Type or print in ink. Amounts may be rounded

Statem	ent covers period	CALIFORNIA A C
from	20060701	FORM 400
through	20061231	37 / 75

SCHEDULE

Payments Made to whole dollars. SEE INSTRUCTIONS ON REVERSE I.D. NUMBER NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries CTB contribution (explain nonmonetary)* OFC office expenses TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating TRC candidate travel, lodging, and meals FIL candidate filing/ballot fees PHO phone banks FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals transfer between committees of the same candidate/spons IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services **TSF** LEG legal defense PRO professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, email) campaign literature and mailings PRT print ads LiT NAME AND ADDRESS OF PAYEE OR CREDITOR AMOUNT PAID CODE OR **DESCRIPTION OF PAYMENT** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 100.00 **OFC** ID: Nancy Aastrom OFC 50.37 Nancy Aastrom ID: **OFC** 25.90 ID: American Express **SUBTOTAL \$** Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule E Summary 61309.30 1. Itemized payments made this period. (Include all Schedule E subtotals.) **\$** 567.82 2. Unitemized payments made this period of under \$100. \$ _____\$ 0.00 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) 61877.12

Type or print in ink. Amounts may be rounded

		SCHEDUL
Statem	ent covers period	CALIFORNIA AGI
from	20060701	FORM 400
through _	20061231	38 / 75
		I.D. NUMBER

Payments Made	to	whole dollars.		from200607	7 <u>01</u> FO F	M AND
SEE INSTRUCTIONS ON REVERSE				through200612	231 38	8 / 75
NAME OF FILER					I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account					971277	,
CODES: If one of the following codes accurately describes	the payment, you	may enter th	e code. Otherwis	e, describe the payme	nt.	
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 col MTG meetings ar OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	nd appearances nses ulating s survey researc divery and mes	n senger services	TRC candidate trav TRS staff/spouse tr TSF transfer betwee VOT voter registrat	ibutions kers' salaries rtime and production c el, lodging, and meals ravel, lodging, and mea en committees of the s	als same candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DE	SCRIPTION OF PAYMENT		AMOUNT PAID
American Express	ID:	OFC				204.83
American Express	ID:	MTG				1685.66
American Express	ID:	OFC				110.90
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule	D.	·	SUBTOTAL	<u> </u>
Schedule E Summary						
1. Itemized payments made this period. (Include all Sched	ule E subtotals.)				\$ _	
Unitemized payments made this period of under \$100.	•					
Total interest paid this period on loans. (Enter amount from the content of						
o. Total interest paid this period of fedito. (Effet diffedit if	om odnedale b, i	art i, Coluiii	·· (<i>\\\)</i>		Ψ _	

		SCHEDULE
Stateme	ent covers period	CALIFORNIA ACC
from	20060701	FORM 400
through	20061231	39 / 75
		I.D. NUMBER

Payments Made	Amounts may be rounded to whole dollars.			from	20060701	FORM 460	
SEE INSTRUCTIONS ON REVERSE				through.	20061231	39 / 75	
NAME OF FILER						I.D. NUMBER	
Yvonne Brathwaite Burke Office Holder Account						971277	
CODES: If one of the following codes accurately describes 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 con MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	nmunications d appearances ses ulating s survey research	nger services	RAD I RFD SAL TEL TRC TRS TSF	radio airtime and producti returned contributions campaign workers' salarie t.v. or cable airtime and p candidate travel, lodging, staff/spouse travel, lodgin	es roduction costs and meals ig, and meals ees of the same candidate/spo	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	FKI piint aus	CODE OR	DES	SCRIPTION OF		AMOUNT PAID	
American Express	ID:	OFC				100.9	
American Express	ID:	OFC				449.1	

NAME AND ADDRESS OF (IF COMMITTEE, ALSO EN		CODE O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
American Express	ID:	OFC		100.90
American Express	ID:	OFC		449.13
Monica Anderson	ID:	OFC		100.00

Schedule E Summary	
Itemized payments made this period. (Include all Schedule E subtotals.)	
2. Unitemized payments made this period of under \$100.	
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.)	

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

SUBTOTAL \$

Schedule E Payments Made

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

	SCHEDULE
Statement covers period	CALIFORNIA A GC
from20060701	FORM TU
through <u>20061231</u>	40 / 75
	I.D. NUMBER

rayments Made	to whole dollars.	from	20060701	
SEE INSTRUCTIONS ON REVERSE		through	20061231	40 / 75
NAME OF FILER				I.D. NUMBER
Yvonne Brathwaite Burke Office Holder Account				971277
CODES: If one of the following codes accurately describes the	e payment, you may enter the code. Otherwise	e, describe t	he payment.	

СМР	campaign paraphernalia/misc.	MBR	member com	municatio	ns	RAD	radio airtime and production costs	
	campaign consultants	MTG	meetings and	d appearar	nces	RFD	returned contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expens	ses		SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circu	lating		TEL	t.v. or cable airtime and production of	osts
FIL	candidate filing/ballot fees	PHO	phone banks			TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL	polling and s	urvey rese	earch	TRS	staff/spouse travel, lodging, and mea	als
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, deli	very and r	messenger services	TSF	transfer between committees of the	same candidate/spon:
LEG	legal defense	PRO	professional	services (legal, accounting)	VOT	voter registration	
LIT	campaign literature and mailings	PRT	print ads			WEB	information technology costs (interne	et, email)
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION OF	PAYMENT	AMOUNT PAID

	RESS OF PAYEE OR CREDITOR EE, ALSO ENTER I.D. NUMBER)	CODE O	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T	ID:	OFC		38.24
AT&T	ID:	OFC		24.46
AT&T	ID:	OFC		23.13

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

Schedule E Summary

1.	Itemized payments made this period. (Include all Schedule E subtotals.)
2.	Unitemized payments made this period of under \$100.
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.)

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

	SCHEDULE
Statement covers period	CALIFORNIA 160
from20060701	FORM FUL
through <u>20061231</u>	41 / 75
	I.D. NUMBER

971277

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Yvonne Brathwaite Burke Office Holder Account

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

CMP	campaign paraphernalia/misc.	MBR	MBR member communications		RAD	radio airtime and production costs		
CNS	campaign consultants	MTG meetings and appearances		RFD	returned contributions			
CTB	contribution (explain nonmonetary)*	OFC	office expen	ses		SAL	campaign workers' salaries	
CVC	civic donations	PET	petition circu	ulating		TEL	t.v. or cable airtime and production c	osts
FIL	candidate filing/ballot fees	PHO	phone banks	s		TRC	candidate travel, lodging, and meals	
FND	fundraising events	POL	polling and s	survey rese	earch	TRS	staff/spouse travel, lodging, and mea	nls
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, del	ivery and n	nessenger services	TSF	transfer between committees of the s	same candidate/spon:
LEG	legal defense	PRO professional services (legal, accounting)		VOT	voter registration	•		
LIT	campaign literature and mailings	PRT	print ads			WEB	information technology costs (interne	et, email)
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION O	F PAYMENT	AMOUNT PAID
	AT&T	ID:		OFC				42.64

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE OR DESCRIPTION OF PAYMENT		
AT&T	ID:	OFC		42.64	
AT&T	ID:	OFC		37.50	
AT&T	ID:	OFC		23.21	

SUBTOTAL \$

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.)
 Unitemized payments made this period of under \$100.
 Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Schedule	E
Payments	Made

Type or print in ink.

