



FEDERAL ELECTION COMMISSION  
WASHINGTON DC 20463

THIS IS THE END OF MUR # 2178

DATE FILMED 7/29/87 CAMERA NO. 2

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## FEDERAL ELECTION COMMISSION

Routing Slips, Internal reports and Comments  
(12 Day Report, Pre-Brief). Proposed BAD REAI's

The above-described material was removed from this file pursuant to the following exemption provided in the Freedom of Information Act, 5 U.S.C. Section 552(b):

- |  |   |
|--|---|
| <input type="checkbox"/> (1) Classified Information                                | <input type="checkbox"/> (6) Personal privacy                             |
| <input checked="" type="checkbox"/> (2) Internal rules and practices               | <input type="checkbox"/> (7) Investigatory files                          |
| <input type="checkbox"/> (3) Exempted by other statute                             | <input type="checkbox"/> (8) Banking Information                          |
| <input type="checkbox"/> (4) Trade secrets and commercial or financial information | <input type="checkbox"/> (9) Well Information (geographic or geophysical) |
| <input checked="" type="checkbox"/> (5) Internal Documents                         |   |

Signed Beverly B. Kramer  
 date 4-13-87

FEC 9-21-77

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Wally Herger for Congress Committee ) MUR 2178  
and Jerry Crippen, Treasurer )  
Friends of Wally Herger for Assembly )  
and Jerry Crippen, Treasurer )

CERTIFICATION

I, Marjorie W. Emmons, recording secretary for the Federal Election Commission executive session of April 7, 1987, do hereby certify that the Commission decided by a vote of 6-0 to take the following actions in MUR 2178:

1. Find no probable cause to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).
2. Find no probable cause to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).
3. Find probable cause to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 and take no further action.

(continued)

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Federal Election Commission  
Certification for MUR 2178  
April 7, 1987

Page 2

4. Close the file.
5. Approve and send the letters attached to the General Counsel's report dated March 30, 1987.

Commissioners Aikens, Elliott, Josefiak, McDonald, McGarry, and Thomas voted affirmatively for the decision.

Attest:

4-8-87

Date

Marjorie W. Emmons

Marjorie W. Emmons  
Secretary of the Commission

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

April 10, 1987

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger for Congress  
Friends of Wally Herger for  
Assembly  
Jerry Crippen, as treasurer

Dear Mr. Herge:

This is to advise you that after an investigation was conducted, the Commission concluded on April 7, 1987, that there is no probable cause to believe that your clients, the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a). With regard to your clients, the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, the Commission determined that there is no probable cause to believe they violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a). Additionally, the Commission found probable cause to believe the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12. However, after considering the circumstances of this matter, the Commission determined to take no further action.

Accordingly, the file in this matter, numbered MUR 2178, has been closed. This matter will become part of the public record within 30 days. Should you wish to submit any factual or legal materials to appear on the public record, please do so within 10 days.

If you have any questions, contact Beverly Kramer, the staff member assigned to handle this matter, at (202) 376-5690.

Sincerely,

Lawrence M. Noble  
Acting General Counsel

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

April 10, 1987

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Donald F. Gallino  
4784 Alta Camino  
Redding, CA 96002

RE: MUR 2178

Dear Mr. Gallino:

This is in reference to the complaint you filed with the Commission on May 22, 1986, concerning Mr. Wally Herger, Friends of Wally Herger for Assembly, Wally Herger for Congress Committee and Jerry Crippen, as treasurer of both committees.

With respect to Mr. Wally Herger, the Commission determined on September 30, 1986, that there was no reason to believe the respondent violated the Federal Election Campaign Act of 1971, as amended ("the Act").

As to the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, the Commission determined, based on your complaint, that there was reason to believe these respondents violated section 441b(a) of the Act and instituted an investigation of this matter. After an investigation was conducted, the Commission concluded on April 7, 1987, that there was no probable cause to believe that the respondents violated section 441b(a) of the Act.

Regarding Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, the Commission determined that there was reason to believe the respondents violated sections 433(a), 434 and 441b(a) of the Act and Commission Regulations 11 C.F.R. §§ 102.6(a) and 104.12. After an investigation was conducted, the Commission concluded on April 7, 1987, that there was probable cause to believe that the respondents violated sections 433(a) and 434 of the Act and Commission Regulation 11 C.F.R. § 104.12. However, after considering the circumstances of this matter, the Commission determined to take no further action. Additionally, the Commission determined on April 7, 1987 that there was no probable cause to believe the respondents violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).

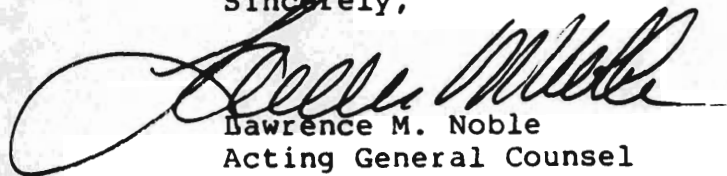
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Letter to Donald F. Gallino  
Page 2

Accordingly, the Commission determined on April 7, 1987, to close the file in this matter, numbered MUR 2178. The Federal Election Campaign Act allows a complainant to seek judicial review of the Commission's dismissal of this action. See 2 U.S.C. § 437g(a)(8).

Should further information come to your attention which you believe establishes a violation of the Act, please contact Beverly Kramer, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,



Lawrence M. Noble  
Acting General Counsel

Enclosure

First General Counsel's Report  
General Counsel's Briefs

37040352919



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM

TO: Office of the Commission Secretary  
FROM: Office of General Counsel *Coy*  
DATE: March 30, 1987  
SUBJECT: MUR 2178 - General Counsel's Report

The attached is submitted as an Agenda document  
for the Commission Meeting of Tuesday, April 7, 1987.

Open Session \_\_\_\_\_  
Closed Session XX

CIRCULATIONS

48 Hour Tally Vote [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
24 Hour No Objection [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
Information [ ]  
Sensitive [ ]  
Non-Sensitive [ ]

Other kxj

Sensitive - circulate on

blue paper

DISTRIBUTION

Compliance kxj  
Audit Matters [ ]  
Litigation [ ]  
Closed MUR Letters [ ]  
Status Sheets [ ]  
Advisory Opinions [ ]  
Other (see distribution below) [ ]



EXECUTIVE SESSION  
SENSITIVE

APR 07 1987

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
Wally Herger for Congress Committee and ) MUR 2178  
Jerry Crippen, Treasurer )  
Friends of Wally Herger for Assembly )  
and Jerry Crippen, Treasurer )

GENERAL COUNSEL'S REPORT

I. BACKGROUND

This matter originated from a complaint filed by Don Gallino on May 22, 1986. Acting on the complaint, the Commission determined on September 30, 1986, that there was reason to believe the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a). Additionally, the Commission determined that there was reason to believe the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated sections 433(a), 434 and 441b(a) of the Act and Commission Regulations 11 C.F.R. § 102.6(a) and § 104.12.

A General Counsel's Brief recommending a finding of no probable cause to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) was mailed on March 3, 1987. In addition, a General Counsel's Brief in the matter of Friends of Wally Herger for Congress and Jerry Crippen, as treasurer, was mailed on March 3, 1987. The General Counsel's Brief recommended a finding of no probable cause to believe these respondents violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6. Also with respect to these respondents, the General Counsel's Brief recommended that the Commission find probable cause to believe that violations of

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OFFICE OF THE  
FEDERAL ELECTION  
COMMISSION SECRETARY

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2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 occurred and take no further action. At this writing no response has been received from the respondents.

## II. LEGAL ANALYSIS

### A. Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer

See the General Counsel's Brief which was circulated to the Commission on March 3, 1987.

### B. Wally Herger for Congress Committee and Jerry Crippen, as treasurer

See the General Counsel's Brief which was circulated to the Commission on March 3, 1987.

## III. RECOMMENDATIONS

1. Find no probable cause to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).
2. Find no probable cause to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).
3. Find probable cause to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 and take no further action.
4. Close the file.
5. Approve and send the attached letters.

