Campaign Disclosure Statement Summary Page

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

	SUMMARY PAGE
Statement covers period	CALIFORNIA 160
from	FORM TOO
through	4 / 10

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Re-Elect Supervisor Don Knabe

I.D. NUMBER

Re-Elect Supervisor Don Knabe		<u> </u>	1251077
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3 2. Loans Received Schedule B, Line 7 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 4. Nonmonetary Contributions Schedule C, Line 3	\$ -125.00	0.00	1/1 through 6/30 7/1 to Date 20. Contribution Received \$
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 Expenditures Made			Made \$ 0.00 \$ 12044.71 Expenditure Limit Summary for State Candidates
6. Payments Made	\$	0.00	22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date
10. Nonmonetary Adjustment	<u>0.00</u> \$ <u>12044.71</u>	0.00 \$ 12044.71	(mm/dd/yy)\$
Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 If this is a termination statement, Line 16 must be zero.	\$ 12231.70 -125.00 0.00 12044.71 \$ 61.99	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	\$\$\$\$\$\$
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 Cash Equivalents and Outstanding Debts 18. Cash Equivalents	\$ 0.00 \$ 0.00 \$ 0.00	for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
			FPPC Form 460 (June/01 FPPC Toll-Free Helpline: 866/ASK-FPPC