		<u>3CHEDUL</u> t
Statem	ent covers period	CALIFORNIA AGO
from	20060701	FORM HOU
through _	20061231	42 / 75
		I.D. NUMBER

Payments Made	Amounts may be rounded to whole dollars.			from2006	60701 FO	
SEE INSTRUCTIONS ON REVERSE				through2006	61231 4	2 / 75
NAME OF FILER					I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account					971277	7
CODES: If one of the following codes accurately describes	the payment, you r	may enter th	ne code. Otherwis	se, describe the payr	nent.	
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 cor MTG meetings an OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, de PRO professional PRT print ads	nd appearance uses ulating s survey researd livery and mes	ch ssenger services	RFD returned co SAL campaign v TEL t.v. or cable TRC candidate t TRS staff/spous TSF transfer be VOT voter regist	vorkers' salaries e airtime and production o ravel, lodging, and meals e travel, lodging, and mea tween committees of the	als same candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R DE	SCRIPTION OF PAYMENT	1	AMOUNT PAID
ĀT&T	ID:	OFC				25.70
AT&T	ID:	OFC				23.61
AT&T	ID:	OFC				25.65
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule	D.		SUBTOTAL	<u> </u>
Schedule E Summary						
Itemized payments made this period. (Include all Sched	ule F subtotals \				\$ <u>_</u>	
 Unitemized payments made this period of under \$100. 	·				\$ <u>_</u>	
Total interest paid this period on loans. (Enter amount fr	rom Schedule B, Pa	art 1, Colum	ın (e).)		\$ _	

Schedule	E
Payments	Made

		SCHEDULE
Statem	ent covers period	CALIFORNIA AGI
from	20060701	FORM TUL
through	20061231	43 / 75
		I.D. NUMBER

Schedule E Payments Made	Amoun	e or print in ink. ts may be rounded whole dollars.	Statement covers period from20060701	FORM 460
SEE INSTRUCTIONS ON REVERSE			through20061231	_ 43 / 75
NAME OF FILER				I.D. NUMBER
Yvonne Brathwaite Burke Office Holder Account				971277
CODES: If one of the following codes accurately describes	the payment, you r	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 cor MTG meetings an OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, de PRO professional PRT print ads	d appearances ises ulating s	RAD radio airtime and productions SAL campaign workers' sal TEL t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodging TRS staff/spouse travel, lodging TRS transfer between community transfer between community worker registration WEB information technology	aries d production costs ng, and meals dging, and meals mittees of the same candidate/spor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
AT&T	ID:	OFC		51.68
AT&T	ID:	OFC		42.03
AT&T	ID:	OFC		41.84
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule D.		SUBTOTAL \$
Schedule E Summary				
1. Itemized payments made this period. (Include all Sched	ule E subtotals.)			\$
2. Unitemized payments made this period of under \$100.				\$
3. Total interest paid this period on loans. (Enter amount fr	rom Schedule B, Pa	art 1, Column (e).)		\$
4. Total payments made this period. (Add lines 1, 2, and 3	. Enter here and or	n the Summary Page	e, Column A, Line 6.)	TOTAL \$

Type or print in ink. Amounts may be rounded

		SCHEDULE
Statem	ent covers period	CALIFORNIA ACC
from	20060701	FORM 400
through _	20061231	. 44 / 75
		I.D. NUMBER

Payments Made to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FIL FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF transfer between committees of the same candidate/spon IND legal defense PRO professional services (legal, accounting) VOT voter registration LEG LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, email) NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR **DESCRIPTION OF PAYMENT AMOUNT PAID** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OFC 23.36 AT&T ID: **OFC** 26.21 AT&T ID: **OFC** 23.98 AT&T ID: * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ 2. Unitemized payments made this period of under \$100. \$_____ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)\$ _____

Schedule E **Payments Made**

Type or print in ink. Amounts may be rounded

		SCHEDULE
Statem	ent covers period	CALIFORNIA AGC
from	20060701	FORM 400
through _	20061231	45 / 75
		I.D. NUMBER

to whole dollars. SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. MTG meetings and appearances RFD returned contributions CNS campaign consultants OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* PET petition circulating TEL t.v. or cable airtime and production costs CVC civic donations FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research TSF transfer between committees of the same candidate/spon independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services IND legal defense VOT voter registration LEG PRO professional services (legal, accounting) PRT print ads WEB information technology costs (internet, email) LIT campaign literature and mailings NAME AND ADDRESS OF PAYEE OR CREDITOR OR **AMOUNT PAID** CODE DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 41.70 **OFC** AT&T ID: **OFC** 23.30 AT&T ID: PRT 972.00 B'nai Brith Region 16 ID: * Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ Schedule E Summary**

1.	. Itemized payments made this period. (Include all Schedule E subtotals.)	
2.	. Unitemized payments made this period of under \$100.	
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.)	

Schedule	E
Payments	Made

	Stateme	ent covers period	CALIFORNIA A CO
ı	from	20060701	FORM 400
	through	20061231	46 / 75
			I.D. NUMBER

Schedule E	Amounts may be rounded						ALIFORNIA 460	
Payments Made	to whole dollars.			from	20060701	FUI		
SEE INSTRUCTIONS ON REVERSE		1 · ·	through_	20061231	40	6 / 75		
NAME OF FILER					I.D. NUM	BER		
Yvonne Brathwaite Burke Office Holder Account						971277	,	
CODES: If one of the following codes accurately describes	the payment, you	may enter the	e code. Otherwis	se, describe t	he 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 car VOT voter registration WEB information technology costs (internet, email)			als same candidate/spon	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OF	R DE	SCRIPTION OF P	AYMENT		AMOUNT PAID	
Evelyn Baber	ID:	OFC					100.00	
Maria Beltran	ID:	OFC				_	100.00	
Beverly Hills Country Club	ID:	OFC		•		···········	2500.00	
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule I	D.		SU	JBTOTAL S	<u> </u>	
Schedule E Summary								
Itemized payments made this period. (Include all Schedu	ule E subtotals.)					\$_		
2. Unitemized payments made this period of under \$100.						\$_		
3. Total interest paid this period on loans. (Enter amount fr	om Schedule B, Pa	art 1, Columi	n (e).)			\$_		
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and o	n the Summa	ary Page, Columi	n A, Line 6.).	T	OTAL \$ _		

Schedule	E
Payments	Made

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

Statem	ent covers period	CALIFORNIA A CA
from	20060701	FORM 400
. through	20061231	47 / 75
		I.D. NUMBER

