control	100.00	200.00	
	Mr. Gerhard Blauth PO Box 1042 North Highlands, CA 95660	Owner First American Pest Control	100.00	200.00	

**SUBTOTAL \$ 1150.00**

# Schedule A (Continuation Sheet) Netary Contributions Received

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

## SCHEDULE A (cont.)

Statement covers period from 03/18/98 through 05/16/98	CALIFORNIA 1993 FORM <b>490</b>
Page <b>7</b> of <b>43</b>	I.D. NUMBER 972168

OF COMMITTEE:

Kenbush for State Senate 1998

TE IVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Ms. Elizabeth C. Brandt 6330 Agua Vista Rancho Murieta, CA 95683	Attorney State of California	100.00	100.00	
	Ms. Trena Hardin Burger 44397 S El Macero Dr El Macero, CA 95618	<i>Attorney Self employed</i>	125.00	125.00	
	Ms. Monica Butler 1932 3rd Avenue Sacramento, CA 95818	Legislative Aide State of California	250.00	250.00	
	Mr. Carroll G. Canfield 190 Point West Way 171 Sacramento, CA 95815	Marketing Manager Equitable Life of Iowa	250.00	750.00	
	Capitol Tarpaulin Co 3900 Stockton Blvd Sacramento, CA 95820		125.00	125.00	
	Mr. Peter S. Carter 45 Broadway Los Gatos, CA 95030	<i>President Carter Israel Public Relations</i>	500.00	500.00	

SUBTOTAL \$ 1350.00

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

COMMITTEE:  
Crenshaw for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Andrew J. Chang 1506 13th St, #212 Sacramento, CA 95814	Administrator State of California	250.00	250.00	
	Ms. Geneva Christophel 8281 Mediterranean Way Sacramento, CA 95826	Retired None	100.00	100.00	
	Mr. John J. Connolly 353 Sacramento St, #1800 San Francisco, CA 94111	Broker Health Insurance Brokers	100.00	100.00	
	Mr. Ward Connerly 1710 Short Hills Rd Sacramento, CA 95825	Owner Connerly & Assoc	250.00	250.00	
	Dr. Adam E. Cortese 6716 Rio Linda Bl, #D Rio Linda, CA 95673	Dentist Adam E. Cortese, DDS	200.00	200.00	
	Mr. Stephen B. Crocker 4076 Cresta Way Sacramento, CA 95864	CPA Stephen B. Crocker, CPA	150.00	150.00	

**SUBTOTAL \$ 1050.00**

**Schedule A (Continuation Sheet)  
Netary Contributions Received**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

OF COMMITTEE:

kenbush for State Senate 1998

RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Richard De la Mora 515 S. Flower St Los Angeles, CA 90071	Attorney Barger & Wolen	100.00	100.00	
	DjManno-Hansen 11190 Sun Center Drive #104 Rancho Cordova, CA 95670		250.00	250.00	
	Mr. Randall Doctor 2819 Pierce St San Francisco, CA 94123	Attorney Barger & Wolen	100.00	100.00	
	Dowdell Financial sErVICES 1900 Point West Way #101 Sacramento, CA 95815		150.00	150.00	
	Ms. Kelly A. Dunn 21382 Avenida Ambiente Lake Forest, CA 92630	Administrator Five Star Insurance Company	500.00	500.00	
	Mr. Theodore W. Dutton PO Box 2960 Blue Jay, CA 92317	Attorney Barger & Wolen	100.00	100.00	

**SUBTOTAL \$ 1200.00**



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA  
1993 FORM **490**

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I.D. NUMBER  
972168

NAME OF COMMITTEE:  
Dickens for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	E.W. Blanch Company 201 California Street, Suite 500 San Francisco, CA 94111		3000.00	3000.00	
	Ms. Pamela D. Eggert 4851 Fintandia Way Carmichael, CA 95608	Homemaker	250.00	250.00	
	Mr. Robert Fackrell 6721 Crystal Blvd. El Dorado, CA 95623	Contractor RBNs Construction	100.00	100.00	
	Farmers Insurance Group of Companies 4680 Wilshire Blvd Los Angeles, CA 90010		5000.00	5000.00	
	Financial Title Company 701 Miller St San Jose, CA 95110		250.00	250.00	
	Financial Pacific Insurance Co PO Box 292220 Sacramento, CA 95829		500.00	500.00	

**SUBTOTAL \$ 9100.00**

**Schedule A (Continuation Sheet)  
Netary Contributions Received**

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA  
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I.D. NUMBER  
972168

