

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>4</u> of <u>86</u>
I.D. NUMBER <u>971139</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/02/2004	Donald Abbey	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive The Abbey Company	875.00	875.00	
08/25/2004	ACEH Capital LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	
08/25/2004	Michael Agopian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Professor Los Angeles Harbor College	175.00	175.00	
08/25/2004	Michael Agron	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Michael S Agron	1,000.00	1,000.00	
08/25/2004	Agua Dulce Vineyards LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				2,500.00		

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 112,220.00
- Amount received this period – unitemized contributions of less than \$100 \$ 2,597.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 114,817.00

*Contributor Codes
IND – Individual
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(other than PTY or SCC)
OTH – Other
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SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>5</u> of <u>86</u>
I.D. NUMBER 971139	

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08/10/2004	Lili Ahmadi	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director of Communications DCFS	175.00	175.00	
08/25/2004	Alcorn Fence Co	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	Albert Alioto	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bus Driver CYO Transportation	150.00	150.00	
08/25/2004	Allegretti & Company	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		525.00	525.00	
08/25/2004	Allen Cem Inc DBA Malibu Jewelry	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,700.00		

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>6</u> of <u>86</u>
	I.D. NUMBER 971139

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08/25/2004	American Finance House	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Ampco System Parking	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Frances Angerhofer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	300.00	300.00	
08/25/2004	Hon Armand Arabian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Alternative Dispute Resolution Armand Arabian	1,000.00	1,000.00	
08/25/2004	Architech Investment LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		700.00	700.00	
SUBTOTAL \$				2,700.00		

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>7</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Arciero & Sons, Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Noubar Ashjian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Anita Ashton	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Broker Lopez Realty Inc	150.00	150.00	
08/25/2004	Association For Los Angeles Deputy Sheriffs PAC ID: 822506	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	John Attwood	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	500.00	500.00	
SUBTOTAL \$				1,850.00		

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>8</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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08/10/2004	B & E Engineers	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		525.00	525.00	
08/25/2004	Frank Barnyak	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Mary Barnyak	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Frank Baxter	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investment Banker Jeffries & Company Inc	1,000.00	1,000.00	
08/25/2004	Ron Beaton	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
SUBTOTAL \$				2,225.00		

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Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER Michael D. Antonovich Officeholder Account
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08/25/2004	Bergman & Dacey, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	James Bishop	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Donna Black	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Morrison & Foerster	1,000.00	1,000.00	
09/13/2004	Kenneth Blaydow	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Kenneth A. Blaydow	350.00	350.00	
08/25/2004	Arthur Blech	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Commonwealth Enterprises	500.00	500.00	
SUBTOTAL \$				2,950.00		

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Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>10</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

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08/10/2004	Kenneth Bley	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox Castle & Nicholson LLP	175.00	175.00	
08/25/2004	Alyce Block	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	300.00	300.00	
08/25/2004	David Boran	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Eli Broad	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman AIG Retirement Services Inc	1,000.00	1,000.00	
08/25/2004	Broadway Realtors Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				2,000.00		

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Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>11</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

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09/02/2004	Brown Winfield & Canzoneri	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	Jennifer Bubalo	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
08/25/2004	Charles Butler Jr	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Laura Butler	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
09/02/2004	C A Rasmussen Company	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		875.00	1,000.00	
SUBTOTAL \$				2,425.00		

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	Page <u>12</u> of <u>86</u>
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09/02/2004	C A Rasmussen Company	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		875.00	1,000.00	
08/25/2004	Cahill Building Group, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/10/2004	Larry Calemine	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive LAFCO	350.00	350.00	
08/25/2004	California Commerce Club, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	
08/25/2004	Alice Campbell	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
SUBTOTAL \$				2,675.00		

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	Page <u>13</u> of <u>86</u>
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08/25/2004	CAP/Trust Legislative Committee	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	John Carlson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Carlson & Associates	175.00	175.00	
09/02/2004	Castaic Brick	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	CFF Mortgage Corp	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		300.00	300.00	
08/25/2004	Kellogg Chan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
SUBTOTAL \$				1,925.00		

