Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from May 21, 2006 through June 30, 2006		CALIFORNIA 460 FORM Page 4 of 6		
SEE INSTRUCTION	NS ON REVERSE			through Suite 30, 2000				
Randy Springer						1.D. NO 1283		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE T CALENDAR 1 (JAN. 1 - DEC	/EAR	PER ELE TO D/ (IF REQI	ATE
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		DIND COM OTH PTY SCC						
SUBTOTAL\$ 0								
Schedule A Summary						*Contributor Codes		

*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

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