

# Schedule E Payments Made

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

SCHEDULE E

Statement covers period from _____	<b>CALIFORNIA FORM 460</b>
through _____	
58 / 69	
ID NUMBER 1251077	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Re-Elect Supervisor Don Knabe

**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                      |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| 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, email)            |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GAIL LEGROS [REDACTED] [REDACTED]	FND		Reimb. Octoberfest FR	235 88
Environet, Inc. [REDACTED] [REDACTED]	TRC			2269 50
ALICE BORDEN COMPANY [REDACTED] [REDACTED]	POS		For Fund Raiser	185 00

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$**

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ 131060 43
2. Unitemized payments made this period of under \$100.	\$ 116.00
3 Total interest paid this period on loans (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0 00
4 Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 131176 43</b>

**Schedule E  
Payments Made**

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SCHEDULE E

Statement covers period from _____	<b>CALIFORNIA FORM 460</b>
through _____	
59 / 69	
ID NUMBER 1251077	

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NAME OF FILER  
Re-Elect Supervisor Don Knabe

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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 tv or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
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LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
VERIZON ID: [REDACTED]		Telephone	30 70
THE QUEEN MARY ID: [REDACTED]	FND		18025 32
VISA ID: [REDACTED]		Wedding Gifts	199.99

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$**

**Schedule E Summary**

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ \_\_\_\_\_
2. Unitemized payments made this period of under \$100 ..... \$ \_\_\_\_\_
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ \_\_\_\_\_
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) ..... **TOTAL \$** \_\_\_\_\_

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SCHEDULE E

Statement covers period from _____	<b>CALIFORNIA FORM 460</b>
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Re-Elect Supervisor Don Knabe

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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
Ramona Garrett [REDACTED]	ID	FND	440.00
Los Angeles County Registrar-Recorder [REDACTED]	ID:	2004 Candidate Statement	28000.00
POLITICAL PULSE [REDACTED]	ID:	Subscription	287.00

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**SUBTOTAL \$**

## Schedule E Summary

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2. Unitemized payments made this period of under \$100. .... \$ \_\_\_\_\_
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ..... \$ \_\_\_\_\_
4. Total payments made this period. (Add lines 1, 2, and 3 Enter here and on the Summary Page, Column A, Line 6) ... **TOTAL \$** \_\_\_\_\_

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SCHEDULE E

Statement covers period from _____	<b>CALIFORNIA FORM 460</b>
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61 / 69	
ID NUMBER 1251077	

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NAME OF FILER  
Re-Elect Supervisor Don Knabe

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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
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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
CompleteCampaigns.com ID. [REDACTED]	PRO		Software Fee	400 00
CALIFORNIA FLORAL CO. ID. [REDACTED]			Flowers	51.91
PALOS VERDES PENINSULA REPUBLICAN HEADQUARTERS: [REDACTED]	CVC		Dinner and Speaker	100 00

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**SUBTOTAL \$**

## Schedule E Summary

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4. Total payments made this period. (Add lines 1, 2, and 3 Enter here and on the Summary Page, Column A, Line 6) ..... **TOTAL \$** \_\_\_\_\_

# Schedule E Payments Made

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SCHEDULE E

Statement covers period from _____ through _____	<b>CALIFORNIA FORM 460</b>
	62 / 69
	ID NUMBER 1251077

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Re-Elect Supervisor Don Knabe

**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                      |
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| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, email)            |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GAIL LEGROS ID. [REDACTED]	POS		Thank You Notes	74 00
ACCESS THE WEB ID: [REDACTED]	WEB		Web page design	3150.00
VISA ID: [REDACTED]			Visa Bill	129 74

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**SUBTOTAL \$**

## Schedule E Summary

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63 / 69	
ID NUMBER 1251077	

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NAME OF FILER

Re-Elect Supervisor Don Knabe

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CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
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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
Roger Douglass [REDACTED]	ID	FND		1600.00
Public Opinion Strategies, LLC [REDACTED]	ID	POL	Survey	60000.00
Los Angeles County Registrar-Recorder [REDACTED]	ID	FIL	Filing Fees	1397.84

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**SUBTOTAL \$**

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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
Waldo Arballo ID. [REDACTED]	PRO			1022.80
Waldo Arballo ID. [REDACTED]	PRO		Treasurer Service, Misc Expenses	1331.97
VERIZON ID. [REDACTED]	OFC		Telephone Bill	38.16

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	65 / 69
	I.D. NUMBER 1251077

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Re-Elect Supervisor Don Knabe

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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
Ramona Garrett ID: [REDACTED]	FND			76.90
PRESENTATION SERVICES ID: 1400 CHEVENS [REDACTED]	FND			300.05
REED & DAVIDSON, LLP ID: [REDACTED]	PRO		Final Treasurer Services	335.17

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**SUBTOTAL \$**

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SCHEDULE E

Statement covers period from _____ through _____	<b>CALIFORNIA FORM 460</b>  66 / 69
	ID NUMBER  1251077

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Re-Elect Supervisor Don Knabe

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| LIT campaign literature and mailings                              | PRT print ads                                 | WEB information technology costs (internet, email)            |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
VERIZON ID. [REDACTED]	PHO		34 52
ALICE BORDEN COMPANY ID: [REDACTED]	PRO		843 75
ALICE BORDEN COMPANY ID: [REDACTED]	PRO		8303 13

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**SUBTOTAL \$**

## Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ \_\_\_\_\_
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# Schedule E Payments Made

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SCHEDULE E

Statement covers period from _____ through _____	<b>CALIFORNIA FORM 460</b>
	67 / 69
NAME OF FILER Re-Elect Supervisor Don Knabe	ID NUMBER 1251077

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Re-Elect Supervisor Don Knabe

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LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
GAIL LEGROS [REDACTED]	ID			148 00
CompleteCampaigns.com [REDACTED]	ID	PRO	Software Fee	400.00
CompleteCampaigns.com [REDACTED]	ID:	PRO	Campaign Software	400.00

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**SUBTOTAL \$**

## Schedule E Summary

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**Schedule E  
Payments Made**

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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
Waldo Arballo ID: [REDACTED]	PRO		Treas. Services	1006 78
CALIFORNIA FLORAL CO ID: [REDACTED]			Flowers L. B Resident	57 32
GAIL LEGROS ID: [REDACTED]	POS		Stamps Christmas Cards	185 00

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**SUBTOTAL \$ 131060.43**

**Schedule E Summary**

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.)	\$ _____
2. Unitemized payments made this period of under \$100.	\$ _____
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e) )	\$ _____
4. Total payments made this period (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ _____</b>