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		Page <u>14</u> of <u>86</u>
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08/25/2004	Gareth Chang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman Alpha Media	1,000.00	1,000.00	
08/05/2004	Grace Chang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Los Angeles County	1,000.00	1,000.00	
08/25/2004	Ted Chanock	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	250.00	250.00	
08/25/2004	Charlie Tzeng & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		400.00	400.00	
08/25/2004	Seth Chase	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	300.00	300.00	
SUBTOTAL \$				2,950.00		

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	Page <u>15</u> of <u>86</u>
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08/25/2004	W. Charles Chastain	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Chadmar Group	500.00	1,500.00	
08/25/2004	Edwin Chau	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Chan & Chau LLP	100.00	100.00	
08/25/2004	John Cheng	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Accountant County Of Los Angeles	175.00	175.00	
08/25/2004	Gloria Chetwynd	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Actress Gloria Carlin Chetwynd	200.00	200.00	
08/25/2004	Nancy Chien	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
SUBTOTAL \$				1,325.00		

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>16</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Teddy Chien	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management University Of Southern California	350.00	350.00	
08/25/2004	Herta Chikato	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Melvin Chikato	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Businessman Chikato Bros	175.00	175.00	
08/25/2004	David Chow	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer IBI Group	175.00	175.00	
08/25/2004	Chow, Levy & Nourafchan LLP	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		300.00	300.00	
SUBTOTAL \$				1,175.00		

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IND - Individual
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(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>17</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Herbert Citrin	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Herb Citrin-Valet Parking Service	175.00	175.00	
08/25/2004	Clark Drane Co.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Thomas Clark	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Royal-Clark Development Co	175.00	175.00	
08/25/2004	ClearChannel Worldwide	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	Cline & Duplissea	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
SUBTOTAL \$				1,200.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>18</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER Michael D. Antonovich Officeholder Account	I.D. NUMBER 971139
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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Coleman & Associates, Lawyers	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Committee To Elect Chris Lancaster	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Victor Conklin	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Leona Valley Town Council	175.00	175.00	
08/25/2004	Richard Cooper	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Consuelo Corrales	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife N/A	200.00	200.00	
SUBTOTAL \$				1,000.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>19</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Gene Crawford	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Simpson & Simpson	175.00	175.00	
08/10/2004	Dangler Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Jo Anne Darcy	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Dart Warehouse Corporation	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/10/2004	Stanley Dashew	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	250.00	250.00	
SUBTOTAL \$				1,050.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>20</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	David N Schultz Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	
08/25/2004	Corinne Davies	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Administration Veatch, Carlson, Grogan & Nelson	750.00	750.00	
08/25/2004	Willie Davis	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner All-Pro Broadcasting, Inc.	600.00	600.00	
08/25/2004	Dennis De Pietro	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Dennis De Pietro	350.00	350.00	
08/25/2004	Frank De Santis Jr.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive CTOC	100.00	100.00	
SUBTOTAL \$				1,900.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>21</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Barbara Dekovner-Mayer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Non Profit Management Friends Assisting Friends	100.00	100.00	
08/25/2004	C. George Deukmejian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	200.00	
08/25/2004	Robert Dockson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	300.00	300.00	
08/25/2004	William Doheny	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Orest Dolyniuk	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Planner Novak & Associates	175.00	175.00	
SUBTOTAL \$				875.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>22</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Driver Safety Schools, Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Reiko Duba	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner LA County Commission For Women	100.00	100.00	
08/25/2004	Marion Eastlake	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Dorothy Ebsen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
08/25/2004	Edd's Mini & RV Storage	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,250.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>23</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/10/2004	Tamar Edelson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle & Nicholson	175.00	175.00	
08/25/2004	Adrienne Edmonston	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Emergency Ambulance Service Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		700.00	700.00	
08/25/2004	Leida Erickson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Women's Information Network	175.00	175.00	
08/10/2004	John Evans	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Principal Evans-Collins CB	175.00	175.00	
SUBTOTAL \$				1,325.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>24</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Fairplex LA Cnty Fair, Hotel & Exposition Complex	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		700.00	700.00	
08/25/2004	Nancy Farrand	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Partner Farrand Enterprises	175.00	175.00	
08/10/2004	Felicidad Ferrer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Pasadena Residential Care	1,000.00	1,000.00	
08/10/2004	Renato Ferrer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Pasadena Residential Care	525.00	525.00	
08/10/2004	Lawrence Field	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate NSB Assoc	500.00	500.00	
SUBTOTAL \$				2,900.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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08/25/2004	Sharon Fischer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Sharon L. Fischer	350.00	350.00	
08/25/2004	David Fleming	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Latham & Watkins LLP	1,000.00	1,500.00	
08/10/2004	Shirley Fong	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	175.00	175.00	
08/25/2004	Andrew Friedman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Andrew Friedman	175.00	175.00	
08/25/2004	Friends Of Gary Yamauchi ID: 1265800	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
SUBTOTAL \$				1,875.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>26</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Samuel Fujimoto	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Patricia Gallucci	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Wayne Gan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO GPI, Corp.	175.00	175.00	
08/25/2004	Walter Garrison	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	200.00	
08/25/2004	GC Services	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
SUBTOTAL \$				1,650.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>27</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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08/25/2004	Ha Giang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner May Flower Restaurant	175.00	175.00	
09/02/2004	Glendale Kia	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/10/2004	Gary Glick	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle & Nicholson LLP	175.00	175.00	
08/25/2004	Ted Goldberg	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CPA Theodore A Goldberg	350.00	350.00	
08/25/2004	Goldrich, Kast, Hirsch, Stern	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				2,050.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>28</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/10/2004	Gordon Gray	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	James Gray	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Gloria Green	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Gloria Green Productions	350.00	600.00	
08/10/2004	Gruber Systems	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150.00	150.00	
08/25/2004	Mark Guho	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
SUBTOTAL \$				800.00		