Date

3/30/87

Lawrence M. Noble  
Acting General Counsel

Attachments  
Proposed letters

87040652922





FEDERAL ELECTION COMMISSION

WASHINGTON D.C. 20463

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger for Congress  
Friends of Wally Herger for  
Assembly  
Jerry Crippen, as treasurer

Dear Mr. Herge:

This is to advise you that after an investigation was conducted, the Commission concluded on , 1987, that there is no probable cause to believe that your clients, the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a). With regard to your clients, the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, the Commission determined that there is no probable cause to believe they violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a). Additionally, the Commission found probable cause to believe the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12. However, after considering the circumstances of this matter, the Commission determined to take no further action.

Accordingly, the file in this matter, numbered MUR 2178, has been closed. This matter will become part of the public record within 30 days. Should you wish to submit any factual or legal materials to appear on the public record, please do so within 10 days.

If you have any questions, contact Beverly Kramer, the staff member assigned to handle this matter, at (202) 376-5690.

Sincerely,

Lawrence M. Noble  
Acting General Counsel



FEDERAL ELECTION COMMISSION  
WASHINGTON D.C. 20463

CERTIFIED MAIL  
RETURN RECEIPT REQUESTED

Donald F. Gallino  
4784 Alta Camino  
Redding, CA 96002

RE: MUR 2178

Dear Mr. Gallino:

This is in reference to the complaint you filed with the Commission on May 22, 1986, concerning Mr. Wally Herger, Friends of Wally Herger for Assembly, Wally Herger for Congress Committee and Jerry Crippen, as treasurer of both committees.

With respect to Mr. Wally Herger, the Commission determined on September 30, 1986, that there was no reason to believe the respondent violated the Federal Election Campaign Act of 1971, as amended ("the Act").

As to the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, the Commission determined, based on your complaint, that there was reason to believe these respondents violated section 441b(a) of the Act and instituted an investigation of this matter. After an investigation was conducted, the Commission concluded on , 1987, that there was no probable cause to believe that the respondents violated section 441b(a) of the Act.

Regarding Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, the Commission determined that there was reason to believe the respondents violated sections 433(a), 434 and 441b(a) of the Act and Commission Regulations 11 C.F.R. §§ 102.6(a) and 104.12. After an investigation was conducted, the Commission concluded on , 1987, that there was probable cause to believe that the respondents violated sections 433(a) and 434 of the Act and Commission Regulation 11 C.F.R. § 104.12. However, after considering the circumstances of this matter, the Commission determined to take no further action. Additionally, the Commission determined on , 1987 that there was no probable cause to believe the respondents violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).

Letter to Donald F. Gallino  
Page 2

Accordingly, the Commission determined on 1987, to close the file in this matter, numbered MUR 2178. The Federal Election Campaign Act allows a complainant to seek judicial review of the Commission's dismissal of this action. See 2 U.S.C. § 437g(a)(8).

Should further information come to your attention which you believe establishes a violation of the Act, please contact Beverly Kramer, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,

Lawrence M. Noble  
Acting General Counsel

Enclosure

First General Counsel's Report  
General Counsel's Briefs



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

3-3-87

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
2801 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: Wally Herger for Congress  
Committee and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

Based on a complaint filed with the Commission on May 22, 1986, and information supplied by you, the Commission determined on September 30, 1986, that there was reason to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a), a provision of the Federal Election Campaign Act of 1971, as amended ("the Act") and instituted an investigation of this matter.

After considering all the evidence available to the Commission, the Office of General Counsel is prepared to recommend that the Commission find no probable cause to believe that a violation has occurred. The Commission may or may not approve the General Counsel's Recommendation.

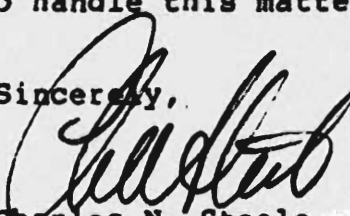
Submitted for your review is a brief stating the position of the General Counsel on the legal and factual issues of the case. Within fifteen days of your receipt of this notice, you may file with the Secretary of the Commission a brief (10 copies if possible) stating your clients' position on the issues and replying to the brief of the General Counsel. Three copies of such brief should also be forwarded to the Office of the General Counsel, if possible. The General Counsel's brief and any brief which you submit will be considered by the Commission before proceeding to a vote of no probable cause to believe a violation has occurred.

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Letter to J. Curtis Herge  
Page 2

Should you have any questions, please contact Beverly  
Kramer, the staff member assigned to handle this matter, at (202)  
376-5690.

Sincerely,



Charles N. Steele  
General Counsel

Enclosure  
Brief

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Wally Herger for Congress ) MUR 2178  
Committee and Jerry Crippen, )  
Treasurer )

GENERAL COUNSEL'S BRIEF

I. STATEMENT OF THE CASE

On May 22, 1986, Don Gallino filed a complaint with the Commission alleging, inter alia, that the Wally Herger for Congress Committee ("the Federal Committee") and Jerry Crippen, as its treasurer, violated the Federal Election Campaign Act of 1971, as amended ("the Act").

Acting on the complaint, the Commission determined on September 30, 1986, that there was reason to believe the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

Notification of the Commission's action was mailed to the Respondents on October 7, 1986. At the Respondents' request, the General Counsel's Office granted an extension of 20 days to respond to the Commission's findings and on November 12, 1986, received the Respondents' reply.

II. LEGAL ANALYSIS

1. Factual Basis for Reason to Believe Finding

The Commission determined there was reason to believe that the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly ("the Assembly Committee") which

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contained contributions from corporations and other sources that appeared to be impermissible in connection with a Federal election. The Commission's finding was based on allegations in the complaint that between January 13, 1986, and March 11, 1986, the Federal Committee accepted eight transfers from the Assembly Committee, totalling \$59,377, and that these transfers were made from campaign funds containing impermissible contributions under the Act.

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The Commission's determination that the Respondents violated 2 U.S.C. § 441b(a) was predicated upon an analysis of the Assembly Committee's campaign disclosure reports filed with the State of California and submitted with the complaint. The analysis assumed that the Assembly Committee maintained a single campaign depository into which all receipts disclosed in its state reports were deposited and all disbursements, including the transfers to the Federal Committee, were made. Using the accounting theory of last in, first out, the analysis revealed that at the time of its transfers to the Federal Committee, the Assembly Committee's cash on hand contained insufficient "clean funds" i.e., permissible contributions under the Act, and that impermissible funds of between \$11,154 and \$15,716 may have been transferred to the Federal Committee.

## 2. The Response

The Federal Committee disputes the Commission's finding that a violation of 2 U.S.C. § 441b(a) occurred. The Federal Committee asserts that the Commission's determination,

predicated upon an analysis of the Assembly Committee's state reports, failed to take into account the fact that the Assembly Committee had established a segregated account, separate from its regular account, and that the transfers to the Federal Committee were made from its segregated account. The response claims that the state reports upon which the Commission's analysis relied, accounted for all contributions received without regard to which account they were deposited in and, thus, do not provide proper guidance in analyzing this matter.

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The response explains that in November, 1984, in anticipation of the possibility that Mr. Herger might become a candidate for the United States House of Representatives, the Assembly Committee made an informal inquiry of the Commission as to the method of making transfers from the campaign committee of a state candidate to that candidate's federal principal campaign committee. The response claims that as a consequence of that inquiry, the Assembly Committee established a separate account, known as "Friends of Wally Herger for Assembly-Individual Account" ("the Individual Account") into which only contributions which were lawful under the Act were to be deposited.

According to the response, in April, 1985, before any transfer was made to the Federal Committee, it was discovered that campaign volunteers, not usually assigned to making deposits, had made some errors and that some contributions not permitted under the Act had been deposited into the Individual Account. The response claims that as a consequence, a person



more accustomed to handling financial matters was assigned to review and manage the Individual Account. According to the response, on April 23, 1985, all sums that appeared not to be lawful under the Act as to the source and amount, or where the source and/or amount could not be definitively determined, were transferred from the Individual Account to the regular account. The response acknowledges that subsequent to April 23, 1985, a few isolated contributions that should have been deposited into the regular account were inadvertently deposited into the Individual Account. It appears, however, based on documentation presented, that sums equal to the amount of impermissible contributions were transferred to the regular account prior to the time any transfers were made to the Federal Committee.