SCHEDULE

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions MTG meetings and appearances CNS campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries petition circulating TEL. t.v. or cable airtime and production costs CVC civic donations PET PHO phone banks TRC candidate travel, lodging, and meals candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals POL polling and survey research FND fundraising events POS postage, delivery and messenger services transfer between committees of the same candidate/spon independent expenditure supporting/opposing others (explain)* TSF PRO professional services (legal, accounting) voter registration LEG legal defense VOT WEB information technology costs (internet, email) campaign literature and mailings PRT print ads LIT NAME AND ADDRESS OF PAYEE OR CREDITOR **AMOUNT PAID** OR CODE **DESCRIPTION OF PAYMENT** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) **OFC** 1843.60 ID: Beverly Hills Country Club 519.60 OFC Beverly Hills Country Club ID: PRT 490.00 **Blazer Communications** ID: Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) s_____ 2. Unitemized payments made this period of under \$100. \$_____

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Type or print in ink. Amounts may be rounded

		SCHEDULE
Statem	ent covers period	CALIFORNIA ACC
from	20060701	FORM 40
through_	20061231	48 / 75
		I.D. NUMBER

Payments Made	to whole dollars.			from2000	60701 FOI	RM 406	
SEE INSTRUCTIONS ON REVERSE				through200	31231 4	48 / 75	
NAME OF FILER					I.D. NUM	BER	
Yvonne Brathwaite Burke Office Holder Account					971277	,	
CODES: If one of the following codes accurately describes	the payment, you	may enter the	e code. Other	wise, describe the payı	ment.		
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 airtim RFD returned or SAL campaign TEL t.v. or cabl TRC candidate TRS staff/spous TSF transfer be VOT voter regis WEB information	als same candidate/spon		
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OF	2	DESCRIPTION OF PAYMENT		AMOUNT PAID	
Blazer Communications	ID:	PRT				490.00	
Mike Bohlke	ID:	OFC				100.00	
Chuck Bookhammer	ID:	OFC			· 	100.00	
* Payments that are contributions or independent expenditures mus	t also be summarized	d on Schedule I	D.		SUBTOTAL	\$	
Schedule E Summary							
1. Itemized payments made this period. (Include all Sched	ule E subtotals.)				\$ _	· ·	
2. Unitemized payments made this period of under \$100.					\$ _		
Total interest paid this period on loans. (Enter amount fi							
4. Total payments made this period. (Add lines 1, 2, and 3							

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Statem	nent covers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE				through _	20061231	49 /	75
NAME OF FILER						I.D. NUMBE	R
Yvonne Brathwaite Burke Office Holder Account						971277	
CODES: If one of the following codes accurately describes	the payment, you	may enter th	e code. Otherv	vise, 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 cor MTG meetings ar OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	nd appearances nses ulating is survey researc elivery and mes	h senger services	RFD respondence of the second	adio airtime and productive turned contributions ampaign workers' salariev. or cable airtime and pandidate travel, lodging, taff/spouse travel, lodgiransfer between committoter registration	es production cost and meals ng, and meals tees of the san	me candidate/spo
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O	R I	DESCRIPTION OF P	AYMENT		AMOUNT PAID
Renita Bowlin	ID:	OFC					100.0
Lupe Carillo	ID:	OFC					100.0
Maria Cerdas	ID:	OFC					100.0
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule	D.		SU	BTOTAL \$	
Schedule E Summary 1. Itemized payments made this period. (Include all Sched	ule E subtotals.)					\$	

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 20060701	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through20061231	50 / 75	
NAME OF FILER			-	I.D. NUMBER	
Yvonne Brathwaite Burke Office Holder Account				971277	
CODES: If one of the following codes accurately describes t	he payment, you r	may enter the code. Other	erwise, 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		nd appearances ases ulating s	RAD radio airtime and product returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and particle transfer between commit voter registration WEB returned contributions.	ies production costs , and meals ng, and meals ttees of the same candidate/spon:	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Ella Cervantes	ID:	OFC		100.00	
City Club on Bunker Hill	ID:	OFC		393.15	
City Club on Bunker Hill	ID:	OFC		210.00	
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule D.	su	IBTOTAL \$	

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.)

1. Itemized payments made this period. (Include all Schedule E subtotals.)

2. Unitemized payments made this period of under \$100.

FPPC Form 460 (January/05 FPPC Toll-Free Helpline: 866/ASK-FPPC

······\$ _____

......\$ <u>_____</u>

							SCHEDULE
Schedule E	Type or print in ink. Amounts may be rounded			Statem	ent covers period	CALIFORNIA ACC	
Payments Made		to whole dollars.			20060701	FOR	M TUL
				through _	20061231	51	<i>l</i> 75
SEE INSTRUCTIONS ON REVERSE NAME OF FILER						I.D. NUMB	BER
:							
Yvonne Brathwaite Burke Office Holder Account						971277	
CODES: If one of the following codes accurately describes	the payment, you r	nay enter the cod	e. Otherwise	, describe f	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		d appearances ses alating s		RFD re SAL co TEL t. TRC co TRS s TSF tr VOT v	adio airtime and product eturned contributions ampaign workers' salari v. or cable airtime and pandidate travel, lodging taff/spouse travel, lodgiransfer between commit oter registration	es production co , and meals ng, and meal tees of the s	ls ame candidate/spo
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESC	CRIPTION OF P	AYMENT		AMOUNT PAID
City Club on Bunker Hill	ID:	OFC					210.0
City Club on Bunker Hill	ID:	OFC					210.0
City Club on Bunker Hill	ID:	OFC					411.0
* Payments that are contributions or independent expenditures must	t also be summarized	on Schedule D.			SU	BTOTAL \$	<u> </u>
Schedule E Summary							

1. Itemized payments made this period. (Include all Schedule E subtotals.)

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

2. Unitemized payments made this period of under \$100.

\$ _____

Schedule E Payments Made	Amoun	e or print in ink. ts may be rounded whole dollars.	Statement covers period from 20060701	california 460	
SEE INSTRUCTIONS ON REVERSE			through20061231	52 / 75	
NAME OF FILER			1.	D. NUMBER	
Yvonne Brathwaite Burke Office Holder Account			9	971277	
CODES: If one of the following codes accurately describes	the payment, you	may enter the code. Other	rwise, 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		nd appearances nses ulating s	RAD radio airtime and production of returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production of the candidate travel, lodging, and the staff/spouse travel, lodging, a transfer between committees VOT voter registration WEB information technology costs	uction costs I meals and meals of the same candidate/spor	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Linda Tibi Comfort	ID:	СМР		7000.00	
Linda Tibi Comfort	fD:	СМР		7000.00	
Linda Tibi Comfort	ID:	FND		166.0	
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule D.	SUBTO	OTAL \$	
Schedule E Summary					
Itemized payments made this period. (Include all Schedu	ule E subtotals.)			\$	
Unitemized payments made this period of under \$100.	,				
				•	
3. Total interest paid this period on loans. (Enter amount from	om ochequie B. Pi	art i. Coluifiii (e).)		v	