*Contributor Codes

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>29</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/02/2004	David Gullen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician David J. Gullen	875.00	875.00	
08/25/2004	Evelyn Gutierrez	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner County Of Los Angeles	350.00	350.00	
08/25/2004	Sherry Hackett	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	500.00	500.00	
09/02/2004	Hall Ambulance Service Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	Hans Giraud & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
SUBTOTAL \$				2,900.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>30</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Irshad Haque	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Store-It-All	350.00	350.00	
08/25/2004	Myron Hartwig	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Campaign Consultant Riordan For Governor	100.00	100.00	
08/25/2004	Mian Hasan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Mian Jamil Hasan Realtors	175.00	175.00	
08/25/2004	Harvey Heather	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/10/2004	Hinderliter, De Llamas & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1,000.00	
SUBTOTAL \$				1,225.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>31</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Hinderliter, De Llamas & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	1,000.00	
08/25/2004	Michael Hoff	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Superior Court Judge Los Angeles Superior Court	175.00	175.00	
08/25/2004	Nancy Hoffman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
08/25/2004	Kimberly Holland	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Marketing Communications Crest Communications	175.00	175.00	
08/25/2004	Nowland Hong	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Brown, Winfield & Canzoneri	750.00	750.00	
SUBTOTAL \$				1,700.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>32</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/27/2004	Earl Hoover	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Earl L. Hoover	100.00	100.00	
08/25/2004	Horace Heidt Agency Co Inc dba Magnolia Estate Apartments	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Richard Hotaling	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	John Hou	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman Asian Pacific NatL Bank	175.00	175.00	
08/25/2004	Houle & Houle	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				900.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>33</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Chien Huang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Banker Evertrust Bank	175.00	175.00	
08/25/2004	Importers Direct Wholesale Co Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	International Promotion & Entertainment	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	James L Flournoy Attorney At Law	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Donna Jesse	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
SUBTOTAL \$				1,400.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>34</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	John T. Malloy Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Edith Johnston	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	250.00	250.00	
08/25/2004	Bruce Kaji	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant & Broker Bruce T Kaji	150.00	150.00	
08/25/2004	Carl Karcher	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Carl's Jr.	100.00	100.00	
08/10/2004	Gregory Karns	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox Castle & Nicholson	175.00	175.00	
SUBTOTAL \$				1,025.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>35</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Rose Kasparoff	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Hilda Kassardjian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manufacturing Hilda Kassardjian	350.00	350.00	
08/25/2004	Kawada Co. Of America, LTD	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Elizabeth Kessel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Kessel & Associates	1,000.00	1,000.00	
08/10/2004	Ky Chueon Kim	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner Los Angeles County Small Business Comm	500.00	500.00	
SUBTOTAL \$				2,550.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>36</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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08/25/2004	Della Koenig	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Della Koenig	100.00	100.00	
08/25/2004	Kohrs & Fiske	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Ford Kuramoto	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Man Magna Systems Inc.	100.00	100.00	
09/14/2004	Carol Wai Kwan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director West Basin Municipal Water	500.00	500.00	
08/25/2004	Munson Kwok	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer The Aerospace Corp	350.00	350.00	
SUBTOTAL \$				1,400.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	La Canada Flintridge Country Club	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		525.00	525.00	
08/10/2004	Ruth Lamport	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Land Design Consultants Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Ronald Lascoe	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Periodontist Ronald J Lascoe DMD	175.00	175.00	
08/10/2004	Paul Laska	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
SUBTOTAL \$				1,575.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A - (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>38</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