The documentation submitted with the response is a computer analysis of all deposits to and withdrawals from the Individual Account. The response states that in 1986, when Mr. Herger became a Federal candidate and Mr. Crippen became treasurer of the Federal Committee, Mr. Crippen prepared the computer analysis. The response claims that using the accounting theory of first in, first out, Mr. Crippen analyzed the source and amount of each contribution and determined that at no time were funds transferred from the Individual Account to the Federal Committee which were not permissible under the Act. The computer analysis submitted with the response provides the dates and amounts of all deposits with withdrawals and identifies the source of funds deposited under column headings reading

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"Individual," "Corporate" etc. The response states that the specific sources and amounts of contributions transferred to the Federal Committee were reported in the April 15 Quarterly and Termination report of the Assembly Committee.

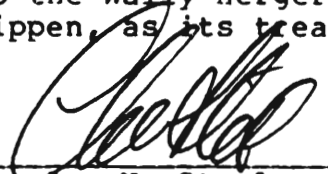
## 2. Analysis

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The Federal Committee's response reveals for the first time the existence of a segregated account into which, for the most part, only lawful contributions were deposited and from which transfers were made from the Assembly Committee to the Federal Committee. Further, the response provides a summary computer analysis of the source and amounts deposited in the segregated account and the amounts withdrawn. A review of this material indicates that at the time transfers were made to the Federal Committee, the segregated account contained sufficient "clean funds" i.e., permissible contributions under the Act, with which to make transfers totalling \$59,377 to the Federal Committee. Based on the analysis of this new information, the Office of the General Counsel recommends that the Commission find no probable cause to believe the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

### III. GENERAL COUNSEL'S RECOMMENDATION

1. Find no probable cause to believe the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).
2. Close the file as it pertains to the Wally Herger for Congress Committee and Jerry Crippen, as its treasurer.

3 March 1987  
Date

  
Charles N. Steele  
General Counsel



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

3-3-87

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
2804 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Friends of Wally Herges for  
Assembly and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

Based on a complaint filed with the Commission on May 22, 1986, and information supplied by you, the Commission determined on September 30, 1986, that there was reason to believe that Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434, § 441b(a) and 11 C.F.R. § 102.6(a) and 104.12, and instituted an investigation of this matter.

After considering all the evidence available to the Commission, the Office of General Counsel is prepared to recommend that the Commission find no probable cause to believe that violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) occurred. In addition, this Office is prepared to recommend that the Commission find probable cause to believe violations of 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 occurred and take no further action. The Commission may or may not approve the General Counsel's recommendations.

Submitted for your review is a brief stating the position of the General Counsel on the legal and factual issues of the case. Within fifteen days of your receipt of this notice, you may file with the Secretary of the Commission a brief (10 copies if possible) stating your clients' position on the issues and replying to the brief of the General Counsel. Three copies of such brief should also be forwarded to the Office of General Counsel, if possible. The General Counsel's brief and any brief which you submit will be considered by the Commission before proceeding to a vote of probable cause or no probable cause to believe a violation has occurred.

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Should you have any questions, please contact Beverly Kramer the staff member assigned to handle this matter, at (202) 376-5690.

Sincerely,



Charles N. Steele  
General Counsel

Enclosure  
Brief

87040652934

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Friends of Wally Herger for ) MUR 2178  
Assembly and Jerry Crippen, )  
Treasurer )

GENERAL COUNSEL'S BRIEF

I. STATEMENT OF THE CASE

On May 22, 1986, Don Gallino filed a complaint with the Commission alleging, inter alia, that Friends of Wally Herger for Assembly ("the Assembly Committee") and Jerry Crippen, as its treasurer, violated the Federal Election Campaign Act of 1971, as amended ("the Act").

Acting on the complaint, the Commission determined on September 30, 1986, that there was reason to believe the Assembly Committee and Jerry Crippen, as treasurer, violated sections 433(a), 434 and 441b(a) of the Act and Commission Regulations 11 C.F.R. § 102.6(a) and § 104.12.

Notification of the Commission's actions was mailed to the Respondents on October 7, 1986. At the Respondents' request, the General Counsel's Office granted an extension of 20 days to respond to the Commission's findings and on November 12, 1986, received the Respondents' reply.

II. LEGAL ANALYSIS

A. Violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a)

1. Factual Basis for Reason to Believe Finding

The Commission determined there was reason to believe that the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) by transferring to

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the Wally Herger for Congress Committee ("the Federal Committee") campaign funds that included contributions from corporations and other sources that appeared to be impermissible under the Act. The Commission's finding was based on allegations in the complaint that between January 13, 1986, and March 11, 1986, the Assembly Committee made eight transfers, totalling \$59,377, to the Federal Committee from funds that included impermissible contributions under the Act.

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The Commission's determination that the Respondents violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) was predicated upon an analysis of the Assembly Committee's campaign disclosure reports filed with the State of California and submitted with the complaint. The analysis assumed that the Assembly Committee maintained a single campaign depository into which all receipts disclosed in its state reports were deposited and all disbursements, including the transfers to the Federal Committee, were made. Using the accounting theory of last in, first out, the analysis revealed that at the time of its transfers to the Federal Committee, the Assembly Committee's cash on hand contained insufficient "clean funds" i.e., permissible contributions under the Act, and that impermissible funds of between \$11,154 and \$15,716 may have been transferred to the Federal Committee.

Further, the Commission determined there was reason to believe that the Assembly Committee and Jerry Crippen, as

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treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from California Financial Services Corporation, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, Mobilehome Parks PAC, California Pharmacists PAC, California Chiropractic PAC, California Hospitals PAC, AG Council of California PAC and California Medical Association PAC. This determination was based on an analysis of the Assembly committee's state reports. The state reports revealed that the Assembly Committee accepted contributions totalling \$5,500 from these corporations and state political committees after the date on which it became a political committee under the Act.

## 2. The Assembly Committee's Response

The Assembly Committee disputes the Commission's findings that violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) occurred. The Assembly Committee asserts that the Commission's determinations, predicated upon an analysis of its state reports, failed to take into account the fact that the Assembly Committee had established a segregated account, separate from its regular account, and that the transfers to the Federal Committee were made from its segregated account. The response claims that the state reports upon which the Commission's analysis relied, accounted for all contributions received without regard to which account they were deposited in and, thus, do not provide proper guidance in analyzing this matter.



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The response explains that in November, 1984, in anticipation of the possibility that Mr. Herger might become a candidate for the United States House of Representatives, the Assembly Committee made an informal inquiry of the Commission as to the method of making transfers from the campaign committee of a state candidate to that candidate's federal principal campaign committee. The response claims that as a consequence of that inquiry, the Assembly Committee established a separate account, known as "Friends of Wally Herger for Assembly-Individual Account" ("the Individual Account") into which only contributions which were lawful under the Act were to be deposited.

According to the response, in April, 1985, before any transfer was made to the Federal Committee, it was discovered that campaign volunteers, not usually assigned to making deposits, had made some errors and that some contributions not permitted under the Act had been deposited into the Individual Account. The response claims that as a consequence, a person more accustomed to handling financial matters was assigned to review and manage the Individual Account. According to the response, on April 23, 1985, all sums that appeared not to be lawful under the Act as to the source and amount, or where the source and/or amount could not be definitively determined, were transferred from the Individual Account to the regular account. The response acknowledges that subsequent to April 23, 1985, a few isolated contributions that should have been deposited into the regular



account were inadvertently deposited into the Individual Account. It appears, however, based on documentation presented, that sums equal to the amount of impermissible contributions were transferred to the regular account prior to the time any transfers were made to the Federal Committee.

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The documentation submitted with the response is a computer analysis of all deposits to and withdrawals from the Individual Account. The response states that in 1986, when Mr. Herger became a Federal candidate and Mr. Crippen became treasurer of the Federal Committee, Mr. Crippen prepared the computer analysis. The response claims that using the accounting theory of first in, first out, Mr. Crippen analyzed the source and amount of each contribution and determined that at no time were funds transferred from the Individual Account to the Federal Committee which were not permissible under the Act. The computer analysis submitted with the response provides the dates and amounts of all deposits and withdrawals and identifies the source of funds deposited under column headings reading "Individual," "Corporate" etc. The response states that the specific sources and amounts of contributions transferred to the Federal Committee were reported in the April 15 Quarterly and Termination report of the Assembly Committee.

The Assembly Committee's response also disputes the Commission's allegation that it received contributions from four corporations and seven state political committees subsequent to

becoming a political committee under the Act. The response claims that the subject contributions were deposited into the Assembly Committee's regular account and not its Individual Account and that no impermissible contributions were deposited into the Individual Account during the period in which it was a federal political committee under the Act. The computer analysis submitted with the response appears to substantiate the Assembly Committee's claims in that it reflects that the only deposits made subsequent to January 13, 1986 were composed of individual contributions and interest payments.