Schedule	Ε
Payments	Made

Type or print in ink. Amounts may be rounded

		SCHEDULI
Statem	ent covers period	CALIFORNIA AC
from20060701		FORM 460
through	20061231	53 / 75
		I.D. NUMBER

Payments Made	to	to whole dollars. from20060701			FOF	M TOU		
SEE INSTRUCTIONS ON REVERSE				through _	20061231	50	3 / 75	
NAME OF FILER						I.D. NUM	BER	
Yvonne Brathwaite Burke Office Holder Account								
						971277		
CODES: If one of the following codes accurately describes	the payment, you r	may enter th	ne code. Otherwis	e, describe	the payment.			
CMP campaign paraphernalia/misc.	MBR member cor	nmunications		RAD ra	adio airtime and product	ion costs		
CNS campaign consultants	MTG meetings an	d appearance	S	RFD r	eturned contributions			
CTB contribution (explain nonmonetary)*	OFC office expen	ses		SAL o	ampaign workers' salari	es		
CVC civic donations	PET petition circu	ulating			.v. or cable airtime and p		osts	
FIL candidate filing/ballot fees	PHO phone bank				andidate travel, lodging,			
FND fundraising events	POL polling and				taff/spouse travel, lodgi			
IND independent expenditure supporting/opposing others (explain)*	POS postage, de				ransfer between commit	tees of the s	same candidate/spon	
LEG legal defense	PRO professiona	l services (lega	al, accounting)		oter registration			
LIT campaign literature and mailings	PRT print ads			WEB_ii	nformation technology o	osts (interne	et, email)	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	R DES	SCRIPTION OF F	PAYMENT		AMOUNT PAID	
		OFC					175.00	
Connie Cole Makeup	ID:							
Connie Cole Makeup	ID:	OFC					175.00	
		OFC					175.0	
Connie Cole Makeup	ID:							
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule	D.		su	BTOTAL	<u> </u>	
Schedule E Summary			- 					
1. Itemized payments made this period. (Include all Sched	ule E subtotals.)					\$ _		
2. Unitemized payments made this period of under \$100.			•••••			\$ _		
3. Total interest paid this period on loans. (Enter amount fi	om Schedule B, Pa	art 1, Colum	ın (e).)			\$ _		

Schedule E Payments Made Type or print in ink. Amounts may be rounded to whole dollars.		State	ment covers period 20060701	CALIFORNIA 46C			
SEE INSTRUCTIONS ON REVERSE				through	20061231	5-	4 / 75
NAME OF FILER						I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account						971277	<u></u>
CODES: If one of the following codes accurately describes to CMP campaign paraphernalia/misc. CNS campaign consultants	the payment, you n MBR member com MTG meetings an	nmunications		RAD	the payment. radio airtime and product returned contributions	tion costs	
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	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			TEL TRC TRS TSF VOT	campaign workers' salari t.v. or cable airtime and pandidate travel, lodging staff/spouse travel, lodgi transfer between commit voter registration information technology c	production of , and meals ng, and mea ttees of the s	als same candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	OR I	DESCRIPTION OF	PAYMENT		AMOUNT PAID
Connie Cole Makeup	ID:	OFC					175.00
Martha Cortez	ID:	OFC					100.00
County of Los Angeles	ID:	OFC					610.10
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule	<u>l</u> D.		SU	BTOTAL S	<u> </u>
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedu	ıle E subtotals.)					\$ _	
2. Unitemized payments made this period of under \$100.						\$_	

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

.....\$ <u>_</u>

		vhole dollars.	from20060701	FORM TU
SEE INSTRUCTIONS ON REVERSE			through <u>20061231</u>	55 / 75
NAME OF FILER				I.D. NUMBER
Yvonne Brathwaite Burke Office Holder Account				971277
CODES: If one of the following codes accurately describes the	payment, you n	nay enter the code. Other	wise, describe the payment.	
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		d appearances ses lating	RAD radio airtime and productions returned contributions SAL campaign workers' salated t.v. or cable airtime and TRC candidate travel, lodgin TRS staff/spouse travel, lodgin TSF transfer between community voter registration WEB information technology	ries I production costs g, and meals ging, and meals nittees of the same candidate/spor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Culver City News/Blue Pacific News	ID:	PRT		140.00
Culver City Observer	ID:	PRT		150.00
Mike Davis	ID:	OFC		100.00
* Payments that are contributions or independent expenditures must also	o be summarized	on Schedule D.	S	UBTOTAL \$

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

FPPC Form 460 (January/0! FPPC Toll-Free Helpline: 866/ASK-FPP

s_____s

S	chedule	E
P	ayments	Made

		00112002
Statem	ent covers period	CALIFORNIA ACI
from	20060701	FORM 400
through	20061231	56 / 75
		I.D. NUMBER

Schedule E	Amounts may be rounded			Statement covers period		california 460	
Payments Made	to	whole dollar	S .	from20060701	_	TWI TY	
SEE INSTRUCTIONS ON REVERSE				through20061231	50	6 / 75	
NAME OF FILER		<u>_</u>			I.D. NUM	BER	
Yvonne Brathwaite Burke Office Holder Account					971277	,	
CODES: If one of the following codes accurately describes	the payment, you	may enter t	he code. Otherwis	se, 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 commended meetings at OFC office expended petition circle. PHO phone ban POL polling and POS postage, depropersion. PRT print ads	ind appearance inses culating ks I survey resear elivery and me	es ch ssenger services	RAD radio airtime and processor returned contributions SAL campaign workers' sattle. t.v. or cable airtime at TRC candidate travel, lodg staff/spouse travel, lot transfer between community voter registration WEB information technology.	s alaries nd production c ging, and meals odging, and mea nmittees of the s	als same candidate/spon	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID	
Democrats for Israel	ID:	cvc				250.00	
Ronald Fisher	ID:	OFC				100.00	
Greater New Light Missionary Bapt Ch	ID:	PRT				160.00	
* Payments that are contributions or independent expenditures must	also be summarize	d on Schedule	D.		SUBTOTAL	<u> </u>	
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedu	ıle E subtotals.)				\$_		
2. Unitemized payments made this period of under \$100.							
3. Total interest paid this period on loans. (Enter amount fro	om Schedule B, F	Part 1, Colur	nn (e).)		\$_		
4. Total payments made this period. (Add lines 1, 2, and 3.							

