

Schedule E
Payments Made

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	
through <u>12/31/2005</u>	Page <u>28</u> of <u>48</u>
NAME OF FILER <u>Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account</u>	
I.D. NUMBER <u>971277</u>	

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
	CODE	DESCRIPTION OF PAYMENT	
Nancy Aastrom	OFC		161.99
American Express	OFC		320.72
Monica Anderson	OFC		100.00

SUBTOTAL \$ 582.71

Schedule E Summary

- | | |
|--|---------------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$ <u>61,716.29</u> |
| 2. Unitemized payments made this period of under \$100. | \$ <u>438.57</u> |
| 3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 2, Column(d).) | \$ <u>0.00</u> |
| 4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL | \$ <u>62,154.86</u> |

**Schedule E
(Continuation Sheet)
Payments Made**

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	
through <u>12/31/2005</u>	Page <u>29</u> of <u>48</u>
NAME OF FILER <u>Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account</u>	
I.D. NUMBER <u>971277</u>	

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	B'nai Brith Region 16	PRT		
Evelyn Baber	OFC			100.00
Bacon's Information Inc	OFC			487.15
Maria Beltran	OFC			100.00

SUBTOTAL \$ 1,659.15

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(Continuation Sheet)
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Page <u>30</u> of <u>48</u>	I.D. NUMBER <u>971277</u>

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Beverly Hills Country Club	OFC			4,790.31
Black Women Lawyers Assn/L. A., Inc.	CVC			260.00
Mike Bohlke	OFC			100.00
Chuck Bookhammer	OFC			100.00

SUBTOTAL \$ 5,250.31

**Schedule E
(Continuation Sheet)
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Statement covers period		CALIFORNIA FORM 460
from	07/01/2005	
through	12/31/2005	Page 31 of 48
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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
	Renita Bowlin	OFC		
California Community Newspapers	PRT			185.00
Lupe Carillo	OFC			100.00
Maria Cerdas	OFC			100.00

SUBTOTAL \$ 485.00

**Schedule E
(Continuation Sheet)
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Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	
through <u>12/31/2005</u>	Page <u>32</u> of <u>48</u>
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	CODE	DESCRIPTION OF PAYMENT	
Ella Cervantes	OFC		100.00
City Club on Bunker Hill	OFC	1,672.71	12,209.81
	FND	10,256.58	
	MTG	280.52	
Linda Tibi Comfort	CNS	13,000.00	13,190.00
	OFC	190.00	
Community Services Resource Corp.	CVC		500.00

SUBTOTAL \$ 25,999.81

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from 07/01/2005
through 12/31/2005

**CALIFORNIA
FORM 460**

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I.D. NUMBER
971277

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	CODE	DESCRIPTION OF PAYMENT	
Connie Cole Makeup	OFC		700.00
Martha Corona-Cortez	OFC		100.00
County of Los Angeles	OFC		1,258.00
Mike Davis	OFC		100.00

SUBTOTAL \$ 2,158.00

**Schedule E
(Continuation Sheet)
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	CODE	DESCRIPTION OF PAYMENT	
Michael Herndon	OFC		100.00
Barbara Hill	OFC		100.00
John Hill	OFC		100.00
Del Huff	OFC		100.00

SUBTOTAL \$ 400.00

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(Continuation Sheet)
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	CODE	DESCRIPTION OF PAYMENT	
Hurricane Relief Fund	CVC		1,500.00
J. Bead Foundation	CVC		125.00
Cathy James	OFC		175.00
Dona Kordich	OFC		100.00
SUBTOTAL \$			1,900.00

**Schedule E
(Continuation Sheet)
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Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	Page <u>36</u> of <u>48</u>
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	CODE	DESCRIPTION OF PAYMENT	
L. A. Bio Med Foundation	PRT		250.00
L. A. Watts Times	PRT		792.00
La Opinion	PRT		315.00
Doris LaCour	OFC		100.00

SUBTOTAL \$ 1,457.00

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(Continuation Sheet)
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Statement covers period		CALIFORNIA FORM 460
from	07/01/2005	
through	12/31/2005	Page 37 of 48
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	CODE	DESCRIPTION OF PAYMENT	
LAX Flowers	OFC		675.51
Judith Leslie-Thomas	OFC		100.00
Life Mbrs Guild/So. Ca. Natl Cncl Negro Women	CVC		100.00
Miriam S. Long	OFC		100.00
SUBTOTAL \$			975.51