: OF COMMITTEE: ckenbush for State Senate 1998						
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	
	Gary G. Perry Attorney at Law 2251 Fair Oaks Blvd, #200 Sacramento, CA 95825		250.00	250.00		
	Mr. Kenneth L. Gibson 5535 Calrendon Way Carmichael, CA 95608	<i>Consultant Peterson Consulting</i>	100.00	100.00		
	Ms. Roxani M. Gillespie 2450 Hyde Street San Francisco, CA 94109	Attorney Barger & Wolen	100.00	100.00		
	GlaxoWellcome 980 Ninth Street, #2200 Sacramento, CA 95814		500.00	500.00		
	Golden Bear Insurance Company 709 North Center Street, Suite 1-K Stockton, CA 95202		100.00	100.00		
	Mr. George Gorton 1801 I Street, #200 Sacramento, CA 95814	<i>Self employed Consultant</i>	150.00	150.00		

**SUBTOTAL \$ 1200.00**

Statement covers period  
from 03/18/98  
through 05/16/98

I.D. NUMBER  
972168

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

NAME OF COMMITTEE:

ckenbush for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Jerome H. Hart PO Box 255039 Sacramento, CA 95865	<i>Retired</i>	125.00	125.00	
	Hewlett Packard 3000 Hanover St Palo Alto, CA 94304		500.00	500.00	
	Mr. Robert W. Hogeboom 1325 Woodstock Rd 818 San Marino, CA 91108	Attorney Barger & Wolen	100.00	100.00	
	Mr. John C. Holmes 690 Magnolia Ave Pasadena, CA 91106	Attorney Barger & Wolen	100.00	100.00	
	Household Financial Group Ltd. 104 Lost Lake Court Folsom, CA 95630		500.00	500.00	
	Ms. Jean M. Huston 2613 Harkness St Sacramento, CA 95818	Consultant State of CA	100.00	100.00	

**SUBTOTAL \$ 1425.00**

# Schedule A (Continuation Sheet) Netary Contributions Received

SCHEDULE A (cont.)

CALIFORNIA  
1993 FORM **490**

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I.D. NUMBER  
972168

Statement covers period  
from **03/18/98**  
through **05/16/98**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

OF COMMITTEE:  
Kenbush for State Senate 1998

TE IVED	FULL NAME AND ADDRESS OF CONTRIBUTOR IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	InterWest Insurance Services 401 Watt Avenue P.O. Box 255188 Sacramento, CA 95865		150.00	150.00	
	John F. Quintel State Farm Insurance 10901 Folsom Blvd, #A Rancho Cordova, CA 95670		100.00	100.00	
	Mr. Thomas J. Jordan 1934 Viewpointe Cir Santa Rosa, CA 95403	<i>Owner West Winds Corporation</i>	1000.00	1000.00	
	Mr. Kent Keller 4010 Cromwell Ave Los Angeles, CA 90027	Attorney Barger & Wolen	100.00	100.00	
	Mr. A. Peter Kezirian 300 South Allen Ave Pasadena, CA 91106	<i>Attorney State of CA</i>	150.00	150.00	
	Mr. Stephen C. Klein 5301 Quail Canyon Rd La Crescenta, CA 91214	Attorney Barger & Wolen	100.00	100.00	

**SUBTOTAL \$ 1600.00**

# Schedule A (Continuation Sheet) Netary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from 03/18/98 through 05/16/98	CALIFORNIA 1993 FORM <b>490</b>
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NAME OF CONTRIBUTOR	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
Mr. Edward L. Lammerding	Mr. Edward L. Lammerding 2308 W. La Loma Drive Rancho Cordova, CA 95670	Consultant Edward L. Lammerding	500.00	500.00	
Ms. Julie Larsson	Ms. Julie Larsson 6055 Lusk Blvd. San Diego, CA 92121	<i>Information Requested</i>	250.00	250.00	
Ms. Sevim Larsen	Ms. Sevim Larsen 4104 Crondall Drive Sacramento, CA 95864	Real Estate Sales Lyon & Associates	100.00	100.00	
Mr. Robert G. Levy	Mr. Robert G. Levy 34 Upper Terrace San Francisco, CA 94117	Attorney Barger & Wolen	100.00	100.00	
Mr. Thomas L. Livingston	Mr. Thomas L. Livingston 2140 Professional Drive #200 Roseville, CA 95661	CPA Thomas L. Livingston, CPA	250.00	250.00	

**SUBTOTAL \$ 1350.00**

**edule A (Continuation Sheet)  
etary Contributions Received**

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

CALIFORNIA  
1993 FORM **490**

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Statement covers period  
from 03/18/98  
through 05/16/98