### 3. Analysis

The Assembly Committee's response reveals for the first time the existence of a segregated account into which, for the most part, only lawful contributions were deposited and from which transfers were made to the Federal Committee. Further, the response provides a summary computer analysis of the source and amounts deposited in the segregated account and the amounts withdrawn. A review of this material indicates that at the time transfers were made to the Federal Committee, the segregated account contained sufficient "clean funds" i.e., permissible contributions under the Act, with which to make transfers totalling \$59,377 to the Federal Committee. Based on the analysis of this new information, the Office of the General Counsel recommends that the Commission find no probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer,

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violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) with regard to transfers made by the Assembly Committee to the Federal Committee.

Additionally, the Assembly Committee's response reveals for the first time that contributions received from four corporations and seven state political committees were deposited into the Assembly Committee's regular account and not its segregated account from which transfers were made to the Federal Committee. In view of this new information, this Office recommends that the Commission find no probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

**B. Violations of 2 U.S.C. § 434 and 11 C.F.R. § 104.12**

**1. Factual Basis for Reason to Believe Finding**

The Commission determined that the Assembly Committee violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the sources of its cash on hand at the time of registration and by failing to disclose all receipts and disbursements from the date it became a political committee under the Act. This determination rested upon three major assumptions: 1) that the Assembly Committee became a political committee subject to the registration and reporting requirements of the Act on January 13, 1986, the date it transferred funds in excess of \$1,000 to the Federal Committee, 2) that the Assembly Committee maintained a single campaign depository into which all receipts were deposited and from which all disbursements were made; and 3) that the Assembly Committee's state reports

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contained accurate and complete information concerning the deposits and disbursements made from the single account. Based on these initial premises, an analysis of the Assembly Committee's state and Federal Reports indicated that it had understated the amount of its cash on hand at the time of registration by at least \$7,000 and that it had failed to identify contributions received from corporations, state political committee's and trade associations. The analysis also indicated that the Assembly Committee had failed to disclose all non-federal activity from the date it became a political committee under the Act, including \$7,250 in contributions, other receipts of \$14,060 and \$11,129 in expenditures.

## 2. Assembly Committee's Response

The Assembly Committee's response does not specifically address the Commission's finding regarding violations of 2 U.S.C. § 434 and 11 C.F.R. § 104.12. However, as discussed infra, the Assembly Committee's response has revealed that its state reports do not provide accurate guidance for analysis of this matter as the reports disclose the combined activity of the Committee's regular account as well as its segregated account from which transfers were made to the Federal Committee. For proper guidance, the Assembly Committee submits a summary computer analysis of all transactions occurring solely with regard to its segregated account.

### 3. Analysis

Pursuant to 2 U.S.C. § 434 and Commission Regulation 11 C.F.R. § 104.12, political committees which have cash on hand at the time of registration are required to disclose in their first report the source of such funds. The cash on hand balance is assumed to be composed of those contributions most recently received.

A review of the Assembly Committee's computer summary of transactions occurring with regard to its Individual Account reveals a cash on hand balance of \$55,856.88 at the time of registration. According to the computer summary, this cash on hand was composed of individual contributions totalling \$51,906.25 and corporate contributions totalling \$3,950.63. A sum equal to the amount of corporate contributions included in its cash on hand was subsequently transferred to the Assembly Committee's regular account, according to the computer summary.

The Assembly Committee's first report filed with the Commission fails to disclose the corporate contributions included in its cash on hand at the time of registration. Moreover, the report fails to disclose a transfer of an amount equal to these corporate contributions from the Individual Account to the regular account. Accordingly, this Office recommends that the Commission find probable cause to believe the Assembly Committee violated the reporting requirements of 2 U.S.C. § 434 and

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11 C.F.R. § 104.12. The Office of the General Counsel further recommends, however, that the Commission take no further action in view of the fact that the Assembly Committee has terminated and for the reason that it appears the Committee may have misunderstood the reporting provisions as requiring only the disclosure of the source and amount of contributions composing its transfers to the Federal Committee. The Committee's first report discloses a cash on hand balance equal to the amount of funds transferred to the Federal Committee and provides an itemization of the individual contributions that composed the transfers.

**C. Violation of 2 U.S.C. § 433(a)**

**1. Factual Basis for Reason to Believe Finding**

The Commission determined there was reason to believe that the Assembly Committee violated 2 U.S.C. § 433(a) by failing to register in a timely manner. This determination was based on allegations in the complaint that the Assembly Committee became a political committee under the Act on January 13, 1986, resulting from its transfer of more than \$1,000 to the Federal Committee, but that the Assembly Committee failed to register until May 30, 1986--137 days after it became a political committee under the Act.

**2. Assembly Committee's Response**

The Respondents assert that they exercised best efforts to determine the specific procedure to be followed in making

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transfers from the campaign committee of a state candidate to that candidate's federal campaign committee, but that they did not become aware of the need to file a separate Statement of Organization until May, 1986.

### 3. Analysis


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A review of the public record substantiates the Assembly Committee's claim of having utilized best efforts to comply with the Act's disclosure requirements. Specifically, the public record reveals that although the Assembly Committee did not file its statement of organization until May, 1986, it nevertheless timely filed its 1986 April Quarterly Report disclosing transfers to the Federal Committee. Moreover, the affiliation of the Assembly Committee to the Federal Committee was timely disclosed by Wally Herger in an amendment to his statement of candidacy as well as by the Federal Committee in an amendment to its statement of organization. For the foregoing reasons, this Office recommends that the Commission find probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) and take no further action.

### III. GENERAL COUNSEL'S RECOMMENDATIONS

1. Find no probable cause to believe Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).
2. Find probable cause to believe Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated of 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 and take no further action.

3. Close the file as it pertains to Friends of Wally Herger for Assembly and Jerry Crippen, as its treasurer.

3 March 1987  
Date

  
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Charles N. Steele  
General Counsel

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**SENSITIVE**



**FEDERAL ELECTION COMMISSION**  
WASHINGTON, D.C. 20463

**MEMORANDUM**

March 3, 1987

**TO:** The Commission

**FROM:** Charles N. Steele  
General Counsel *CS*

**SUBJECT:** MUR 2178

Attached for the Commission's review are briefs stating the position of the General Counsel on the legal and factual issues of the above-captioned matter. Copies of these briefs and letters notifying the respondents of the General Counsel's intent to recommend to the Commission findings of probable cause and no probable cause to believe were mailed on March 3, 1987. Following receipt of the Respondents' replies to these notices, this Office will make a further report to the Commission.

**Attachments**

1. Briefs
2. Letters to Respondents

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
2801 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: Wally Herger for Congress  
Committee and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

Based on a complaint filed with the Commission on May 22, 1986, and information supplied by you, the Commission determined on September 30, 1986, that there was reason to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a), a provision of the Federal Election Campaign Act of 1971, as amended ("the Act") and instituted an investigation of this matter.

After considering all the evidence available to the Commission, the Office of General Counsel is prepared to recommend that the Commission find no probable cause to believe that a violation has occurred. The Commission may or may not approve the General Counsel's Recommendation.

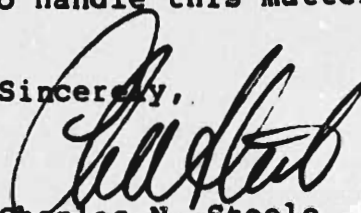
Submitted for your review is a brief stating the position of the General Counsel on the legal and factual issues of the case. Within fifteen days of your receipt of this notice, you may file with the Secretary of the Commission a brief (10 copies if possible) stating your clients' position on the issues and replying to the brief of the General Counsel. Three copies of such brief should also be forwarded to the Office of the General Counsel, if possible. The General Counsel's brief and any brief which you submit will be considered by the Commission before proceeding to a vote of no probable cause to believe a violation has occurred.

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Letter to J. Curtis Herge  
Page 2

Should you have any questions, please contact Beverly  
Kramer, the staff member assigned to handle this matter, at (202)  
376-5690.

