

**Schedule C  
Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>01/01/2005</u> through <u>06/30/2005</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>22</u> of <u>33</u>
I.D. NUMBER 990009	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

LEE BACA OFFICEHOLDER ACCOUNT

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.O. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/20/2005	CHARLES A. HADDAD	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NUCLEAR MEDICINE UNIVERSAL UNLIMITED SERVICES, INC.	FUNDRAISING EVENT	750.00	750.00	
05/16/2005	HANIF HIRJI	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUSINESS OWNER GLOBAL AMERICA, INC.	FUNDRAISING EVENT	500.00	500.00	
05/16/2005	NARMIN HIRJI	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUSINESS OWNER GLOBAL AMERICA, INC.	FUNDRAISING EVENT	500.00	500.00	
05/10/2005	AMINE H. KLAEB	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	GAS STATION OWNER FLORENCE SHELL SERVICE	FUNDRAISING EVENT	1,000.00	1,000.00	

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$** 2,750.00

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) .....	\$	6,250.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....	\$	0.00
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) .....	<b>TOTAL \$</b>	6,250.00

\*Contributor Codes  
IND – Individual  
COM – Recipient Committee  
(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

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SCHEDULE C

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/2005	
through	06/30/2005	Page 23 of 33
		I.D. NUMBER 990009

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NAME OF FILER

LEE BACA 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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
05/15/2005	ANDRE SKAF	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PARTNER AGS GLOBAL FINANCIAL, LTD	FUNDRAISING EVENT	1,000.00	1,000.00	
05/17/2005	ABRAHAM TEKIN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	BUSINESS OWNER OZEL FINE JEWELERS	FUNDRAISING EVENT	1,000.00	1,000.00	
05/11/2005	GREG TOMASSIAN	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	PHYSICIAN GREG TOMASSIAN, M.D.	FUNDRAISING EVENT	500.00	500.00	
05/20/2005	WESTIN BONAVENTURE HOTEL	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		FUNDRAISING EVENT	1,000.00	1,000.00	

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 3,500.00**

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) ..... \$ 6,250.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 0.00
- Total nonmonetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ..... **TOTAL \$ 6,250.00**

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(other than PTY or SCC)  
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