Recipient Committee Campaign Statement	Type or print in	ink.	Date Stamp	CALIFORNIA 460
Cover Page (Government Code Sections 84200-84216.5) CITY CLEI	S K	•	CITY CLERK	FORIVI
2011 APR 21 PM	Cinternant servers	Date of election if applicates (Month, Day, Year)	APR 21 PM 4:	For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through March 19, 2011	April 5, 2011		
1. Type of Recipient Committee: All Committees - Co	emplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 5) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 T Amendment (Explain b	emination)	
3. Committee Information	D. NUMBER 014748 1337929	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Mary Boger for School Board 20 11 STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER Donald E. Russ MAILING ADDRESS CITY	STATE	ZIP CODE AREA CODE/PHONE
CITY STATE ZIP CO	DDE AREA CODE/PHONE	Glendale NAME OF ASSISTANT TREASU	CA CA	91203-1243
Glendale CA 9120		THE OF FROM STATE STATE OF	ACIO, II ANI	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	30X	MAILING ADDRESS		
CITY STATE ZIP C	DDE AREA CODE/PHONE	CITY	STATE	ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADD	RESS	
4. Verification I have used all reasonable diligence in preparing and reviewin under penalty of perjury under the laws of the State of Californ Executed on	a that the foregoing is true and correct. By	Signature of Treasurer or Assigned in Dilling Officeholder, Candidate, State Measure Pro-	A community of the Comm	
Cate	•	Signature of Controlling Officeholder, Candidate, 5	State Measure Proponent	

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California

							Page	ot
Officeholder or Candidate C	Controlled Committee			6. P	rimarily Formed Bal	lot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDID	ATE		···		AME OF BALLOT MEASURE			
Mary Boger								
OFFICE SOUGHT OR HELD (INCLUDE I	LOCATION AND DISTRICT NUM	IBER IF APPLICAB	LE)	8.	ALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT
Member, Board of Education								OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (N	NO. AND STREET) CITY	STATE	ZIP	-				
	Glendale	CA	91208	ic	lentify the controlling o	fficeholder, ca	ndidate, or state measu	re proponent, if an
				N	AME OF OFFICEHOLDER, CA	NDIDATE, OR PI	ROPONENT	·
Related Committees Not Inc not included in this statement that a contributions or make expenditures	re controlled by you or are.	orimarily formed	mmittees to receive	-	FFICE SOUGHT OR HELD	· · · · · · · · · · · · · · · · · · ·	DISTRICT N	IO. IF ANY
COMMITTEE NAME	I.D. 1	NUMBER		_			<u> </u>	
NAME OF TREASURER	CON	TROLLED COMMIT	TECO	7. P	rimarily Formed Ca	ndidate/Offic	eholder Committee	List names of
		YES NO		o	fficeholder(s) or candidate	(s) for which thi	is committee is primarily t	ormed.
COMMITTEE ADDRESS STREE	TADDRESS (NO P.O. BOX)			N	AME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OR HE	D SUPPORT
								OPPOSE
CITY	STATE ZIP CODE	AREA CO	DE/PHONE	N.	AME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OR HE	Д
		·						SUPPORT OPPOSE
COMMITTEE NAME	I.D. 1	NUMBER		<u></u>	AME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OR HEI	
					The state of the s	CANDIDATE	OF ICE SOUGHT ON HE	SUPPORT OPPOSE
NAME OF TREASURER	CON	TROLLED COMMIT	TEE?	<u></u>	AME OF OFFICEROUSES OF	CAMPIDATE		
		YES NO		N.	AME OF OFFICEHOLDER OF	CANDIDATE	OFFICE SOUGHT OR HE	I LI SUPPORT
COMMITTEE ADDRESS STREE	TADDRESS (NO P.O. BOX)			_				OPPOSE
CITY	STATE ZIP CODE	····						
			DE/PHONE					