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08/27/2004	Law Offices Of Elaine Yang	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	
08/25/2004	Law Offices Of John W Harris & Assoc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Law Offices Of Michael Thomas	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		875.00	1,875.00	
08/25/2004	Law Offices Of Paul H. Weisman	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	350.00	
08/25/2004	Julius Leetham	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
SUBTOTAL \$				1,775.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>39</u> of <u>86</u>
I.D. NUMBER 971139	

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Algird Leiga	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Leo Grillo Productions Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	Lewis Investment Company LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		437.50	437.50	
08/25/2004	Anne Lewis	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Stanley Lisiewicz	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
SUBTOTAL \$				1,237.50		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>40</u> of <u>86</u>
	I.D. NUMBER 971139

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Huasha Liu	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Manager Southern CA Association Of Governments	175.00	175.00	
08/25/2004	Los Amigos Country Club	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Los Angeles County Disposal Association	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Los Angeles County Firefighters Lo. 1014 ID: 970663	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	Elwood Lui	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Jones Day Reavis & Pogue	350.00	350.00	
SUBTOTAL \$				2,225.00		

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>41</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER Michael D. Antonovich Officeholder Account
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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/10/2004	Major Iron & Metal	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	
08/25/2004	Malibu Canyon Office Partners, LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Malloy Family Partners LP	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Marbella Concepts & Designs	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Stephen Marcus	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Judge Los Angeles County	175.00	175.00	
SUBTOTAL \$				975.00		