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(Continuation Sheet)
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from 07/01/2005

through 12/31/2005

CALIFORNIA
FORM **460**

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	CODE	OR		
Sandra Mendez	CNS			150.00
Patricia Miller	OFC			100.00
Ta' Shara Murrav	OFC			100.00
NAACP/Carson-Torrance Branch	CVC			150.00

SUBTOTAL \$ 500.00

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	CODE	DESCRIPTION OF PAYMENT	
Tamiko Nash	CVC		120.00
National Academy of Public Administration NAPA	OFC		600.00
Natl Coalition of 100 Black Women	PRT		200.00
Denise Navarro	OFC		100.00

SUBTOTAL \$ 1,020.00

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	CODE	DESCRIPTION OF PAYMENT	
Nickolas N. Shammass Scholarship Fnd	CVC		110.00
Julia Orozco	OFC		100.00
Pacific Council on Intl Policy	CVC		350.00
Gerardo Pinedo	OFC		100.00
SUBTOTAL \$			660.00

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	CODE	OR	
Printco Graphics	FND	1,496.02	4,756.02
	OFC	3,260.00	
Josie Ramirez	OFC		100.00
David Ryu	OFC		100.00
Save Africa's Children	CVC		250.00

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	SBC/Pacific Bell	OFC		
SCLC Magazine	PRT			495.00
Jason Seward	OFC			100.00
St. Jospeh Center	CVC			185.00

SUBTOTAL \$ 1,212.79

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through	12/31/2005	Page 43 of 48
NAME OF FILER Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account		I.D. NUMBER 971277

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

- | | | |
|---|---|---|
| CMP campaign paraphernalia/misc. | MBR member communications | RAD radio airtime and production costs |
| CNS campaign consultants | MTG meetings and appearances | RFD returned contributions |
| CTB contribution (explain nonmonetary)* | OFC office expenses | SAL campaign workers salaries |
| CVC civic donations | PET petition circulating | TEL t.v. or cable airtime and production costs |
| FIL candidate filing/ballot fees | PHO phone banks | TRC candidate travel, lodging and meals (explain) |
| FND fundraising events | POL polling and survey research | TRS staff/spouse travel, lodging and meals (explain) |
| IND independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services | TSF transfer between committees of the same candidate/sponsor |
| LEG legal defense | PRO professional services (legal, accounting) | VOT voter registration |
| LIT campaign literature and mailings | PRT print ads | WEB information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR		DESCRIPTION OF PAYMENT	AMOUNT PAID
	CODE	OR		
Randi Tahara	OFC			100.00
Wendy Tait	OFC			100.00
Clifford Taitt	OFC			400.00
Clinton Tatum	OFC			100.00
SUBTOTAL \$				700.00

**Schedule E
(Continuation Sheet)
Payments Made**

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	
through <u>12/31/2005</u>	Page <u>44</u> of <u>48</u>
NAME OF FILER <u>Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account</u>	
I.D. NUMBER <u>971277</u>	

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR		DESCRIPTION OF PAYMENT	AMOUNT PAID
	CODE	OR		
The Trusteeship	CVC			550.00
Tom Bradley Legacy Fdn.	CVC			500.00
Joe Torres	OFC			100.00
Toyo Photography	OFC			638.68

SUBTOTAL \$ 1,788.68

**Schedule E
(Continuation Sheet)
Payments Made**

SCHEDULE E (CONT.)

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	Page <u>45</u> of <u>48</u>
through <u>12/31/2005</u>	I.D. NUMBER 971277

NAME OF FILER Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
	CODE	DESCRIPTION OF PAYMENT	
US Postmaster	FND	481.00	555.00
	OFC	74.00	
Hope Valles	OFC		100.00
Ward Graphic Design	FND		395.00
Jan Wasson	PRO		6,943.81

SUBTOTAL \$ 7,993.81

Schedule E
(Continuation Sheet)
Payments Made

SCHEDULE E (CONT.)

Statement covers period from <u>07/01/2005</u> through <u>12/31/2005</u>	CALIFORNIA FORM 460
Page <u>46</u> of <u>48</u>	I.D. NUMBER <u>971277</u>

NAME OF FILER Yvonne B Burke, Yvonne Brathwaite Burke Office Holder Account

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NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
	CODE	DESCRIPTION OF PAYMENT	
Earnestene Wilson	OFC		100.00
Glenda Wina	OFC		100.00
Kenya Yarbrough	CNS		1,567.50

SUBTOTAL \$ 1,767.50