Sincerely,



Charles N. Steele  
General Counsel

Enclosure  
Brief

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Wally Herger for Congress ) MUR 2178  
Committee and Jerry Crippen, )  
Treasurer )

GENERAL COUNSEL'S BRIEF

I. STATEMENT OF THE CASE

On May 22, 1986, Don Gallino filed a complaint with the Commission alleging, inter alia, that the Wally Herger for Congress Committee ("the Federal Committee") and Jerry Crippen, as its treasurer, violated the Federal Election Campaign Act of 1971, as amended ("the Act").

Acting on the complaint, the Commission determined on September 30, 1986, that there was reason to believe the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

Notification of the Commission's action was mailed to the Respondents on October 7, 1986. At the Respondents' request, the General Counsel's Office granted an extension of 20 days to respond to the Commission's findings and on November 12, 1986, received the Respondents' reply.

II. LEGAL ANALYSIS

1. Factual Basis for Reason to Believe Finding

The Commission determined there was reason to believe that the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly ("the Assembly Committee") which

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contained contributions from corporations and other sources that appeared to be impermissible in connection with a Federal election. The Commission's finding was based on allegations in the complaint that between January 13, 1986, and March 11, 1986, the Federal Committee accepted eight transfers from the Assembly Committee, totalling \$59,377, and that these transfers were made from campaign funds containing impermissible contributions under the Act.

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The Commission's determination that the Respondents violated 2 U.S.C. § 441b(a) was predicated upon an analysis of the Assembly Committee's campaign disclosure reports filed with the State of California and submitted with the complaint. The analysis assumed that the Assembly Committee maintained a single campaign depository into which all receipts disclosed in its state reports were deposited and all disbursements, including the transfers to the Federal Committee, were made. Using the accounting theory of last in, first out, the analysis revealed that at the time of its transfers to the Federal Committee, the Assembly Committee's cash on hand contained insufficient "clean funds" i.e., permissible contributions under the Act, and that impermissible funds of between \$11,154 and \$15,716 may have been transferred to the Federal Committee.

## 2. The Response

The Federal Committee disputes the Commission's finding that a violation of 2 U.S.C. § 441b(a) occurred. The Federal Committee asserts that the Commission's determination,

predicated upon an analysis of the Assembly Committee's state reports, failed to take into account the fact that the Assembly Committee had established a segregated account, separate from its regular account, and that the transfers to the Federal Committee were made from its segregated account. The response claims that the state reports upon which the Commission's analysis relied, accounted for all contributions received without regard to which account they were deposited in and, thus, do not provide proper guidance in analyzing this matter.

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The response explains that in November, 1984, in anticipation of the possibility that Mr. Herger might become a candidate for the United States House of Representatives, the Assembly Committee made an informal inquiry of the Commission as to the method of making transfers from the campaign committee of a state candidate to that candidate's federal principal campaign committee. The response claims that as a consequence of that inquiry, the Assembly Committee established a separate account, known as "Friends of Wally Herger for Assembly-Individual Account" ("the Individual Account") into which only contributions which were lawful under the Act were to be deposited.

According to the response, in April, 1985, before any transfer was made to the Federal Committee, it was discovered that campaign volunteers, not usually assigned to making deposits, had made some errors and that some contributions not permitted under the Act had been deposited into the Individual Account. The response claims that as a consequence, a person



more accustomed to handling financial matters was assigned to review and manage the Individual Account. According to the response, on April 23, 1985, all sums that appeared not to be lawful under the Act as to the source and amount, or where the source and/or amount could not be definitively determined, were transferred from the Individual Account to the regular account. The response acknowledges that subsequent to April 23, 1985, a few isolated contributions that should have been deposited into the regular account were inadvertently deposited into the Individual Account. It appears, however, based on documentation presented, that sums equal to the amount of impermissible contributions were transferred to the regular account prior to the time any transfers were made to the Federal Committee.

The documentation submitted with the response is a computer analysis of all deposits to and withdrawals from the Individual Account. The response states that in 1986, when Mr. Herger became a Federal candidate and Mr. Crippen became treasurer of the Federal Committee, Mr. Crippen prepared the computer analysis. The response claims that using the accounting theory of first in, first out, Mr. Crippen analyzed the source and amount of each contribution and determined that at no time were funds transferred from the Individual Account to the Federal Committee which were not permissible under the Act. The computer analysis submitted with the response provides the dates and amounts of all deposits with withdrawals and identifies the source of funds deposited under column headings reading

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"Individual," "Corporate" etc. The response states that the specific sources and amounts of contributions transferred to the Federal Committee were reported in the April 15 Quarterly and Termination report of the Assembly Committee.

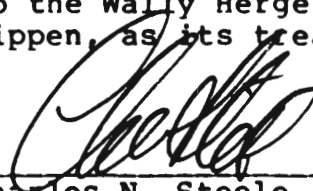
## 2. Analysis

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The Federal Committee's response reveals for the first time the existence of a segregated account into which, for the most part, only lawful contributions were deposited and from which transfers were made from the Assembly Committee to the Federal Committee. Further, the response provides a summary computer analysis of the source and amounts deposited in the segregated account and the amounts withdrawn. A review of this material indicates that at the time transfers were made to the Federal Committee, the segregated account contained sufficient "clean funds" i.e., permissible contributions under the Act, with which to make transfers totalling \$59,377 to the Federal Committee. Based on the analysis of this new information, the Office of the General Counsel recommends that the Commission find no probable cause to believe the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

## III. GENERAL COUNSEL'S RECOMMENDATION

1. Find no probable cause to believe the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).
2. Close the file as it pertains to the Wally Herger for Congress Committee and Jerry Crippen, as its treasurer.

3 March 1987  
Date

  
Charles N. Steele  
General Counsel



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
2804 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Friends of Wally Herges for  
Assembly and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

Based on a complaint filed with the Commission on May 22, 1986, and information supplied by you, the Commission determined on September 30, 1986, that there was reason to believe that Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434, § 441b(a) and 11 C.F.R. § 102.6(a) and 104.12, and instituted an investigation of this matter.

After considering all the evidence available to the Commission, the Office of General Counsel is prepared to recommend that the Commission find no probable cause to believe that violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) occurred. In addition, this Office is prepared to recommend that the Commission find probable cause to believe violations of 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 occurred and take no further action. The Commission may or may not approve the General Counsel's recommendations.

Submitted for your review is a brief stating the position of the General Counsel on the legal and factual issues of the case. Within fifteen days of your receipt of this notice, you may file with the Secretary of the Commission a brief (10 copies if possible) stating your clients' position on the issues and replying to the brief of the General Counsel. Three copies of such brief should also be forwarded to the Office of General Counsel, if possible. The General Counsel's brief and any brief which you submit will be considered by the Commission before proceeding to a vote of probable cause or no probable cause to believe a violation has occurred.

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Should you have any questions, please contact Beverly Kramer the staff member assigned to handle this matter, at (202) 376-5690.

Sincerely,



Charles N. Steele  
General Counsel

Enclosure  
Brief

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BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Friends of Wally Herger for ) MUR 2178  
Assembly and Jerry Crippen, )  
Treasurer )

GENERAL COUNSEL'S BRIEF

I. STATEMENT OF THE CASE

On May 22, 1986, Don Gallino filed a complaint with the Commission alleging, inter alia, that Friends of Wally Herger for Assembly ("the Assembly Committee") and Jerry Crippen, as its treasurer, violated the Federal Election Campaign Act of 1971, as amended ("the Act").

Acting on the complaint, the Commission determined on September 30, 1986, that there was reason to believe the Assembly Committee and Jerry Crippen, as treasurer, violated sections 433(a), 434 and 441b(a) of the Act and Commission Regulations 11 C.F.R. § 102.6(a) and § 104.12.

Notification of the Commission's actions was mailed to the Respondents on October 7, 1986. At the Respondents' request, the General Counsel's Office granted an extension of 20 days to respond to the Commission's findings and on November 12, 1986, received the Respondents' reply.

II. LEGAL ANALYSIS

A. Violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a)

1. Factual Basis for Reason to Believe Finding

The Commission determined there was reason to believe that the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) by transferring to

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the Wally Herger for Congress Committee ("the Federal Committee") campaign funds that included contributions from corporations and other sources that appeared to be impermissible under the Act. The Commission's finding was based on allegations in the complaint that between January 13, 1986, and March 11, 1986, the Assembly Committee made eight transfers, totalling \$59,377, to the Federal Committee from funds that included impermissible contributions under the Act.