			SCHEDULI
	Staten	nent covers period	CALIFORNIA ACI
	from	20060701	FORM 401
	through_	20061231	57 / 75
_			I.D. NUMBER

Payments Made	Amount	s may be roun whole dollars.		from20060701 CALIFO				
SEE INSTRUCTIONS ON REVERSE				through	20061231	57 / 75		
NAME OF FILER						I.D. NUMBER	_	
Yvonne Brathwaite Burke Office Holder Account						971277		
CODES: If one of the following codes accurately describes	the payment, you n	nay enter the	code. Other	wise, 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 NAME AND ADDRESS OF PAYEE OR CREDITOR	MBR member com MTG meetings and OFC office expension PET petition circum PHO phone banks POL polling and s POS postage, del PRO professional PRT print ads	d appearances ses lating s survey research ivery and mess services (legal,	enger services accounting)	RFD SAL TEL TRC TRS TSF VOT WEB	voter registration information technology or	es production costs , and meals ng, and meals tees of the same candidate/sp posts (internet, email)	_	
(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		OFC OR		DESCRIPTION OF		AMOUNT PAI	_	
Michael Herndon	ID:						.00	
Barbara Hill	ID:	OFC				100	.00	
		050				100		
John Hill	ID:	OFC				100	.00	

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ Schedule E Summary**

1	Itemized payments made this period	(Include all Schodule E subtotale)
	HERRIZEO DAVIDERIS MAGE IBIS DENDO	COLLIDGE AN SCHEOME E SUDIDIAIS I

• •	tionized paymente made the period. (morade an editedate	E dubitation,	***************************************	***************************************	<u> </u>
2.	Unitemized payments made this period of under \$100.				\$
3.	Total interest paid this period on loans. (Enter amount from	Schedule B, Part 1, Co	lumn (e).)		\$

Type or print in ink. Amounts may be rounded

		SCHEDULE
	Statement covers period	CALIFORNIA ACC
	from <u>20060701</u>	FORM 400
	through <u>20061231</u>	58 / 75
_		I.D. NUMBER

Payments Made	to whole dollars.			from20060701	FORM	n HUL
SEE INSTRUCTIONS ON REVERSE				through20061231	58 /	75
NAME OF FILER					I.D. NUMBE	R
Yvonne Brathwaite Burke Office Holder Account					971277	
CODES: If one of the following codes accurately describes	the payment, you	may enter t	ne code. Otherwi	ise, 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	POS postage, de	nd appearance nses culating cs survey researce elivery and me	ch	RAD radio airtime and processor returned contributions SAL campaign workers' sate t.v. or cable airtime at TRC candidate travel, lodg TRS staff/spouse travel, lot TSF transfer between commod voter registration websites.	s alaries nd production cos ging, and meals odging, and meals nmittees of the san	me candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	DR DI	ESCRIPTION OF PAYMENT		AMOUNT PAID
Del Huff	ID:	OFC				100.00
Inter-American Dialogue	ID:	OFC		· · · · · · · · · · · · · · · · · · ·		150.00
Dona Kordich	ID:	OFC				100.00
* Payments that are contributions or independent expenditures mus	st also be summarized	d on Schedule	D.		SUBTOTAL \$	
Schedule E Summary						
1. Itemized payments made this period. (Include all Sched	lule E subtotals.)			••••••	\$	
2. Unitemized payments made this period of under \$100.						
Total interest paid this period on loans. (Enter amount f	rom Schedule B, F	art 1, Colum	ın (e).)		\$	

Schedule E Payments Made	Amour	e or print in ink. nts may be rounded whole dollars.	Stateme	nt covers period	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE			through	20061231	59 / 75	
NAME OF FILER	-				I.D. NUMBER	
Yvonne Brathwaite Burke Office Holder Account					971277	
CODES: If one of the following codes accurately de	escribes the payment, you	may enter the code. Oth	erwise, describe th	e 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 to the campaign literature and mailings)		nd appearances nses culating ks	RFD retu SAL car TEL t.v. TRC car TRS sta S TSF trai VOT vot	er registration	ries production costs g, and meals	
NAME AND ADDRESS OF PAYEE OR CI (IF COMMITTEE, ALSO ENTER I.D. NUMBER		CODE OR	DESCRIPTION OF PA	YMENT	AMOUNT PAID	
L. A. Watts Times	ID:	PRT			396.00	
L. A. Watts Times	ID:	PRT			300.00	
LA County Young Democrats	ID:	CVC			100.00	
* Payments that are contributions or independent expendi	tures must also be summarized	I on Schedule D.		SI	UBTOTAL \$	
Schedule E Summary						

s_____

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

							SCHEDULE
Schedule E		Type or print in ink. Amounts may be rounded to whole dollars.			ent covers period	CALIFO	369,835-39-39-39-39-39-39-39-39-39-39-39-39-39-
Payments Made					20060701	FOI	RM 400
SEE INSTRUCTIONS ON REVERSE				through _	20061231	60	0 / 75
NAME OF FILER						I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account						971277	,
CODES: If one of the following codes accurately describes	the payment, you r	may enter the	code. Otherw	rise, describe t	he 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 cor MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, de PRO professional PRT print ads	d appearances uses ulating s survey research livery and mess	enger services	RFD re SAL ca TEL t.v TRC ca TRS st TSF tra VOT vo	dio airtime and producturned contributions impaign workers' salar or cable airtime and producte travel, lodging aff/spouse travel, lodging ansfer between committer registration formation technology of	ies production c , and meals ng, and mea ttees of the s	als same candidate/spon:
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	D	ESCRIPTION OF PA	AYMENT		AMOUNT PAID
La Opinion	ID:	PRT					326.25
Doris LaCour	ID:	OFC					100.00
Richard Lara	ID:	OFC					100.00
* Payments that are contributions or independent expenditures must	t also be summarized	on Schedule D			Su	IBTOTAL S	<u> </u>
Schedule E Summary							
Itemized payments made this period. (Include all Schede	ule E subtotals.)					\$ _	
2. Unitemized payments made this period of under \$100.						\$	
Total interest paid this period on loans. (Enter amount fr.)							
4. Total payments made this period. (Add lines 1, 2, and 3.			` , ,				
, , , , , , , , , , , , , , , , , , ,			., . 250, 00,011	, 0	•••••••••••••••••••••••••••••••••••••••	- · · · · · · · · · · · · · · · · · · ·	

cations earances research	RFD returned con SAL campaign w TEL t.v. or cable	971277 nent.	
cations earances research	RAD radio airtime RFD returned con SAL campaign w TEL t.v. or cable	971277 nent. e and production costs ntributions orkers' salaries	
cations earances research	RAD radio airtime RFD returned con SAL campaign w TEL t.v. or cable	e and production costs htributions orkers' salaries	
cations earances research	RAD radio airtime RFD returned con SAL campaign w TEL t.v. or cable	e and production costs atributions orkers' salaries	
earances	RFD returned con SAL campaign w TEL t.v. or cable	ntributions orkers' salaries	
and messenger services ces (legal, accounting)	TRS staff/spouse transfer between VOT voter registra	avel, lodging, and meals travel, lodging, and meals ween committees of the same of	
DE OR	DESCRIPTION OF PAYMENT	A	AMOUNT PAID
PRT			125.00
DFC			122.84
DFC			100.00
		SUBTOTAL \$	
_	OFC	OFC Schedule D.	