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period from February 20, 2011

through March 19, 2011

CALIFORNIA 460

FORM 10, 2011

Page 1 of 1

I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Glendale Mary Boger For School Board 2011 014748 1337929 Column A Calendar Year Summary for Candidates Column B Contributions Received TOTAL THIS FERIOD (FROMATTACHED SCHEDULES) CALENDAR YEAR Running in Both the State Primary and TOTALTODATE General Elections 3382.00 4705.00 1/1 through 6/30 7/1 to Date 1000.00 1000.00 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ _ 4382.00 5705.00 20. Contributions Received 4. Nonmonetary Contributions Schedule C, Line 3 300,00 300.00 21. Expenditures 4682.00 6005.00 Made Expenditures Made Expenditure Limit Summary for State 6. Payments Made Schedule E, Line 4 \$ ___ 3291.29 3417.50 Candidates 0.00 0.00 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ ___ 3291.29 3417.50 (N Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 0.00 0.00 Date of Election Total to Date 300.00 300.00 (mm/dd/yy) 3591.29 3717.50 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ ___ 1196,79 To calculate Column B, add 4382.00 13. Cash Receipts Column A, Line 3 above amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00 'Amounts in this section may be different from amounts from Column B of your last reported in Column B. report. Some amounts in 3291.29 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ ___ 2287.50 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts, if this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ ____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 18. Cash Equivalents See instructions on reverse \$ ____ 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _ FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

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

SCHEDULE A Statement covers period CALIFORNIA

from	February 20, 2011	FORM	40
through	March 19, 2011	Page1	of3
		I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Me of filer blendale Mary Boger Fon School Board 2011

01/2/12 1227070

,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	or Forgothor Board 2011				0134	48 1337929
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER 1,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)
3/18/11	Marjorie & Jarrett Anderson Glendale, CA 91202	ZIND COM OTH PTY	Retired teacher/Attorney GUSD/Melby & Anderson	100.00	100.00	100.00
3/18/11	Warren Boehm La Crescenta, CA 91214	☐COM ☐OTH ☐PTY ☐SCC	Owner, Boehm Insurance Agency	100.00	100.00	100.00
3/18/11	John Edwards La Crescenta, CA 91214	☑IND □COM □OTH □PTY □SCC	Attorney, Self-employed	loyed 200.00 20		200.00
3/14/11	Dario Frommer Glendale, CA 91207	☑IND □COM □OTH □PTY □SCC	Attorney, Mayer Brown	100.00	100.00	100.00
3/18/11	Micki Harzmann Glendale, CA 91208	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.00
			SUBTOTAL\$	600.00		<u> </u>

Schedule A Summary

1. Amount received this period – itemized monetary contributions. 2000.00 (Include all Schedule A subtotals.) 1382.00 2. Amount received this period – unitemized monetary contributions of less than \$100\$

3. Total monetary contributions received this period.

3382.00 *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

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetany Contributions Possived

Type or print in ink.

SCHEDULE A (CONT.)

monetary	Contributions Received	to whole o		Statement covers period from February 20, 2011		FORM 460	
				through March	19, 2011	Page.	2 of 3
NAME OF FILER Mary Boge	Oleverale er Forgschool Board 2011			·		I.D. NU 01 <i>2</i> 4	MBER 48 1337929
DÁTE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
2/28/11	Harry Hull Glendale, CA 91202	☑IND □COM □OTH □PTY □SCC	Real Estate Broker, Hull Homes	100.00	100	.00	100.00
3/4/11	Wendy Kell La Crescenta, CA 91214	☑IND □COM □OTH □PTY □SCC	Event Planner, self-employed	100.00	100.00		100.00
3/9/11	Kathleen MacDonald La Crescenta, CA 91214	Z IND COM OTH PTY SCC	Homemaker	100.00	100	.00	100.00
3/14/11	Greg Manasserian Glendale, CA 91206	ZIND COM OTH PTY SCC	Inspector III, LA County Agricultural Commission	200.00	200	.00	200.00
3/14/11	Principals With Leadership, Inc. Duarte, CA 91010	□IND □COM ØOTH □PTY □SCC		200.00	200	.00	200.00
			SUBTOTAL	\$ 700.00		0	