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The Commission's determination that the Respondents violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) was predicated upon an analysis of the Assembly Committee's campaign disclosure reports filed with the State of California and submitted with the complaint. The analysis assumed that the Assembly Committee maintained a single campaign depository into which all receipts disclosed in its state reports were deposited and all disbursements, including the transfers to the Federal Committee, were made. Using the accounting theory of last in, first out, the analysis revealed that at the time of its transfers to the Federal Committee, the Assembly Committee's cash on hand contained insufficient "clean funds" i.e., permissible contributions under the Act, and that impermissible funds of between \$11,154 and \$15,716 may have been transferred to the Federal Committee.

Further, the Commission determined there was reason to believe that the Assembly Committee and Jerry Crippen, as

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treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from California Financial Services Corporation, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, Mobilehome Parks PAC, California Pharmacists PAC, California Chiropractic PAC, California Hospitals PAC, AG Council of California PAC and California Medical Association PAC. This determination was based on an analysis of the Assembly committee's state reports. The state reports revealed that the Assembly Committee accepted contributions totalling \$5,500 from these corporations and state political committees after the date on which it became a political committee under the Act.

## 2. The Assembly Committee's Response

The Assembly Committee disputes the Commission's findings that violations of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) occurred. The Assembly Committee asserts that the Commission's determinations, predicated upon an analysis of its state reports, failed to take into account the fact that the Assembly Committee had established a segregated account, separate from its regular account, and that the transfers to the Federal Committee were made from its segregated account. The response claims that the state reports upon which the Commission's analysis relied, accounted for all contributions received without regard to which account they were deposited in and, thus, do not provide proper guidance in analyzing this matter.



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The response explains that in November, 1984, in anticipation of the possibility that Mr. Herger might become a candidate for the United States House of Representatives, the Assembly Committee made an informal inquiry of the Commission as to the method of making transfers from the campaign committee of a state candidate to that candidate's federal principal campaign committee. The response claims that as a consequence of that inquiry, the Assembly Committee established a separate account, known as "Friends of Wally Herger for Assembly-Individual Account" ("the Individual Account") into which only contributions which were lawful under the Act were to be deposited.

According to the response, in April, 1985, before any transfer was made to the Federal Committee, it was discovered that campaign volunteers, not usually assigned to making deposits, had made some errors and that some contributions not permitted under the Act had been deposited into the Individual Account. The response claims that as a consequence, a person more accustomed to handling financial matters was assigned to review and manage the Individual Account. According to the response, on April 23, 1985, all sums that appeared not to be lawful under the Act as to the source and amount, or where the source and/or amount could not be definitively determined, were transferred from the Individual Account to the regular account. The response acknowledges that subsequent to April 23, 1985, a few isolated contributions that should have been deposited into the regular



account were inadvertently deposited into the Individual Account. It appears, however, based on documentation presented, that sums equal to the amount of impermissible contributions were transferred to the regular account prior to the time any transfers were made to the Federal Committee.

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The documentation submitted with the response is a computer analysis of all deposits to and withdrawals from the Individual Account. The response states that in 1986, when Mr. Herger became a Federal candidate and Mr. Crippen became treasurer of the Federal Committee, Mr. Crippen prepared the computer analysis. The response claims that using the accounting theory of first in, first out, Mr. Crippen analyzed the source and amount of each contribution and determined that at no time were funds transferred from the Individual Account to the Federal Committee which were not permissible under the Act. The computer analysis submitted with the response provides the dates and amounts of all deposits and withdrawals and identifies the source of funds deposited under column headings reading "Individual," "Corporate" etc. The response states that the specific sources and amounts of contributions transferred to the Federal Committee were reported in the April 15 Quarterly and Termination report of the Assembly Committee.

The Assembly Committee's response also disputes the Commission's allegation that it received contributions from four corporations and seven state political committees subsequent to

becoming a political committee under the Act. The response claims that the subject contributions were deposited into the Assembly Committee's regular account and not its Individual Account and that no impermissible contributions were deposited into the Individual Account during the period in which it was a federal political committee under the Act. The computer analysis submitted with the response appears to substantiate the Assembly Committee's claims in that it reflects that the only deposits made subsequent to January 13, 1986 were composed of individual contributions and interest payments.

### 3. Analysis

The Assembly Committee's response reveals for the first time the existence of a segregated account into which, for the most part, only lawful contributions were deposited and from which transfers were made to the Federal Committee. Further, the response provides a summary computer analysis of the source and amounts deposited in the segregated account and the amounts withdrawn. A review of this material indicates that at the time transfers were made to the Federal Committee, the segregated account contained sufficient "clean funds" i.e., permissible contributions under the Act, with which to make transfers totalling \$59,377 to the Federal Committee. Based on the analysis of this new information, the Office of the General Counsel recommends that the Commission find no probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer,

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violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) with regard to transfers made by the Assembly Committee to the Federal Committee.

Additionally, the Assembly Committee's response reveals for the first time that contributions received from four corporations and seven state political committees were deposited into the Assembly Committee's regular account and not its segregated account from which transfers were made to the Federal Committee. In view of this new information, this Office recommends that the Commission find no probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a).

**B. Violations of 2 U.S.C. § 434 and 11 C.F.R. § 104.12**

**1. Factual Basis for Reason to Believe Finding**

The Commission determined that the Assembly Committee violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the sources of its cash on hand at the time of registration and by failing to disclose all receipts and disbursements from the date it became a political committee under the Act. This determination rested upon three major assumptions: 1) that the Assembly Committee became a political committee subject to the registration and reporting requirements of the Act on January 13, 1986, the date it transferred funds in excess of \$1,000 to the Federal Committee, 2) that the Assembly Committee maintained a single campaign depository into which all receipts were deposited and from which all disbursements were made; and 3) that the Assembly Committee's state reports

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contained accurate and complete information concerning the deposits and disbursements made from the single account. Based on these initial premises, an analysis of the Assembly Committee's state and Federal Reports indicated that it had understated the amount of its cash on hand at the time of registration by at least \$7,000 and that it had failed to identify contributions received from corporations, state political committee's and trade associations. The analysis also indicated that the Assembly Committee had failed to disclose all non-federal activity from the date it became a political committee under the Act, including \$7,250 in contributions, other receipts of \$14,060 and \$11,129 in expenditures.

## 2. Assembly Committee's Response

The Assembly Committee's response does not specifically address the Commission's finding regarding violations of 2 U.S.C. § 434 and 11 C.F.R. § 104.12. However, as discussed infra, the Assembly Committee's response has revealed that its state reports do not provide accurate guidance for analysis of this matter as the reports disclose the combined activity of the Committee's regular account as well as its segregated account from which transfers were made to the Federal Committee. For proper guidance, the Assembly Committee submits a summary computer analysis of all transactions occurring solely with regard to its segregated account.

### 3. Analysis

Pursuant to 2 U.S.C. § 434 and Commission Regulation 11 C.F.R. § 104.12, political committees which have cash on hand at the time of registration are required to disclose in their first report the source of such funds. The cash on hand balance is assumed to be composed of those contributions most recently received.

A review of the Assembly Committee's computer summary of transactions occurring with regard to its Individual Account reveals a cash on hand balance of \$55,856.88 at the time of registration. According to the computer summary, this cash on hand was composed of individual contributions totalling \$51,906.25 and corporate contributions totalling \$3,950.63. A sum equal to the amount of corporate contributions included in its cash on hand was subsequently transferred to the Assembly Committee's regular account, according to the computer summary.

The Assembly Committee's first report filed with the Commission fails to disclose the corporate contributions included in its cash on hand at the time of registration. Moreover, the report fails to disclose a transfer of an amount equal to these corporate contributions from the Individual Account to the regular account. Accordingly, this Office recommends that the Commission find probable cause to believe the Assembly Committee violated the reporting requirements of 2 U.S.C. § 434 and

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11 C.F.R. § 104.12. The Office of the General Counsel further recommends, however, that the Commission take no further action in view of the fact that the Assembly Committee has terminated and for the reason that it appears the Committee may have misunderstood the reporting provisions as requiring only the disclosure of the source and amount of contributions composing its transfers to the Federal Committee. The Committee's first report discloses a cash on hand balance equal to the amount of funds transferred to the Federal Committee and provides an itemization of the individual contributions that composed the transfers.