1. Itemized payments made this period. (Include all Schedule E subtotals.)

.....\$ _____

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

FPPC Form 460 (January/0! FPPC Toll-Free Helpline: 866/ASK-FPP

Type or print in ink. Amounts may be rounded to whole dollars.			Staten	20060701		CALIFORNIA 460	
			through _	20061231	_ 62	2/75	
					I.D. NUME	BER	
					971277		
payment, you n	nay enter the co	de. Otherwise	, describe	the payment.			
meetings and office expense petition circumphone banks OL polling and some postage, del RO professional	d appearances ses lating urvey research very and messenge		RFD re SAL co TEL t. TRC co TRS s TSF to VOT v	eturned contributions ampaign workers' sal v. or cable airtime an andidate travel, lodgi taff/spouse travel, lod ransfer between comi oter registration	aries d production or ng, and meals lging, and mea mittees of the s	ls ame candidate/sponલ	
	CODE OR	DESC	CRIPTION OF F	AYMENT		AMOUNT PAID	
ID:	FND					8315.98	
ID:	OFC					100.00	
ID:	cvc					300.00	
be summarized	on Schedule D.	_		:	SUBTOTAL S	<u> </u>	
1 1	Dayment, you make member commeetings and office expensional phone banks polling and spostage, deliprofessional print ads	Dayment, you may enter the company and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenge professional services (legal, according to the postage). CODE OR ID: OFC CVC	Dayment, you may enter the code. Otherwise of the member communications of the meetings and appearances office expenses office expenses of the political phone banks of the political phone banks of the political phone postage, delivery and messenger services of the professional services (legal, accounting) of the print ads CODE OR DESCRIPTION	to whole dollars. through	to whole dollars. from	to whole dollars. FOR	

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

.....\$ <u>_____</u>

......\$ <u>_____</u>

							SCHEDULE
Schedule E	Type or print in ink. Amounts may be rounded			Statem	ent covers period	CALIFORNIA ACC	
Payments Made		to whole dollars.			20060701	FOF	RM 400
SEE INSTRUCTIONS ON REVERSE				through _	20061231	_ 63	3 / 75
NAME OF FILER						I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account						971277	
CODES: If one of the following codes accurately describes	the payment, you r	nay enter the	code. Otherw	vise, describe t	he 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 con MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional PRT print ads	d appearances ses alating s survey research	nger services accounting)	RFD re SAL ca TEL t.v TRC ca TRS st TSF tra VOT ve	dio airtime and producturned contributions ampaign workers' sala v. or cable airtime and andidate travel, lodging aff/spouse travel, lodgansfer between commoter registration formation technology	ries production co g, and meals ging, and mea ittees of the s	als same candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	C	DESCRIPTION OF P	AYMENT		AMOUNT PAID
Ann Miller	ID:	OFC					100.00
Patricia Miller	ID:	OFC					100.00
Salya Mohamedy	ID:	OFC					100.00
* Payments that are contributions or independent expenditures must	t also be summarized	on Schedule D.			S	UBTOTAL S	<u> </u>
Schedule E Summary							
Itemized payments made this period. (Include all Schedu	ule E subtotals.)					\$ _	
Unitemized payments made this period of under \$100.	•						
Total interest paid this period on loans. (Enter amount fr						,	
4. Total payments made this period. (Add lines 1, 2, and 3.			` , ,				
Paymond made the period. (Add lines 1, 2, and 5.	. Litter here and of	raio Guillillai	y age, colui	A, LINE U.).		A 175 A -	

Type or print in ink.

		<u></u>
Statem	ent covers period	CALIFORNIA A
from	20060701	FORM TU
through _	20061231	64 / 75
		I.D. NUMBER

Payments Made		nts may be round whole dollars.	led	from	20060701	FOI	
SEE INSTRUCTIONS ON REVERSE				through _	20061231	_ 64	4 / 75
NAME OF FILER						I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account						971277	,
CODES: If one of the following codes accurately describes	the payment, you	may enter the	code. Other	wise, 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	POS postage, o	and appearances enses culating	nger services accounting)	RFD m SAL of TEL t. TRC of TRS s TSF to VOT v	adio airtime and produ eturned contributions ampaign workers' sala v. or cable airtime and andidate travel, lodgin taff/spouse travel, lodgin ransfer between commoter registration	aries I production cog, and meals ging, and mea nittees of the s	als same candidate/spor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR		DESCRIPTION OF F	PAYMENT		AMOUNT PAID
MSM Economic Development	ID:	PRT					150.00
Ta'Shara Murray	ID:	OFC					100.00
Natl Coalition of 100 Black Women	ID:	cvc					150.0
* Payments that are contributions or independent expenditures mu	st also be summarize	d on Schedule D.			S	UBTOTAL S	<u> </u>
Schedule E Summary							
Itemized payments made this period. (Include all Sched	fule E subtotals.)					\$ _	
Unitemized payments made this period of under \$100.							
Total interest paid this period on loans. (Enter amount f							
4. Total payments made this period. (Add lines 1, 2, and 3							

Schedule	E
Payments	Made

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

		3CHEDULE
Stateme	ent covers period	CALIFORNIA ACC
from	20060701	FORM 400
through	20061231	65 / 75
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees TRS staff/spouse travel, lodging, and meals polling and survey research FND fundraising events POS postage, delivery and messenger services transfer between committees of the same candidate/spon! TSF independent expenditure supporting/opposing others (explain)* IND VOT voter registration PRO professional services (legal, accounting) LEG legal defense WEB information technology costs (internet, email) PRT print ads LIT campaign literature and mailings NAME AND ADDRESS OF PAYEE OR CREDITOR AMOUNT PAID CODE OR DESCRIPTION OF PAYMENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 100.00 **OFC** ID: Denise Navarro 100.00 OFC ID: Julia Orozco 350.00 CVC ID: Pacific Council on Intl Policy **SUBTOTAL \$** * Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.) \$ _____ 2. Unitemized payments made this period of under \$100. 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Schedule	E
Payments	Made

Type or print in ink.

			301 ILDUL
٠	Staten	nent covers period	CALIFORNIA ACI
	from	20060701	FORM 400
	through _	20061231	66 / 75
			I.D. NUMBER

Payments Made	to whole dollars.			from	20060701	FOR	8M 40U
SEE INSTRUCTIONS ON REVERSE				through _	20061231		6 / 75
NAME OF FILER						I.D. NUM	BER
Yvonne Brathwaite Burke Office Holder Account						971277	
CODES: If one of the following codes accurately describes	the payment, you r	nay enter th	ne code. Otherwis	e, 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 con MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional PRT print ads	d appearance ses ulating s survey researd livery and mes	ch ssenger services	RFD r SAL of TEL t TRC of TRS s TSF t VOT v	adio airtime and produ eturned contributions ampaign workers' sala v. or cable airtime and andidate travel, lodgin staff/spouse travel, lodg ransfer between commoter registration information technology	ries I production c g, and meals ging, and mea nittees of the s	als same candidate/spon:
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	OR DES	SCRIPTION OF F	PAYMENT		AMOUNT PAID
Gerardo Pinedo	ID:	OFC					100.00
Printco Graphics	ID:	FND					1921.44
Printco Graphics	ID:	FND				<u> </u>	350.73
* Payments that are contributions or independent expenditures must	st also be summarized	on Schedule	D.		S	UBTOTAL S	<u> </u>
Schedule E Summary							
1. Itemized payments made this period. (Include all Sched	lule E subtotals.)					\$ _	
Unitemized payments made this period of under \$100.							
3. Total interest paid this period on loans. (Enter amount f							