I.D. NUMBER  
972168

OF COMMITTEE:  
enbush for State Senate 1998

E /ED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Livingston & Mattesich 1201 K Street, #1100 Sacramento, CA 95814		500.00	500.00	
	Mr. Steve C. Luth 1116 48th St Sacramento, CA 95819	Broker Albano Dale Dunn & Lewis	150.00	400.00	
	Mr. Peter A. McCuen 7495 Shelborne Drive Granite Bay, CA 95746	Developer Peter A. McCuen	500.00	500.00	
	McGraw Commercial Insurance Services 3601 Haven Avenue Menlo Park, CA 94025		2500.00	3000.00	
	Mr. John V. McGraw 11 Vasilakos Ct Menlo Park, CA 94025	<i>Retired</i>	4250.00	4250.00	
	Mr. John M. McGraw 24 Almendral Ave Atherton, CA 94027	<i>McGraw Insur. Services Partner</i>	500.00	500.00	

**SUBTOTAL \$ 8400.00**

**hedule A (Continuation Sheet)  
netary Contributions Received**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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**CALIFORNIA  
1993 FORM 490**

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Ms. Peggy McKennon 2543 Martingail Dr Covina, CA 91724	Attorney Barger & Wolen	100.00	100.00	
	Mr. David J. McMahon 8 Forrest Street Mill Valley, CA 94941	Attorney Barger & Wolen	100.00	100.00	
	Mr. Robert W. Naylor 2700 Latham Drive Sacramento, CA 95864	Lobbyist Nielsen Merksamer et al	250.00	250.00	
	Mr. John A. Norwood 1028 Wilhaggin Park Lane Sacramento, CA 95864	Attorney Norwood & Pedrotti	100.00	1100.00	
	Mr. Jerry W. O'Kane 116 Corwin Street San Francisco, CA 94114	Owner IBA West	500.00	500.00	
	Mr. Thomas W. O'Neil 1130 44th St Sacramento, CA 95819	CPA Schultze, Wallace & O'Neil	250.00	250.00	

**SUBTOTAL \$ 1300.00**

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Schedule A (Continuation Sheet)  
Monetary Contributions Received

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA 490  
1993 FORM

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I.D. NUMBER  
972168

NAME OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
Mr. Royal F. Oakes 4708 Gould Ave La Canada, CA 91011	Attorney Barger & Wolen	100.00	100.00	
Pacific Coast Building Products PO Box 160488 Sacramento, CA 95816		1000.00	1000.00	
Pacific Lumber Co Scotia, CA 95565		500.00	500.00	
Patrick Finn Interior Design 865 Lake Tahoe Blvd South Lake Tahoe, CA 96150		150.00	150.00	
Mr. Gale S. Pearson 5638 Marchese Ct Fair Oaks, CA 95628	Chief Operating Officer State of CA	250.00	250.00	
Mr. John S. Pierce 1211 Trestle Glen Rd Oakland, CA 94610	Attorney Barger & Wolen	100.00	100.00	

SUBTOTAL \$ 2100.00



SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Schedule A (Continuation Sheet)  
Netary Contributions Received

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER 972168

TE IVED	OF COMMITTEE: kenbush for State Senate 1998	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
		Dr. James A. Pollock 1800 I Street Sacramento, CA 95814	Physician James A. Polloc, MD	150.00	150.00	
		Mr. John J. Richmond 3022 Brookdale Rd Studio City, CA 91604	Attorney Barger & Wolen	100.00	100.00	
		Mr. Eugene Nelson Riemenschneider PO Box 363 Pinole, CA 94564	Executive Crocker Claims Service	150.00	150.00	
		Ms. Jan Rosati 234 Breckenwood Way Sacramento, CA 95864	CPA Deloitte & Touche	250.00	250.00	
		Mr. Martin E. Rosen 16964 Encino Hills Dr Encino, CA 91436	Attorney Barger & Wolen	100.00	100.00	
		Mr. Michael L. Rosenfield 253 St. Croix Ct Agoura, CA 91301	Attorney Barger & Wolen	100.00	100.00	

**SUBTOTAL \$ 850.00**

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

CALIFORNIA  
1993 FORM **490**

Statement covers period

from 03/18/98

through 05/16/98

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I.D. NUMBER

972168

NAME OF COMMITTEE:

Democratic Party for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Safeco Corporation Safeco Plaza Seattle, WA 98185		1000.00	1000.00	
	Mr. Russ Selsor 6778 Velvet Meadow Ct San Jose, CA 95120	Controller Kent H. Landsberg	100.00	100.00	
	Sheppard & Neilson Insurance 7921 Kingswood Drive, Suite A6 Citrus Heights, CA 95611		150.00	150.00	
	Mr. John T. Smith 613 E. Bidell Street Folsom, CA 95630	Broker State Farm Insurance	600.00	600.00	
	Mr. Robert J. Smith 7220 Greenhaven Dr, #1 Sacramento, CA 95831	Broker State Farm Insurance	75.00	175.00	
	Mr. Robert J. Smith 7220 Greenhaven Dr, #1 Sacramento, CA 95831	Broker State Farm Insurance	100.00	175.00	