**C. Violation of 2 U.S.C. § 433(a)**

**1. Factual Basis for Reason to Believe Finding**

The Commission determined there was reason to believe that the Assembly Committee violated 2 U.S.C. § 433(a) by failing to register in a timely manner. This determination was based on allegations in the complaint that the Assembly Committee became a political committee under the Act on January 13, 1986, resulting from its transfer of more than \$1,000 to the Federal Committee, but that the Assembly Committee failed to register until May 30, 1986--137 days after it became a political committee under the Act.

**2. Assembly Committee's Response**

The Respondents assert that they exercised best efforts to determine the specific procedure to be followed in making

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transfers from the campaign committee of a state candidate to that candidate's federal campaign committee, but that they did not become aware of the need to file a separate Statement of Organization until May, 1986.

### 3. Analysis

A review of the public record substantiates the Assembly Committee's claim of having utilized best efforts to comply with the Act's disclosure requirements. Specifically, the public record reveals that although the Assembly Committee did not file its statement of organization until May, 1986, it nevertheless timely filed its 1986 April Quarterly Report disclosing transfers to the Federal Committee. Moreover, the affiliation of the Assembly Committee to the Federal Committee was timely disclosed by Wally Herger in an amendment to his statement of candidacy as well as by the Federal Committee in an amendment to its statement of organization. For the foregoing reasons, this Office recommends that the Commission find probable cause to believe the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) and take no further action.

### III. GENERAL COUNSEL'S RECOMMENDATIONS


1. Find no probable cause to believe Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a).
2. Find probable cause to believe Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a), § 434 and 11 C.F.R. § 104.12 and take no further action.

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3. Close the file as it pertains to Friends of Wally Herger for Assembly and Jerry Crippen, as its treasurer.

3 March 1987  
Date

  
\_\_\_\_\_  
Charles N. Steele  
General Counsel

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM

TO: Office of the Commission Secretary  
FROM: Office of General Counsel *Cox*  
DATE: March 3, 1987  
SUBJECT: MUR 2178 - General Counsel's Report

The attached is submitted as an Agenda document  
for the Commission Meeting of \_\_\_\_\_

Open Session \_\_\_\_\_

Closed Session \_\_\_\_\_

CIRCULATIONS

48 Hour Tally Vote [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
24 Hour No Objection [ ]  
Sensitive [ ]  
Non-Sensitive [ ]  
Information [XX]  
Sensitive [XX]  
Non-Sensitive [ ]

Other [ ]

DISTRIBUTION

Compliance [XX]  
Audit Matters [ ]  
Litigation [ ]  
Closed MUR Letters [ ]  
Status Sheets [ ]  
Advisory Opinions [ ]  
Other (see distribution below) [ ]

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SENSITIVE

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Friends of Wally Herger )  
for Assembly and Jerry )  
Crippen, Treasurer )  
Wally Herger for Congress )  
Committee and Jerry Crippen, )  
Treasurer )


MUR 2178

GENERAL COUNSEL'S REPORT

The Office of General Counsel is prepared to close the investigation in this matter based on the assessment of the information presently available.

Date

3 March 1987

  
Charles N. Steele  
General Counsel

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GCC#1997

**HAND DELIVERED**

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**HERGE, SPARKS, CHRISTOPHER & BIONDI**

**ATTORNEYS AT LAW**

**SUITE 200**

**8201 GREENSBORO DRIVE**

**MCLEAN, VIRGINIA 22102**

J. CURTIS HERGE  
ROBERT R. SPARKS, JR.  
A. MARK CHRISTOPHER  
GEORGE V. BIONDI  
DONNA LYNN MILLER

**November 12, 1986**

(703) 848-4700

**BY MESSENGER**

The Honorable Joan D. Aikens  
Chairman  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

Attention of Beverly Kramer  
Office of General Counsel

**RE: MUR 2178**

Dear Madam Chairman:

This responds to your letter, dated October 7, 1986, in which you reported that the Federal Election Commission had determined there is reason to believe that the Wally Herger for Congress Committee, Friends of Wally Herger for Assembly and Jerry Crippen, in his capacity as treasurer of those committees, violated certain sections of the Federal Election Campaign Act of 1971, as amended, and of the regulations promulgated thereunder by the Federal Election Commission. By letter, dated October 31, 1986, we were granted an extension, until November 12, 1986, within which to respond to the foregoing determination.

The Federal Election Commission determined there is reason to believe that Friends of Wally Herger for Assembly and Mr. Crippen, as its treasurer, violated 2 U.S.C. §441b(a) and 11 C.F.R. 102.6(a) by transferring to the Wally Herger for Congress Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible under the Act. That determination was apparently predicated upon an analysis of the reports Friends of Wally Herger for Assembly filed, in accordance with California law, with the Secretary of State of the State of California. Such an analysis failed to take into account the fact that Friends of Wally Herger for Assembly established a segregated account, separate from its

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OFFICE OF THE  
GENERAL COUNSEL

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The Honorable Joan D. Aikens  
November 12, 1986  
Page 2

regular account, and that the transfers to the Wally Herger for Congress Committee were made from that segregated account. Therefore, the reports filed with the State of California by Friends of Wally Herger for Assembly, which accounted for all contributions received, do not provide guidance in analyzing this matter.

Counsel is advised that, in November, 1984, in anticipation of the possibility that Mr. Herger might become a candidate for the United States House of Representatives, the then treasurer of Friends of Wally Herger for Assembly (not Mr. Crippen) made informal inquiry of the Federal Election Commission as to the method of making transfers from the campaign committee of a state candidate to that candidate's federal principal campaign committee. As a consequence of that inquiry, Friends of Wally Herger for Assembly established a separate segregated account, known as "Friends of Wally Herger for Assembly - Individual Account" (hereinafter "the Individual Account"). Only contributions received by Friends of Wally Herger for Assembly which were lawful as to source and amount under the Federal Election Campaign Act were to be deposited into the Individual Account. It was believed that such a procedure, the establishment of a segregated account, was proper pursuant to 11 C.F.R. 102.5(a)(1)(i).

On November 5, 1984, Friends of Wally Herger for Assembly deposited \$19,577.76 into the Individual Account, that being the aggregate of the then fund balance on hand which had been determined to be lawful under the Act. Thereafter, only contributions received by Friends of Wally Herger for Assembly thought to be lawful under the Act were to be deposited into the Individual Account.

In April, 1985, before any transfer was made to the Wally Herger for Congress Committee, it was discovered that some errors had been made and that some contributions not permitted under the Act had been deposited in the Individual Account. Those errors had been made by campaign volunteers not usually assigned to making deposits. As a consequence, a person more accustomed to handling financial matters was assigned to review and manage the Individual Account. On April 23, 1985, all sums

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The Honorable Joan D. Aikens  
November 12, 1986  
Page 3

which appeared not to be lawful under the Act as to source and amount, or where the source and/or amount could not be definitively determined, were transferred from the Individual Account to the regular account of Friends of Wally Herger for Assembly. Even subsequent to that date, however, a few isolated contributions were inadvertently deposited into that account that should have been deposited into the regular account.

In 1986, when Mr. Herger became a Federal candidate and when Mr. Crippen became treasurer of the subject committees, Mr. Crippen undertook to prepare a computer analysis of all the deposits to the Individual Account. Counsel is advised that, using the accounting theory of first in, first out, Mr. Crippen analyzed the source and amount of each contribution and determined that, at no time, were funds transferred to the Wally Herger for Congress Committee from the Individual Account which were not permissible under the Act. A copy of Mr. Crippen's summary computer analysis is enclosed. (The column heading on the analysis, "co-mingled", represents funds which could not be specifically identified as to source and amount and which were transferred out on April 23, 1985. The other column headings are self-explanatory.) The specific sources and amounts of the contributions transferred from the Individual Account to the Wally Herger for Congress Committee were reported in the April 15 Quarterly and Termination Report filed by Friends of Wally Herger for Assembly - Individual Account, dated April 14, 1986.

The Federal Election Commission also determined there is reason to believe that the Wally Herger for Congress Committee and Mr. Crippen, as its treasurer, violated 2 U.S.C. §441b(a) by accepting transfers from Friends of Wally Herger for Assembly which contained contributions from corporations and other sources that appear to be impermissible under the Act. Based upon the foregoing presentation and analysis, the Wally Herger for Congress Committee did not accept transfers from the Individual Account which were impermissible under the Act.