Cabadula E	Type	e or print in ink.	Statement courses as ind	SCHEDULI			
Schedule E Payments Made	Amoun	ts may be rounded	Statement covers period	FORM 46(
rayments made	το	whole dollars.	from20060701				
CEE INCTITUE ON DEVERSE			through20061231	67 / 75			
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				I.D. NUMBER			
Yvonne Brathwaite Burke Office Holder Account				971277			
CODES: If one of the following codes accurately desc	ribes the payment, you	may enter the code. Ot	therwise, describe the payment.				
CMP campaign paraphernalia/misc.	MBR member co		RAD radio airtime and produc	tion costs			
CNS campaign consultants CTB contribution (explain nonmonetary)*	MTG meetings ar OFC office exper	• •	RFD returned contributions SAL campaign workers' salar	ies			
CVC civic donations	PET petition circ	ulating	TEL t.v. or cable airtime and	production costs			
FIL candidate filing/ballot fees FND fundraising events	PHO phone bank POL polling and		TRC candidate travel, lodging TRS staff/spouse travel, lodg				
IND independent expenditure supporting/opposing others (explain		elivery and messenger service		ttees of the same candidate/spor			
LEG legal defense		I services (legal, accounting)		and distance to a section			
LIT campaign literature and mailings	PRT print ads		WEB information technology of	costs (internet, email)			
NAME AND ADDRESS OF PAYEE OR CREDI (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID			
Printco Graphics	ID:	OFC		3567.92			
Josie Ramirez	ID:	OFC		100.00			
David Ryu	ID:	OFC		100.00			
* Payments that are contributions or independent expenditure	s must also be summarized	on Schedule D.	St	JBTOTAL \$			
Schedule E Summary							
Itemized payments made this period. (Include all S	chedule E subtotals.)			\$			
2. Unitemized payments made this period of under \$1	00						
3. Total interest paid this period on loans. (Enter amo							

Schedule	E
Payment:	s Made

Type or print in ink.

Stateme	ent covers period	CALIFORNIA ACC
from	20060701	FORM TUC
through	20061231	68 / 75
		I.D. NUMBER

Payments Made	to whole dollars.			from	20060701	FOR	FORM 46U	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through _	20061231	68	/ 75	
Yvonne Brathwaite Burke Office Holder Account							Liv	
						971277		
CODES: If one of the following codes accurately describes 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 co MTG meetings a OFC office expe PET petition circ PHO phone banl POL polling and POS postage, di	ommunications nd appearances nses culating	ger services	RAD ra RFD ra SAL co TEL to TRC co TRS si TSF tr	adio airtime and product sturned contributions ampaign workers' salari v. or cable airtime and pandidate travel, lodging taff/spouse travel, lodginansfer between commit oter registration	es production co , and meals ng, and meal tees of the sa	s ame candidate/spor	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	C	ESCRIPTION OF P	AYMENT		AMOUNT PAID	
Statecraft	iD:	PRO					600.00	
Randi Tahara	ID:	OFC	<u> </u>				100.00	
Wendy Tait	ID:	OFC					100.0	
* Payments that are contributions or independent expenditures mus	t also be summarized	d on Schedule D.			su	BTOTAL \$		
Schedule E Summary								
1. Itemized payments made this period. (Include all Sched	ule E subtotals.)	•••••				\$		
2. Unitemized payments made this period of under \$100.						\$		
3. Total interest paid this period on loans. (Enter amount fi	om Schedule B, P	art 1, Column (e).)			\$		
4. Total payments made this period. (Add lines 1, 2, and 3	. Enter here and o	on the Summary	/ Page, Colun	nn A, Line 6.).	то	OTAL \$		

Type or print in ink. Amounts may be rounded

		SCHEDULE
Stateme	ent covers period	CALIFORNIA ASC
from	20060701	FORM TUG
through	20061231	69 / 75
		I.D. NUMBER

rayments made	to v	whole dollars	5.	from	20060701			
				through	20061231	69	9175	
SEE INSTRUCTIONS ON REVERSE						I.D. NUM	BER	
NAME OF FILER						1.5.110		
/vonne Brathwaite Burke Office Holder Account						971277	,	
CODES: If one of the following codes accurately describes	the payment, you r	may enter t	he code. Other	wise, describ	e the payment.			
CMP campaign paraphernalia/misc.	MBR member con	nmunications		RAD	radio airtime and product	ion costs		
CNS campaign consultants	MTG meetings an		es		returned contributions			
CTB contribution (explain nonmonetary)*	OFC office expen				campaign workers' salari			
CVC civic donations	PET petition circu				t.v. or cable airtime and p		osts	
FIL candidate filing/ballot fees	PHO phone bank				candidate travel, lodging,			
FND fundraising events	POL polling and				staff/spouse travel, lodging			
IND independent expenditure supporting/opposing others (explain)*	POS postage, de				TSF transfer between committees of the same candidate/			
LEG legal defense	PRO professional	services (leg	jal, accounting)		voter registration		A 20\	
LIT campaign literature and mailings	PRT print ads	,		WEB	information technology of	osts (interne	et, email)	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION O	F PAYMENT		AMOUNT PAID	
Clifford Taitt	ID:	OFC					400.00	
Clinton Tatum	ID:	OFC					100.00	
The Trusteeship	ID:	cvc				· ·	550.0	
The Trusteesing	, ,							
* Payments that are contributions or independent expenditures mus	st also be summarized	on Schedule	e D.		su	IBTOTAL S	\$	
Schedule E Summary								
Itemized payments made this period. (Include all Sched	lule E subtotals.)					\$_		
2. Unitemized payments made this period of under \$100.						•		
2. Omenized payments made this period of under φ100.						Ψ <u> </u>		

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

				SCHEDULE
Schedule E		or print in ink.	Statement covers period	CALIFORNIA ACC
Payments Made		ts may be rounded whole dollars.	from 20060701	FORM 40U
SEE INSTRUCTIONS ON REVERSE			through20061231	70 / 75
NAME OF FILER				I.D. NUMBER
Yvonne Brathwaite Burke Office Holder Account				971277
CODES: If one of the following codes accurately describes	the payment, you	may enter the code. Other	wise, describe the payment.	311211
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		d appearances ses Jlating s	RAD radio airtime and productions RFD returned contributions SAL campaign workers' sale t.v. or cable airtime and trace candidate travel, lodging transfer between computed to the control of transfer between control	laries Id production costs Ing, and meals Idging, and meals Inging, and meals Inging and meals Ingines of the same candidate/spon
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gwen Thompson	ID:	OFC		150.00
U.S. Assn. of Former Mbrs/Congress	ID:	OFC		100.00
US Postmaster	ID:	FND		585.00
* Payments that are contributions or independent expenditures mus	t also be summarized	on Schedule D.		SUBTOTAL \$

1. Itemized payments made this period. (Include all Schedule E subtotals.)

.....\$ <u>____</u>

2. Unitemized payments made this period of under \$100.

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Schedule E **Payments Made**

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

	SCHEDULE
Statement covers period	CALIFORNIA AGE
from20060701	FORM FOU
through20061231	71 / 75
	I.D. NUMBER

aymonto maao	to whole donars.	from	20000701		<u>#</u>	
SEE INSTRUCTIONS ON REVERSE		through	20061231	71 / 75		
NAME OF FILER				I.D. NUMBER		
Yvonne Brathwaite Burke Office Holder Account				971277		
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.						