**SUBTOTAL \$ 2025.00**

# Schedule A (Continuation Sheet) Beneficiary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>03/18/98</u>	CALIFORNIA 1993 FORM <b>490</b>
through <u>05/16/98</u>	Page <u>20</u> of <u>43</u>
I.D. NUMBER 972168	

NAME OF CONTRIBUTOR		NAME OF COMMITTEE		NAME OF CONTRIBUTOR		NAME OF COMMITTEE		NAME OF CONTRIBUTOR		NAME OF COMMITTEE	
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Stuart Soldate 1651 Knollwood Dr Pasadena, CA 91103	Attorney Barger & Wolen	100.00	100.00							
	Ms. Patricia D. Sorenson 1414 4th Street Sacramento, CA 95814	Chief of Housing State of California	250.00	250.00							
	Southern Wine & Spirits 33321 Dome Ave Union City, CA 94587		2000.00	2000.00							
	Stanford Ranch, LLC PO Box 1200 Rocklin, CA 95677		100.00	100.00							
	Mr. J. Russell Stedman 2821 Sylhowe Rd Oakland, CA 94602	Attorney Barger & Wolen	100.00	100.00							
	Mr. J. Todd Stone 1565 Barnett Circle Carmichael, CA 95608	Property Mgr. Ray Stone Co.	150.00	150.00							

**SUBTOTAL \$ 2700.00**

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from 03/18/98 through 05/16/98	CALIFORNIA 1993 FORM <b>490</b>
Page 21 of 43	I.D. NUMBER 972168

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Mr. Charles Sugarman 5 Owlswood Rd Tiburon, CA 94920	Investor Charles Sugarman	100.00	100.00	
	Mr. Joseph H. Sullivan 4825 Agree Court Sacramento, CA 95842	Retired None	100.00	100.00	
	Ms. Cynthia K. Suzuki	<i>Information Requested</i>	100.00	100.00	
	The Herzog Company 12300 Herzog Road Courtland, CA 95615		1000.00	1000.00	
	The Barger Family Trust 945 San Marino Ave San Marino, CA 91108		100.00	100.00	
	TransCal Associates 3800 Watt Ave, #110 Sacramento, CA 95821		96.00	3846.00	

**SUBTOTAL \$ 1496.00**

# Schedule A (Continuation Sheet) Monetary Contributions Received

SCHEDULE A (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

NAME OF COMMITTEE:

ackebush for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	TransCal Associates 3800 Watt Ave, #110 Sacramento, CA 95821		1250.00	3846.00	
	Umax Technologies Inc. 3561 Gateway Boulevard Fremont, CA 94538		500.00	500.00	
	Ms. Christine Van Steyn 11823 Carroll Rd Elk Grove, CA 95758	Owner Van Steyn Dairy	100.00	100.00	
	Vino Farms, Inc. 1377 E Lodi Ave Lodi, CA 95240		500.00	500.00	
	Mr. Steven H. Weinstein 19247 Pebble Beach Pl Northridge, CA 91326	Attorney Barger & Wolen	100.00	100.00	
	Winter Volvo Lincoln-Mercury Inc. 3805 Florin Road Sacramento, CA 95823		300.00	300.00	

**SUBTOTAL \$ 2750.00**

# A (Continuation Sheet) Contributions Received

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

## SCHEDULE A (cont.)

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA  
1993 FORM 490

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I.D. NUMBER  
972168

TEE:  
or State Senate 1998

FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
Mr. William J. Wirt 3101 Calle Verde Ct Sacramento, CA 95821	Realtor Lyon Realty	250.00	250.00	
Ms. Julie M. Wright 9294 S. Beach Dr Sacramento, CA 95831	President San Diego Regional EDC	100.00	100.00	
Young's Market company 2164 N Batavia St Orange, CA 92665		2000.00	2000.00	
Assoc of CA Insurance Companies PAC 1121 L Street, #510 Sacramento, CA 95814	ID# 830078	500.00	10500.00	
Assoc of CA Insurance Companies PAC 1121 L Street, #510 Sacramento, CA 95814	ID# 830078	10000.00	10500.00	
Association of CA Life & Health PAC 1201 K Street, #1820 Sacramento, CA 95814	ID# 761012	500.00	500.00	