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 SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>42</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Marshall Canyon Country Club	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	
08/25/2004	Laurel Martin	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Maurice Martinez	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Labor Relations Director E.C.A.	350.00	350.00	
08/25/2004	Vachik Martirosian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Coldwell Banker	350.00	350.00	
08/25/2004	Masters Contracting Corp	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,425.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>43</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER
Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/10/2004	Jeffrey Masters	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle, & Nicholson LLP	350.00	350.00	
08/25/2004	Matich Corporation	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	2,000.00	
08/25/2004	Kevin McCarthy	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investment Advisor The Selden Companies	350.00	350.00	
08/25/2004	Guy McCreary	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management Weddington Investing Properties LLC	350.00	350.00	
08/25/2004	Marlin McKeever	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Insurance Broker Andreini Company	175.00	175.00	
SUBTOTAL \$				2,225.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>44</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	E. Kathleen McWatters	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Appraiser Mason & Mason	175.00	375.00	
08/25/2004	Barbara Messina	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Metropolitan News Co	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	Mike Bubalo Construction	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	Kevork Minassian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Apik Jewelry Inc	175.00	175.00	
SUBTOTAL \$				2,025.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>45</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Ira Monatlik	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Salesperson Ira Monatlik	120.00	120.00	
08/25/2004	Francis Montgomery	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Management Montgomery Mgmt Co	500.00	1,000.00	
08/25/2004	Mark Montgomery	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Mark E. Montgomery	350.00	350.00	
08/25/2004	Frances Muir	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	200.00	
08/10/2004	R. Chandler Myers	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Myers & D'Angelo	100.00	100.00	
SUBTOTAL \$				1,270.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>46</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Tatsushi Nakamura	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Tatsushi Nakamura	175.00	175.00	
08/25/2004	Gerald Nordskog	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Publisher Power Boat Magazine	100.00	100.00	
08/25/2004	Cynthia Norian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
08/25/2004	Georgette O'connor Day	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Georgette O'connor Day	175.00	175.00	
08/25/2004	Robert Oltman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Oimax Corporation	100.00	100.00	
SUBTOTAL \$				650.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>47</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Pacific Home Developers LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	350.00	
08/25/2004	Pacific Home Developers LLC	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	350.00	
08/25/2004	George Pappas	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Pardee Homes	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		437.50	437.50	
08/25/2004	Pasadena Residential Care Center	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,237.50		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>48</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Sumant Patel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Pearce Services Dba Cross Rock Services	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	John Pecel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	200.00	
08/25/2004	Henri Pellissier	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	200.00	200.00	
08/10/2004	Penny Lane Centers	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
SUBTOTAL \$				1,750.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>49</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Barry Perrou	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Psychologist P.S.R.I.	150.00	150.00	
08/25/2004	Sidney Petersen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	Peterson & Bradford LLP	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
07/28/2004	Jack Peterson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Jordan Phillips	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Jordan M Phillips	350.00	350.00	
SUBTOTAL \$				1,125.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>50</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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08/25/2004	Boone Pickens	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO BP Capital	1,000.00	1,000.00	
08/25/2004	Peklar Pilavdjian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Jeweler Peklar A. Pilavdjian	175.00	175.00	
08/25/2004	Ara Piranian	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	General Manager Hollywood Mfg	100.00	100.00	
08/25/2004	Planning Associates Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/10/2004	Frank Politeo	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Frank Politeo AIA Architect	175.00	175.00	
SUBTOTAL \$				1,625.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>51</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	POPA Inc Small Contributor Committee ID: 970225	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input checked="" type="checkbox"/> SCC		525.00	525.00	
08/25/2004	Cheryl Post	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Estate Manager Mannings	250.00	250.00	
08/25/2004	Nadia Powers	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner LA County	350.00	350.00	
08/25/2004	Premier Building Maintenance Services	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		700.00	700.00	
08/25/2004	David Price	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman American Airports Corp	1,000.00	1,000.00	
SUBTOTAL \$				2,825.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>52</u> of <u>86</u>
I.D. NUMBER 971139	

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Helen Price	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife N/A	750.00	750.00	
08/25/2004	Prime Wheel Corporation	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	John Prlich	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor N/A	100.00	100.00	
08/25/2004	Quality Naturally	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	350.00	
08/25/2004	Tung Quan	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	175.00	175.00	
SUBTOTAL \$				2,200.00		

***Contributor Codes**

IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>53</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Gheorghe Radulescu	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President C & G Import Export	175.00	175.00	
08/25/2004	Rancho Golf Center Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Richard Reinjohn	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Reinjohn Law Offices	175.00	175.00	
08/10/2004	Retired Employees Of Los Angeles County	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Carolyn Rhee	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Project Director USC Medical Center	200.00	200.00	
SUBTOTAL \$				1,250.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>54</u> of <u>86</u>
	I.D. NUMBER 971139

