	Type or print in ink. Amounts may be rounded to whole dollars.		SCHEDULE			
Schedule F Accrued Expenses (Unpaid Bills)			Statement covers period from 7/1/03		CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE				30/03	Page66	
NAME OF FILER	<del> </del>		<del>-</del>	10	NUMBER	
Tom Higgins/Committee to Elect Tom Higgins					253061	
CODES: If one of the following codes accurately describe	es the payment, you may	enter the code. O	therwise, describe t	he payment.		
CMP campaign paraphemalia/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 LTT 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 pnnt 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 candidate/sponsor VOT voter registration WEB information technology costs (internet, e-mail)			
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE ALSO ENTER ID NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$	\$	\$	\$	
Schedule F Summary				<del></del>		
Total accrued expenses incurred this period. (Include all S accrued expenses of \$100 or more, plus total unitemized and services are serviced.)			INCL	IRRED TOTALS	\$36	
<ol><li>Total accrued expenses paid this period. (Include all Schoaccrued expenses of \$100 or more, plus total unitemized)</li></ol>				PAID TOTALS	i <b>\$</b>	
3. Net change this period. (Subtract Line 2 from Line 1. Enton the Summary Page, Column A, Line 9.)				<b>NE</b> T	\$ May be a constitue number	