**SUBTOTAL \$ 13350.00**

**chedule A (Continuation Sheet)  
netary Contributions Received**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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**CALIFORNIA  
1993 FORM 490**

I.D. NUMBER  
972168

IE OF COMMITTEE:  
ackebush for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	Associated Builders & Contractors PAC 1127 11th Street, #300 Sacramento, CA 95814		500.00	500.00	
	CA Allied for Patient Protection PAC 1201 K Street, #805 Sacramento, CA 95814	ID# 920780	500.00	8500.00	
	CA Allied for Patient Protection PAC 1201 K Street, #805 Sacramento, CA 95814	ID# 920780	500.00	8500.00	
	CA Allied for Patient Protection PAC 1201 K Street, #805 Sacramento, CA 95814	ID# 920780	7500.00	8500.00	
	CA Dental PAC 1201 K Street, #16 Sacramento, CA 95814	ID# 742855	1000.00	1000.00	
	CA Financial Services Assoc PAC 980 9th St, #2160 Sacramento, CA 95814	ID# 881022	500.00	500.00	

**SUBTOTAL \$ 10500.00**

**Schedule A (Continuation Sheet)  
 Netary Contributions Received**

Type or Print in Ink  
 Amounts may be rounded  
 to whole dollars.

**SCHEDULE A (cont.)**

**CALIFORNIA  
 1993 FORM 490**

Statement covers period  
 from 03/18/98  
 through 05/16/98

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I.D. NUMBER  
 972168

COMMITTEE:

kenbush for State Senate 1998

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	California Insurance Wholesalers Assoc 2131 Honolulu Avenue, Suite E Montrose, CA 91020		1000.00	1000.00	
	Californians Allied Patient Protec PAC 1201 K Street #805 Sacramento, CA 95814		1500.00	1500.00	
	CAMLT LAB-PAC 1895 Mowry Avenue, Suite 112 Fremont, CA 94538		100.00	100.00	
	Friends of Senator Ross Johnson 17192 Murphy Ave Irvine, CA 92713	ID# 950521	5000.00	5000.00	
	Personal Insurance Federation CA PAC 980 Ninth Street, Suite 2030 Sacramento, CA 95814		500.00	500.00	
	San Bernardino County Lincoln Club P.O. Box 846 Rancho Cucamonga, CA 91701		500.00	500.00	

**SUBTOTAL \$ 8600.00**



**Schedule B - Part I  
Loans Received**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE B - Pa

Statement covers period  
from 3/18/98  
through 5/16/98

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I.D. NUMBER  
972168

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Quackenbush for State Senate 1998

DATE RECEIVED	LENDER OR GUARANTOR'S FULL NAME AND ADDRESS (IF COMMITTEE, ENTER FULL NAME, ADDRESS AND I.D. NUMBER. IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER THE TREASURER'S NAME AND ADDRESS)	LENDER / GUARANTOR'S OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER BUSINESS NAME)	LENDER INFORMATION		GUARANTOR INFORMATION	
			DUE DATE / INTEREST RATE	AMOUNT OF LOAN	AMOUNT GUARANTEED	CUMULATIVE TO DATE
4/16/98	Ski Park Boat & Ski 5845 Dry Creek Road Rio Linda, CA 95673		DUE DATE INTEREST RATE 11.5 %	25,000 30,000		130,000 OTHER
4/28/98	<input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE INTEREST RATE 10.0 %	20,000 50,000		120,000 OTHER
5/11/98	Chris Quackenbush (Personal) 1064 Ski Park Court Rio Linda, CA 95673		DUE DATE INTEREST RATE	25,000		
5/12/98	<input checked="" type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE INTEREST RATE			
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE INTEREST RATE			
			<b>SUBTOTAL \$ 150,000</b>			

\*See important instructions on reverse.

**Loans Received - Part I Summary**

- Loans of \$100 or more received this period. (Include all Loans Received --Part I (a) subtotals.) ..... \$ 150,000.00
- Loans under \$100 received this period. (Do not itemize.) ..... \$ -0-
- Total loans received this period. (Add Lines 1 and 2.) ..... **TOTAL \$ 150,000.00**

**Loans Received - Part II Summary**

- Loans of \$100 or more repaid, forgiven, or paid by a third party this period. (Include all Part II (c) subtotals. If forgiven or paid by a third party, also itemize the transaction on Schedule A.) ..... \$ -0-
- Loans under \$100 repaid, forgiven, or paid by a third party. (Do no itemize.) If forgiven or paid by a third party, include this amount on Schedule A Summary, Line 2. .... \$ -0-
- Total loans repaid, forgiven, or paid by a third party this period. .... \$ -0-