			•	-					
CMP CNS CTB CVC FIL FND IND LEG LIT	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	OFC PET PHO POL POS	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)		ces arch nessenger services	RFD SAL TEL TRC TRS TSF VOT	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/spo		
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION O	PF PAYMENT	AMOUNT PAID	
	US Postmaster	ID:		OFC				141.00	

,	,		
US Postmaster	ID:	OFC	141.00
Hope Valles	ID:	OFC	100.00
·		FND	 405.00
Ward Graphic Design	ID:	FNU	403.00

* Day	. 46 - 4		sarimad an Cabadi	4 n		SUBTOTAL \$	
- Payments	that are contributions or independent exp	enottures must also de sumii	iarizeo on Scheoi	ile D.		SUDIVIAL	
	the control of the position of						

Schedule E Summary

1.	Itemized payments made this period. (Include all Schedule E subtotals.)	·
2.	Unitemized payments made this period of under \$100.	
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.)	

				SCHEDULE !	
Schedule E	• •	e or print in ink. ts may be rounded	Statement covers period		
Payments Made		whole dollars.	from 20060701	FORM 460	
•		• .			
SEE INSTRUCTIONS ON REVERSE			through20061231	72 / 75	
NAME OF FILER				I.D. NUMBER	
Yvonne Brathwaite Burke Office Holder Account				971277	
CODES: If one of the following codes accurately describes	the payment, you	may enter the code. Other	rwise, describe the payment.		
CMP campaign paraphernalia/misc.	MBR member cor	mmunications	RAD radio airtime and production	costs	
CNS campaign consultants	MTG meetings ar		RFD returned contributions		
CTB contribution (explain nonmonetary)*	OFC office exper		SAL campaign workers' salaries		
CVC civic donations	PET petition circ		TEL t.v. or cable airtime and prod		
FIL candidate filing/ballot fees	PHO phone bank		TRC candidate travel, lodging, an TRS staff/spouse travel, lodging,		
FND fundraising events IND independent expenditure supporting/opposing others (explain)*	POL polling and	livery and messenger services		s of the same candidate/spons	
LEG legal defense		I services (legal, accounting)	VOT voter registration	or the same canadaterspand	
LIT campaign literature and mailings	PRT print ads		WEB information technology costs	s (internet, email)	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID	
Jan Wasson	ID:	PRO		2240.00	
Jan Wasson	ID:	PRO		1385.76	
Jan Wasson	ID:	PRO		2685.00	
				TOTAL A	
* Payments that are contributions or independent expenditures must	also be summarized	l on Schedule D. 	SUBT	OTAL \$	
Schedule E Summary					
1. Itemized payments made this period. (Include all Schedu	ule E subtotals.)			\$	
2. Unitemized payments made this period of under \$100.				\$	
3. Total interest paid this period on loans. (Enter amount from	om Schedule B, P	art 1, Column (e).)		\$	

							SCHEDULE
Schedule E	Type or print in ink. Amounts may be rounded to whole dollars.			Statement covers period		CALIFORNIA ACO	
Payments Made				from	20060701	FOF	M 40U
CEE INCTINICATIONS ON DEVEDSE				through _	20061231	73	3 / 75
SEE INSTRUCTIONS ON REVERSE NAME OF FILER						I.D. NUMI	
Yvonne Brathwaite Burke Office Holder Account							
						971277	
CODES: If one of the following codes accurately describes	the payment, you r	may enter the co	de. Otherwis	e, describe t	he payment.		
CMP campaign paraphernalia/misc.	MBR member con	nmunications		RAD radio airtime and production costs			
CNS campaign consultants	MTG meetings an				turned contributions		
CTB contribution (explain nonmonetary)*	OFC office expen				mpaign workers' salar		
CVC civic donations FIL candidate filing/ballot fees	PET petition circu PHO phone banks				 or cable airtime and andidate travel, lodging 		OSIS
FND fundraising events	POL polling and				aff/spouse travel, lodging		ls
IND independent expenditure supporting/opposing others (explain)*		livery and messenge	er services		ansfer between commi		
LEG legal defense		services (legal, acc	ounting)		oter registration		•
LIT campaign literature and mailings	PRT print ads	· ——		WEB in	formation technology of	osts (interne	t, email)
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	SCRIPTION OF P	AYMENT		AMOUNT PAID
Jan Wasson	ID:	PRO					2620.00
Earnestene Wilson	ID:	OFC					100.00
Kenya Yarbrough	ID:	CNS					400.00
* Payments that are contributions or independent expenditures must	t also be summarized	on Schedule D.			SL	IBTOTAL S	<u> </u>
Schedule E Summary							
1. Itemized payments made this period. (Include all Schedu	ule E subtotals.)		•••••		••••••	\$ _	
2. Unitemized payments made this period of under \$100.			•••••			\$ _	
3. Total interest paid this period on loans. (Enter amount fr	om Schedule B, Pa	art 1, Column (e)	.)		••••••	\$_	
4. Total payments made this period. (Add lines 1, 2, and 3.	Enter here and o	n the Summary F	Page, Columr	n A, Line 6.).	To	OTAL \$ _	

Schedule	E
Payments	Made

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

		- SCHEDOLE
Statem	ent covers period	CALIFORNIA ACC
from	20060701	FORM 400
through _	20061231	74 / 75
		I.D. NUMBER

COUEDING

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Yvonne Brathwaite Burke Office Holder Account 971277 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs CMP campaign paraphernalia/misc. MBR member communications RFD returned contributions CNS campaign consultants MTG meetings and appearances OFC office expenses SAL campaign workers' salaries CTB contribution (explain nonmonetary)* TEL t.v. or cable airtime and production costs petition circulating CVC civic donations TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees staff/spouse travel, lodging, and meals FND fundraising events POL polling and survey research transfer between committees of the same candidate/spons independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF IND LEG legal defense PRO professional services (legal, accounting) VOT voter registration WEB information technology costs (internet, email) LIT campaign literature and mailings PRT print ads NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) 400.00 **CNS** ID: Kenya Yarbrough 480.00 CMP Kenya Yarbrough ID: 350.00 **CMP** ID: Kenya Yarbrough * Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$** 61309.30 Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.) 2. Unitemized payments made this period of under \$100. \$_____ 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)