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Ralph Riffenburgh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Ralph S Riffenburgh	200.00	200.00	
08/25/2004	Rishen Dreams Corp. U.S.A.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Alexander Rivney	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Judy Roberts	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Hard Ten	700.00	700.00	
08/25/2004	Robertson's	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,950.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

Type or print in ink.
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to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>		CALIFORNIA FORM 460
Page <u>55</u> of <u>86</u>		
NAME OF FILER Michael D. Antonovich Officeholder Account		I.D. NUMBER 971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Ronald S. Smith Attorney At Law	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	
08/25/2004	Joe Rosen	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Roxbury Management Co.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Connie Russell	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	George Sack Jr.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Stuntman Hollywood Showlight	350.00	350.00	
SUBTOTAL \$				1,175.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>56</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Paul Salata	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	1,000.00	1,000.00	
08/25/2004	Natalie Salazar	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director LA Co Sheriff	175.00	175.00	
08/25/2004	Salute & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00	100.00	
08/25/2004	San Gabriel Valley Council	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Wyman Sanders	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor Wyman Sanders	100.00	100.00	
SUBTOTAL \$				1,550.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>57</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Sanjo Investments, II	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	John Santell	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Consultant John J Santell	200.00	200.00	
08/25/2004	Schaefer Ambulance Service Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	850.00	
08/25/2004	Jack Schuler	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Jack M. Schuler	875.00	875.00	
08/25/2004	Mary Schuler	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	875.00	875.00	
SUBTOTAL \$				2,650.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>59</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Ted Short	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Ted Short & Associates	100.00	100.00	
08/10/2004	Ronald Silverman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle & Nicholson, LLP	175.00	175.00	
08/25/2004	William Simon Jr.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Co-Chairman William E Simon & Sons LLC	175.00	175.00	
08/25/2004	Marjorie Sinclair	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife N/A	175.00	175.00	
08/10/2004	John Smith	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
SUBTOTAL \$				800.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>60</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Kenneth Snaer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	100.00	100.00	
08/25/2004	Mark Snedden	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice President Lewis & Company Inc	175.00	175.00	
08/25/2004	Victoria Sofro	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive L.A.C.M.H.C.	100.00	100.00	
08/25/2004	Sonnenblick-Del Rio Development, Inc.	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Alex Soteras	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Soteras Mortgage	350.00	350.00	
SUBTOTAL \$				900.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>61</u> of <u>86</u>
	I.D. NUMBER <u>971139</u>

NAME OF FILER
Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Southern Building Maintenance Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Robert Spare	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	350.00	350.00	
08/25/2004	Specialty Products Company	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00	200.00	
08/25/2004	St Anthony's Greek Orthodox Church	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		175.00	175.00	
08/25/2004	Standard Pacific Of Ventura	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		437.50	437.50	
SUBTOTAL \$				1,512.50		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>62</u> of <u>86</u>
NAME OF FILER Michael D. Antonovich Officeholder Account	
I.D. NUMBER 971139	

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Star View Adolescent Center	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/10/2004	Helen Stathatos	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Commissioner Los Angeles County	350.00	350.00	
08/25/2004	Michelle Steel	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Michelle Steel Attorney At Law	150.00	150.00	
08/25/2004	Sterling Gateway LP	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Steve P Rados Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,550.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>63</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

Michael D. Antonovich Officeholder Account

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Thelma Stewart	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Community Leader Thelma Stewart	200.00	200.00	
08/25/2004	Ruth Stone	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Investor Ruth S Stone	100.00	100.00	
08/25/2004	Strategy Workshop Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		525.00	525.00	
08/25/2004	Harold Stueve	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Stueve's Natural	350.00	350.00	
08/25/2004	Sutnar & Sutnar	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,525.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>64</u> of <u>86</u>
I.D. NUMBER 971139	

