

**Schedule C
Non-Monetary Contributions Received**

Statement covers period	CALIFORNIA FORM 460
from <u>02/15/2004</u>	Page <u>40</u> of <u>50</u>
through <u>06/30/2004</u>	
I.D. NUMBER <u>1252858</u>	

NAME OF FILER Yvonne B Burke, Burke Re-Election Committee

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	FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
02/18/2004	Prof Engineers/CA Govt PAC	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID# 822501	Voter Guide Prod/Mailing	950.00	950.00	950.00 (P04)
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

SUBTOTAL \$ 950.00

Non-Monetary Contributions Summary

- Amount received this period - non-monetary contributions of \$100 or more.
(Include all Schedule C subtotals.) \$ 950.00
- Amount received this period - non-monetary contributions of less than \$100.
(Do not itemize.) \$ 0.00
- Total non-monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 4.) **TOTAL \$** 950.00