*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Wonetary	Contributions Received	to whole o		from February 20, 2011		FORM 460	
				through March	19, 2011	Page_	3 of3
Mary Boge	Glendale er Forjschool Board 2011					1.D. NUI 01414	MBER 18 1337929
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD, NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR \ (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
3/18/11	Mary Lou Rhodes Glendale, CA 91206	☑IND □COM □OTH □PTY □SCC	Florist, Beverly Ann Flowers	100.00	100	.00	100.00
2/28/11	Lois Neil & Chakib Sambar La Canada, CA 91011	Z IND COM OTH PTY SCC	Rehirel	400.00	400	.00	400.00
3/14/11	Diane & George Serafino Glendale, CA 91208	☑IND □COM □OTH □PTY □SCC	Sey-employed retailer, Woof Dos Bowlique	100.00	100	.00	100.00
3/9/11	Lou & Douglas Stewart La Crescenta, CA 91214	IZIND COM OTH PTY SCC	Seef-employed retailer, Woof Dog Bowlique Consultant, Priot Learning Pardmers	100.00	100	.00	100.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC					
			SUBTOTAL	\$ 700.00			

*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule B – Pa	rt 1
Loans Received	

** If required.

Type or print in ink.

Amounts may be rounded

	SCHEDULE B-PART 1
Statement covers period	CALIFORNIA 4.00

Loans Received	ans Received to whole dollars. February 20, 2011				CALIFORNI FORM	CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE			-		through March	n 19, 2011	Page 1	of
Mary Boger For School Board 2011							1.D. NUMBER 014/48 133	37926
7 1						T	1 -	1747
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDMIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTIONS TO DATE
Donald & Mary Boger	Physician & Glendale			☐ PAID	4000 = 0			CALENDAR YEAR
Glendale, CA 91208	School Board member			\$FORGIVEN	_ s <u>1000.00</u>	0.00 %	ş <u>1000.00</u>	s 1000.00 PER ELECTION**
[†] ☑ IND □ COM □ OTH □ PTY □ SCC		\$	ş <u>1000.00</u>	s	4/30/11 DATE DUE	s0,00	3/15/11 DATE INCURRED	s_1000.00
				☐ PAID				CALENDAR YEAR
				\$FORGIVEN	_ s	RATE	s	SPER ELECTION ***
† IND COM OTH PTY SCC		\$	\$	s	DATE DUE	5	DATE INCURRED	s
				☐ PAID				CALENDAR YEAR
		,		\$FORGIVEN	_ \$	RATE %	\$	\$ PER ELECTION**
† IND COM OTH PTY SCC		\$	\$	\$	DATEDUE	s	DATE INCURRED	s
		SUBTOTALS \$		\$	\$	\$		
Schedule B Summary	· · ·					(Enter (e) on Schedule E, Line 3))	
1. Loans received this period	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	********************	10054844644468868888888888888888888888888	\$	1000.00	_		
(Total Column (b) plus unitemized loans	s of less than \$100.)			. —		[·	Contributor Codes	
Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that	0 paid or forgiven.)			\$	0.00	- 0	OTH - Other (e.g.,	PTY or SCC) business entity)
Net change this period. (Subtract Line Enter the net here and on the Summar.)	e 2 from Line 1.)	•		. NET \$	1000.00 (May be a negative number)] F	PTY — Political Part SCC — Small Contri	y
*Amounts forgiven or paid by another party also	must be reported on Schedule A.	٦						

Schedule C Nonmonetary Contributions Received

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

SCHEDULE C Statement covers period CALIFORNIA AGO Enhance 20, 2044

	from February 20, 2011	FORM TOO
SEE INSTRUCTIONS ON REVERSE	through March 19, 2011	Page1 _ of1
NAMEOFFILER Glerdale		LD, NUMBER
Mary Boger For School Board 2011		014748 1337929

FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)
Kaiwill USA Corp dba Minuteman Press Glendale, CA 91204	☐IND ☐COM ☑OTH ☐PTY ☐SCC		Discount on printing	150.00	150.00	150.00
Kaiwill USA Corp dba Minuteman Press Glendale, CA 91204	□IND □COM □DITH □PTY □SCC		Discount on printing	150.00	300.00	300.00
	□IND □COM □OTH □PTY □SCC			·		
	□IND □COM □OTH □PTY □SCC					
	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) Kaiwill USA Corp dba Minuteman Press Glendale, CA 91204 Kaiwill USA Corp dba Minuteman Press	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) Kaiwill USA Corp dba Minuteman Press Glendale, CA 91204 CODE * IND COM ZOTH PTY SCC IND COM ZOTH PTY SCC IND COM COM	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE * CODE *	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE * CODE *	ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER) CODE * CODE * COCUPATION AND EMPLOYED ENTER GOODS OR SERVICES FAIR MARKET VALUE 150.00 Discount on printing 150.00 FAIR MARKET VALUE TO DISCOUNT ON printing 150.00 FOR COMPICION ON PRINTING FOR COMPICION ON PRINTING FOR COMPICION ON PRINTING FAIR MARKET VALUE FOR COMPICION ON PRINTING FOR COMPICION ON FOR COMPICION ON PRINTING FOR COMPICION ON FOR COMPICION O	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * CONTRIBUTOR CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR CODE * CODE * CODE * CONTRIBUTOR CODE * CODE

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions. 300.00 (Include all Schedule C subtotals.) 2. Amount received this period -- unitemized nonmonetary contributions of less than \$100\$ 0.00 3. Total nonmonetary contributions received this period. 300.00

*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule E Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER Mary Boger For School Board 2011	Type or print Amounts may be to whole de	e rounded		Statement covers period from February 20, 2011 through March 19, 2011	Page	1 of 2
CODES: If one of the following codes accurately describes CMP campaign paraphemalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LTT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses lating survey resear	s	wise, describe the payment. RAD radio airtime and production returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and procandidate travel, lodging, an TRS staff/spouse travel, lodging, TSF transfer between committee VOT voter registration WEB Information technology costs	duction costs d meals and meals as of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IFCOMMITTEE, ALSO ENTER LD, NUMBER)	•	CODE (DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
AA1 Graphics & Signs Glendale, CA 91202		СМР				1810.88
Minuteman Press Glendale, CA 91204		LIT				329.26
Glendale News-Press Glendale, CA 91203		PRT				1104.00
* Payments that are contributions or independent expenditures r	nust also be summ	arized on S	chedule D.	SL	JBTOTAL\$	3244.14
Schedule E Summary 1. Itemized payments made this period. (Include all Schedule						3291.29
Itemized payments made this period. (Include all Schedule Unitemized payments made this period of under \$100						0.00
Total interest paid this period on loans. (Enter amount from						0.00

3291.29

Schedule E
(Continuation Sheet)
Payments Made

SCHEOULE E (CONT.)

(Continuation Sheet)	Type or print in ink. Amounts may be rounded			Statement covers period	CALIFORNIA 460
Payments Made	to whole do	ilars.	•	from February 20, 2011	FORM 400
SEE INSTRUCTIONS ON REVERSE				through March 19, 2011	Page 2 of 2
NAME OF FILER Glendale Mary Boger For School Board 2011					LD. NUMBER 014748 337929
CODES: If one of the following codes accurately design compalgn paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations FL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polking and s POS postage, del	munications d appearance uses lating survey resea ivery and m	ces	RAD radio airlime and producting returned contributions SAL campaign workers' salarients. TEL. t.v. or cable airlime and producting candidate travel, lodging, staff/spouse travel, lodging.	on costs es roduction costs and meals g, and meals ees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR E	DESCRIPTION OF PAYMENT	AMOUNT PAID
Citibank, N.A. San Francisco, CA 94126-6892		OFC			47.15

SUBTOTAL \$

47.15

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