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08/25/2004	Brian Sweeney	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Managing Partner Woodside Partners	875.00	875.00	
08/25/2004	Eva Sweeney	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Bau 10 LLC	525.00	525.00	
08/10/2004	Elizabeth Szu	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor Elizabeth Szu	350.00	350.00	
08/10/2004	T.C. Collins & Associates	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Hamid Taheri	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CPA Sampson & Sampson	175.00	175.00	
SUBTOTAL \$				2,275.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>65</u> of <u>86</u>
I.D. NUMBER 971139	

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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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Tejon Ranch	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		437.50	437.50	
08/25/2004	Tennenhouse & Minassian	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	The Ring And Miscikowski Trust	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00	500.00	
08/25/2004	Tom Sawyer Camps Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Transamerica Broadcasting Corp Station KTYM	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	1,350.00	
SUBTOTAL \$				1,987.50		

***Contributor Codes**

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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

SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2004	
through	12/31/2004	Page 66 of 86
NAME OF FILER		I.D. NUMBER
Michael D. Antonovich Officeholder Account		971139

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)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/25/2004	Carl Treling	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Carl Treling	175.00	175.00	
08/25/2004	United Victory Fund ID: 1256134	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Valverde Construction Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/10/2004	Salvador Velasquez	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Public Administrator BUSD	175.00	175.00	
08/25/2004	W2 Design Inc	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
SUBTOTAL \$				1,400.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>67</u> of <u>86</u>
I.D. NUMBER 971139	

NAME OF FILER

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08/10/2004	Ira Waldman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle, Nicholson	175.00	175.00	
08/25/2004	Tongbo Wang	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired. N/A	500.00	500.00	
08/25/2004	Waste Management Service Center	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00	1,000.00	
08/25/2004	Ruth Watanabe	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
08/25/2004	John Watkins	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	175.00	175.00	
SUBTOTAL \$				2,025.00		

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**Schedule A (Continuation Sheet)
Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>68</u> of <u>86</u>
	I.D. NUMBER 971139

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08/25/2004	Sophia Waugh	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Board Member LA County Office Of Education	100.00	100.00	
09/02/2004	Mark Weinstein	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Veatch, Carlson, Grogan & Nelson	1,000.00	1,000.00	
08/25/2004	Werbc Construction Corporation	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		350.00	350.00	
08/25/2004	Eric Wickland	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Building Official Los Angeles County	150.00	150.00	
08/25/2004	Gregg Williamson	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Vice President Rose Hills Co.	175.00	175.00	
SUBTOTAL \$				1,775.00		

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Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period from <u>07/01/2004</u> through <u>12/31/2004</u>	CALIFORNIA FORM 460
	Page <u>69</u> of <u>86</u>
	I.D. NUMBER 971139

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08/25/2004	Phyllis Winter	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Homemaker N/A	100.00	100.00	
08/25/2004	Helen Wolff	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician Helen Wolff	150.00	150.00	
08/25/2004	Helen Woo	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant Helena Investment Consulting Co	100.00	100.00	
08/25/2004	Wilbur Woo	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Director Cathay Bank	250.00	250.00	
08/25/2004	Kanton Woods	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	President Rose Hills Co	175.00	175.00	
SUBTOTAL \$				775.00		

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Monetary Contributions Received**

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SCHEDULE A (CONT.)

Statement covers period		CALIFORNIA FORM 460
from	07/01/2004	
through	12/31/2004	Page 70 of 86
NAME OF FILER		I.D. NUMBER
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08/25/2004	Verda Woods	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife N/A	175.00	175.00	
08/25/2004	Jack Wyle	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired N/A	150.00	150.00	
08/10/2004	Mathew Wyman	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Attorney Cox, Castle & Nicholson, LLP	175.00	175.00	
08/25/2004	Patricia Younis	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Consultant The Bridge Group	175.00	175.00	
07/28/2004	Doris Zimmer	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife N/A	100.00	100.00	
SUBTOTAL \$				775.00		

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