# Schedule C Non-Monetary Contributions Received

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE C

INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
 Quackenbush for State Senate 1998

Statement covers period  
 from 3/18/98  
 through 5/16/98

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I.D. NUMBER 97

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
3/18/98 5/16/98	Ski Park Boat & Ski 5845 Dry Creek Road Rio Linda, CA 95673		Copier	600.00	2,500.00	
5/07/98	Trans Cal Associates 3800 Watt Ave. Sacramento, CA 95821		Catering, Printing	1,611.46	1,611.46	
3/18/98 5/16/98	Friends of Senator Ross Johnson PO Box 26632 Irvine, CA 92623	ID# 950521	Mailer	275.00	709.00	
4/13/98	Anderson Lumber 4290 Roseville Road North Highlands, CA 95660		Lumber	516.96	516.96	
3/18/98 5/16/98	Chris Quackenbush 1064 Ski Park Court Rio Linda, CA 95673		Office Furn. Copier, Banner, Postage, Comp.	1,611.82	1,911.82	

**attach additional information on appropriately labeled continuation sheets.** SUBTOTAL \$ 4,615.24

## Non-Monetary Contributions Summary

Amount received this period — non-monetary contributions of \$100 or more.  
 (Include all Schedule C subtotals.) ..... \$ 6,022.71

Amount received this period — non-monetary contributions of less than \$100.  
 (Do not itemize.) ..... \$ 70.00

Total non-monetary contributions received this period.  
 (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 4.) ..... TOTAL \$ 6,092.71



**Schedule E  
Payments and Contributions  
Other Than Loans) Made**

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 3/18/98  
through 5/16/98  
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E INSTRUCTIONS ON REVERSE  
NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
Quackenbush for State Senate 1998  
I.D. NUMBER  
972168

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- "C" - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES
- "I" - INDEPENDENT EXPENDITURES
- "L" - LITERATURE
- "B" - BROADCAST ADVERTISING
- "N" - NEWSPAPER AND PERIODICAL ADVERTISING
- "O" - OUTSIDE ADVERTISING
- "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- "F" - FUNDRAISING EVENTS
- "G" - GENERAL OPERATIONS AND OVERHEAD
- "T" - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED)
- "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULE E. REPORT ONLY THE LUMP SUM OF SUCH PAYMENTS ON LINE 4 OF THE SUMMARY SECTION BELOW.		AMOUNT PAID
	CODE	OR DESCRIPTION OF PAYMENT	

IMPORTANT: Contributions and expenditures made out of campaign funds to or on behalf of other officeholders, candidates, committees, or ballot measures must also be entered on the Allocation Page, Part I.	SUBTOTAL \$
Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 288,518.11
Payments made this period of under \$100. (Do not itemize.)	\$ 1,341.63
Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).)	503.93
Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.)	5,103.02

**Payments and Contributions Made Summary**

**Schedule E  
(Continuation Sheet)  
Payments and Contributions  
(Other Than Loans) Made**

SCHEDULE E (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

CALIFORNIA  
1993 FORM **490**

Statement covers period  
from 03/18/98  
through 05/16/98

Page **32** of **43**  
I.D. NUMBER  
972168

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

Quackenbush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
(IF COMMITTEE IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

DATE	NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
03/19/98 00114	US Postmaster Sacramento, CA	L			960.00
03/20/98 00117	McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814			PRIOR PERIOD PAYABLE 5103.02	0.00
03/20/98 00117	McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	L			142.77
03/23/98 00118	McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	L			14237.44
03/26/98 00120	Betty Presley - R 1251 E. Dyer Road, #100 Santa Ana CA 92705	G			51.00
03/26/98 00121	Junay Gardner Logan - R 9386 Salina Way Sacramento CA 95827	G			1387.56

**SUBTOTAL \$ 16778.77**

**Schedule E  
Continuation Sheet  
Payments and Contributions  
Other Than Loans) Made**

**SCHEDULE E (cont.)**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

**CALIFORNIA  
1993 FORM 490**

NAME AND ADDRESS OF OFFICERHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

John Gaucher  
7668 Eastgate Ave  
Citrus Heights CA 95610

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
G			68.00
F			1113.36
F			160.00
F			160.00
G			273.65
		273.65	

Office Depot  
5400 Date Ave., #1  
Sacramento CA 95841

**SUBTOTAL \$ 1775.01**

**Schedule E  
Contribution Statement  
(More Than Loans Made)**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from 03/18/98 through 05/16/98	CALIFORNIA 1993 FORM <b>490</b>
Page 34 of 43	I.D. NUMBER 972168

