

**Schedule D
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

Statement covers period	CALIFORNIA FORM 460
from <u>07/01/2005</u>	
through <u>12/31/2005</u>	
Page <u>8</u> of <u>22</u>	
I.D. NUMBER 1235308	

NAME OF FILER Steve Cooley, D.A. Steve Cooley Officeholder Account

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/14/2005	Bob Foster	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		250.00	250.00	250.00 (G05)
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
11/18/2005	Michael Ramos	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		250.00	250.00	250.00 (G05)
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
09/08/2005	Stephan Passalacqua	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure		500.00	500.00	500.00 (G05)
		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose				
SUBTOTAL \$				1,000.00		

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) \$ 1,350.00
2. Contribution and independent expenditures made this period of under \$100 \$ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) **TOTAL \$** 1,350.00

**Schedule D (Continuation Sheet)
Summary of Expenditures
Supporting/Opposing Other
Candidates, Measures and Committees**

SCHEDULE D (CONT.)

Statement covers period from <u>07/01/2005</u> through <u>12/31/2005</u>	CALIFORNIA FORM 460
	Page <u>9</u> of <u>22</u>
I.D. NUMBER <u>1235308</u>	

NAME OF FILER Steve Cooley, D.A. Steve Cooley Officeholder Account

DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/31/2005	Gary Lieberstein D.A	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure <hr/> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		250.00	250.00	250.00 (G05)
11/20/2005	Ralph Martin	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure <hr/> <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		100.00	100.00	100.00 (G05)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure <hr/> <input type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input type="checkbox"/> Independent Expenditure <hr/> <input type="checkbox"/> Support <input type="checkbox"/> Oppose				
SUBTOTAL \$				350.00		