NAME AND ADDRESS OF OFFICER, CANDIDATE AND CONTROLLED COMMITTEE:  
Ken Bush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
G		Christine Pechal 7044 Lazy River Way Sacramento CA 95814	1193.56
P		Junay Gardner Logan 9386 Salina Way Sacramento CA 95827	2250.00
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	475.37
G		John Gaucher 7668 Eastgate Ave Citrus Heights CA 95610	111.70
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	4013.70
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	18667.53

**SUBTOTAL \$ 26691.86**



# Continuation Sheet Contributions and Payments (Other Than Loans) Made

SCHEDULE E (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA  
1993 FORM **490**

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I.D. NUMBER  
972168

NAME AND ADDRESS OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

ickenbush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
F		290.00	290.00
P		5000.00	5000.00
L		4000.00	4000.00
G		40.00	40.00
P		6529.58	6529.58

**SUBTOTAL \$ 15859.58**

SCHEDULE E (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Continuation Sheet  
Contributions  
(More Than Loans) Made

Statement covers period  
from 03/18/98  
through 05/16/98

Page 36 of 43  
I.D. NUMBER 972168

NAME AND ADDRESS OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:  
Rickens for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR, IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
'98 Pacific Bell 666 Folsom San Francisco CA 94123	G			272.55
'98 Robert Higgins 6055 Country Rd 22 Orland CA 95963	P			1295.45
'98 Wordmasters 120 Main Ave., Suite 1A Sacramento Ca 95838	L			13545.83
'98 Junay Gardner Logan 9386 Salina Way Sacramento CA 95827	P			2250.00
'98 Christine Pechal 7044 Lazy River Way Sacramento CA 95831	P			1000.00
'98 McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	L			17196.40

**SUBTOTAL \$ 35560.23**

**Schedule E  
Intimation Sheet)  
/ments and Contributions  
her Than Loans) Made**

SCHEDULE E (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 03/18/98  
through 05/16/98

CALIFORNIA 490  
1993 FORM  
Page 37 of 43  
I.D. NUMBER  
972168

OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

ckenbush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
L		US Postmaster Sacramento, CA	9500.00
G		Reed's Lumber 4607 Auburn Blvd. Sacramento CA 95841	986.04
G		Richard Lessa - R 709 Elkhorn Blvd. Rio Linda CA 95673	178.26
B		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	40000.00
P		Betty Presley & Assoc, Inc. 1251 E. Dyer Road, #100 Santa Ana CA 92705	750.00
P		Christine Pechal 7044 Lazy River Way Sacramento CA 95831	1000.00

**SUBTOTAL \$ 52414.30**

**SCHEDULE E (cont.)**

**Continuation Sheet)  
Payments and Contributions  
Other Than Loans) Made**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

CALIFORNIA  
1993 FORM **490**

Page **38** of **43**  
I.D. NUMBER  
972168

Statement covers period  
from **03/18/98**  
through **05/16/98**

NAME AND ADDRESS OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

Ken Cuccinelli for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
P		Junay Gardner Logan 9386 Salina Way Sacramento CA 95827	2250.00
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	16977.62
L		Metro Mailing 3920 Lennane Drive Sacramento CA 95834	6450.00
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	37500.00
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	10490.00
L		Wordmasters 120 Main Ave., Suite 1A Sacramento Ca 95838	2000.00

**SUBTOTAL \$ 75667.62**

**Schedule E  
Continuation Sheet  
Payments and Contributions  
Other Than Loans) Made**

SCHEDULE E (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from 03/18/98 through 05/16/98	CALIFORNIA 1993 FORM <b>490</b>
Page <u>39</u> of <u>43</u>	I.D. NUMBER 972168

NAME AND ADDRESS OF OFFICER/HOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

Wordmasters for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS. ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
L		Wordmasters 120 Main Ave., Suite 1A Sacramento Ca 95838	9496.06
L		US Postmaster Sacramento, CA	4320.00
L		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	7855.34
B		McNally Temple Associates 1817 Capitol Avenue, #A Sacramento CA 95814	37500.00
L		Wordmasters 120 Main Ave., Suite 1A Sacramento Ca 95838	3403.59
		Ski Park Boat & Ski 5845 Dry Creek Road Rio Linda CA 95673	798.54

**SUBTOTAL \$ 63373.53**

SCHEDULE E (cont.)

**Schedule E  
Continuation Sheet)  
Contributions and Contributions Made  
Other Than Loans)**

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

CALIFORNIA  
1993 FORM **490**

Statement covers period  
from 03/18/98  
through 05/16/98

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I.D. NUMBER  
972168

NAME AND ADDRESS OF OFFICER, CANDIDATE AND CONTROLLED COMMITTEE:

Ken Bush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

AMOUNT PAID

DESCRIPTION OF PAYMENT

OR

CODE

<p>98. Wordmasters 120 Main Ave., Suite 1A Sacramento Ca 95838</p>	<p>L</p>		<p>53.88</p>
<p>98 Pacific Bell 666 Folsom San Francisco CA 94123</p>	<p>G</p>		<p>343.33</p>

**SUBTOTAL \$ 397.21**

# Schedule F Accrued Expenses (Unpaid Bills)

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE F

Statement covers period from <u>3/18/98</u> through <u>5/16/98</u>		Page <u>41</u> of <u>43</u>	
INSTRUCTIONS ON REVERSE		I.D. NUMBER 972168	
NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE Wackenhush for State Senate 1998			

## CODES FOR CLASSIFYING EXPENDITURES

One of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- |  |  |  |
|--|--|--|
| "C" - MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES | "B" - BROADCAST ADVERTISING                                    | "G" - GENERAL OPERATIONS AND OVERHEAD                      |
| "I" - INDEPENDENT EXPENDITURES   | "N" - NEWSPAPER AND PERIODICAL ADVERTISING                     | "T" - TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED) |
| "L" - LITERATURE   | "O" - OUTSIDE ADVERTISING                                      | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES      |
|  | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |  |
|  | "F" - FUNDRAISING EVENTS                                       |  |

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	CODE	OR	DESCRIPTION OF OUTSTANDING PAYMENT	AMOUNT ACCRUED

Each additional information on appropriately labeled continuation sheets.

### Accrued Expenses Summary

Accrued expenses this period of \$100 or more. (Include all Schedule F subtotals.)	\$ 23,600.00
Accrued expenses this period of under \$100. (Do not itemize.)	\$ -0-
<b>Total accrued expenses incurred this period. (Add Lines 1 and 2.)</b>	<b>INCURRED TOTAL \$ 23,600.00</b>
<b>Total accrued expenses paid this period. (Do not itemize. Enter here and on Schedule E Summary, Line 4.)</b>	<b>PAID TOTAL \$ ( 5,103.00 )</b>

**SUBTOTAL \$**

# Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

SCHEDULE F (cont.)

Type or Print in Ink  
Amounts may be rounded  
to whole dollars.

Statement covers period from <u>03/18/98</u>	CALIFORNIA 1993 FORM <b>490</b>
through <u>05/16/98</u>	Page <u>42</u> of <u>43</u>
I.D. NUMBER <u>972168</u>	

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:

Quackenbush for State Senate 1998

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION  
(IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER ID NUMBER OR,  
IF NO ID NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)

IMPORTANT: DO NOT ITEMIZE THE PAYMENT OF ACCRUED EXPENSES ON SCHEDULES E OR F. REPORT ONLY THE LUMP SUM OF PAYMENTS ON SCHEDULE F, LINE 4 AND ON SCHEDULE E, LINE 4. DO NOT REITEMIZE ACCRUED EXPENSES REPORTED IN A PREVIOUS PERIOD

DATE	NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION	CODE	OR	DESCRIPTION OF OUTSTANDING PAYMENT	AMOUNT ACCRUED
05/01/98	Betty Presley & Assoc, Inc. 1251 E. Dyer Road, #100 Santa Ana CA 92705	P			750.00
05/14/98	Christine Pechal 7044 Lazy River Way Sacramento CA 95831	G			1000.00
05/14/98	Junay Gardner Logan 9386 Salina Way Sacramento CA 95827	G			2250.00
05/14/98	Moore Information PO Box 90340 Los Angeles CA 90009	P			19600.00

**SUBTOTAL \$ 23600.00**



# Schedule I Miscellaneous Increases to Cash

Type or print in ink.  
Amounts may be rounded  
to whole dollars.

SCHEDULE I

Statement covers period  
from 3/18/98  
through 5/16/98



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CONTRIBUTIONS ON REVERSE  
OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
Kenbush for State Senate 1998

I.D. NUMBER

972168

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
6/98	Metro Mailing 3920 Lennane Drive Sacramento, CA 95834	Refund	1,224.09

Each additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,224.09

## Miscellaneous Increases to Cash Summary

Increases to cash of \$100 or more this period. .... \$ 1,224.09  
 Increases to cash under \$100 this period. (Do not itemize.) .... \$ -0-  
 Total of all interest received this period on loans made to others. (Schedule H, Part II (b).) .... \$ -0-

Enter miscellaneous increases to cash this period (Add Lines 1, 2, and 3. Enter here and on the