Further, the Federal Election Commission determined there is reason to believe that Friends of Wally Herger for Assembly and Mr. Crippen, as its treasurer, violated 2 U.S.C. §441b(a) by accepting contributions from California Financial



The Honorable Joan D. Aikens  
November 12, 1986  
Page 4

Services Association, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, California Pharmacists PAC, California Chiropractic PAC, Mobilehomes Parks PAC, California Hospitals PAC, AG Council of California PAC and California Medical Association PAC. Counsel is advised that those contributions were deposited in the regular account of Friends of Wally Herger for Assembly and not in the Individual Account. Based upon Mr. Crippen's computer analysis, no impermissible contributions were deposited into the Individual Account during the period it was a federal committee, e.g. January 13, 1986 through March 31, 1986.

Finally, the Federal Election Commission determined there is reason to believe that Friends of Wally Herger for Assembly and Mr. Crippen, as its treasurer, violated 2 U.S.C. §443(a) by failing to register in a timely manner. Mr. Crippen exercised his best efforts to determine the specific procedure to be followed in making these transfers. As stated in his affidavit earlier submitted in this matter, he was aware of the relevant advisory opinions and the procedures outlined in the Federal Election Commission Record. Mr. Crippen used his best efforts to follow those procedures. He did not become aware of the need to file a separate Statement of Organization on behalf of Friends of Wally Herger for Assembly until May, 1986. When he did learn of that requirement, he immediately filed the Statement.

Based upon the foregoing, it is submitted that Mr. Crippen utilized his best and good faith efforts in complying with the provisions of the Act and that no further action should be taken against him or the respondent committees. If any additional information is required in order to conclude this matter, however, we would be pleased to be of assistance.

Sincerely,

  
J. Curtis Herge

:sbl

Enclosure

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HERGER CAMPAIGN TRANSFERS  
FROM SEGREGATED ACCOUNT

	DATE	DEPOSIT	WITHDRAW	TOTAL	INDIVIDUAL <= \$1000	CORPORATE	INDIVIDUAL > \$1000	CO-MINGLED
ORIGINAL TRANS TO SEG ACCOUNT	05-Nov-84			19,577.76				19,577.76
	05-Nov-84	1,060.00		1,060.00	1,060.00			
	05-Nov-84		(6,352.56)	(6,352.56)				(6,352.56)
BALANCE	05-Nov-84			14,285.20	1,060.00	0.00	0.00	13,225.20
INTEREST	05-Nov-84	540.87		540.87	40.13	0.00	0.00	500.74
	06-Nov-84	560.00		560.00	560.00			
	06-Nov-84		(3,911.00)	(3,911.00)				(3,911.00)
	07-Nov-84	10.00		10.00	10.00			
	08-Nov-84	275.00		275.00	275.00			
	08-Nov-84		(252.00)	(252.00)				(252.00)
BALANCE				11,508.07	1,945.13 *	0.00 *	0.00 *	9,562.94
	19-Nov-84	25.00		25.00	25.00			
	28-Nov-84	171.00		171.00	71.00	100.00		
	12-Dec-84	500.00		500.00	500.00			
	12-Dec-84		(9.00)	(9.00)				(9.00)
BALANCE	12-Dec-84			12,195.07	2,541.13 *	100.00 *	0.00 *	9,553.94
INTEREST	12-Dec-84	407.24		407.24	84.86	3.34	0.00	319.04
ADJUSTMENT	12-Dec-84		(0.30)	(0.30)				(0.30)
	18-Dec-84		(154.90)	(154.90)				(154.90)
	02-Jan-85	250.00		250.00		250.00		
	02-Jan-85	100.00		100.00	100.00			
	02-Jan-85		(648.50)	(648.50)				(648.50)
BALANCE	02-Jan-85			12,148.61	2,725.99 *	353.34 *	0.00 *	9,069.28
INTEREST	02-Jan-85	100.41		100.41	22.53	2.92	0.00	74.96
	28-Jan-85		(2,685.21)	(2,685.21)				(2,685.21)
	31-Jan-85	785.00		785.00				785.00
	08-Feb-85		(305.78)	(305.78)				(305.78)
	20-Feb-85	9,206.52		9,206.52	9,206.52			
	25-Feb-85	200.00		200.00	200.00			
	25-Feb-85		(12.01)	(12.01)				(12.01)
BALANCE	25-Feb-85			19,437.54	12,155.04 *	356.26 *	0.00 *	6,926.24
INTEREST	25-Feb-85	81.14		81.14	50.74	1.49	0.00	28.91
	25-Feb-85		(115.00)	(115.00)				(115.00)
	01-Mar-85	335.72		335.72	335.72			
	01-Mar-85	1,150.00		1,150.00	50.00	1,100.00		
	06-Mar-85		(1,473.87)	(1,473.87)				(1,473.87)
	08-Mar-85	800.00		800.00				800.00
	08-Mar-85		(10.00)	(10.00)				(10.00)
BALANCE	08-Mar-85			20,205.53	12,591.50 *	1,457.75 *	0.00 *	6,156.28
INTEREST	08-Mar-85	59.93		59.93	37.35	4.32	0.00	18.26
	11-Mar-85		(26.15)	(26.15)				(26.15)
	13-Mar-85	700.00		700.00	700.00			
	21-Mar-85		(746.29)	(746.29)				(746.29)
	01-Apr-85	1,151.00		1,151.00	900.00	251.00		
	09-Apr-85	1,565.00		1,565.00	1,240.00	325.00		
	16-Apr-85		(180.85)	(180.85)				(180.85)
	23-Apr-85	2,131.00		2,131.00	2,032.00			99.00
BALANCE	23-Apr-85			24,859.17	17,500.85 *	2,038.07 *	0.00 *	5,320.25
				0.00				
CORPORATE ACCT TRANSFER	23-Apr-85		(22,926.02)	(22,926.02)	(15,567.70)	(2,038.07)		(5,320.25)

HERBER CAMPAIGN TRANSFERS  
FROM SEGREGATED ACCOUNT

	DATE	DEPOSIT	WITHDRAW	TOTAL	INDIVIDUAL (= \$1000)	CORPORATE	INDIVIDUAL > \$1000	CO-MINGLED
	23-Apr-85		(23.25)	(23.25)	(23.25)			
BALANCE	23-Apr-85			1,909.90	1,909.90 *	0.00 *	0.00 *	(0.00)
INTEREST	23-Apr-85	93.58		93.58	93.58	0.00	0.00	0.00
	23-Apr-85		(7.50)	(7.50)	(7.50)			
BALANCE	30-Apr-85			1,995.98	1,995.98 *	0.00 *	0.00 *	(0.00)
INTEREST	30-Apr-85	121.02		121.02	121.02	0.00	0.00	0.00
	10-May-85	1,589.00		1,589.00	1,489.00	100.00		
	10-May-85	1,025.00		1,025.00	1,025.00			
	10-May-85	1,617.00		1,617.00	1,617.00			
	17-May-85	1,799.00		1,799.00	1,799.00			
	01-Jul-85	1,597.13		1,597.13	897.13	700.00		
BALANCE	01-Jul-85			9,744.13	8,944.13 *	800.00 *	0.00 *	(0.00)
INTEREST	01-Jul-85	111.04		111.04	101.92	9.12	0.00	0.00
	12-Jul-85	1,437.26		1,437.26	1,437.26			
	12-Jul-85	1,045.00		1,045.00	945.00	100.00		
	19-Jul-85	1,099.00		1,099.00	1,099.00			
	30-Jul-85	1,085.00		1,085.00	1,060.00	25.00		
	07-Aug-85	1,295.00		1,295.00	945.00	350.00		
	12-Aug-85	465.00		465.00	440.00	25.00		
BALANCE	12-Aug-85			16,281.43	14,972.31 *	1,309.12 *	0.00 *	(0.00)
INTEREST	12-Aug-85	122.02		122.02	112.21	9.81	0.00	0.00
	16-Sep-85	4,548.00		4,548.00	4,548.00			
	23-Sep-85	807.00		807.00	807.00			
	24-Sep-85	702.00		702.00	702.00			
	25-Sep-85	1,388.00		1,388.00	1,388.00			
BALANCE	25-Sep-85			23,848.45	22,529.52 *	1,318.93 *	0.00 *	(0.00)
INTEREST	25-Sep-85	85.89		85.89	81.14	4.75	0.00	0.00
BALANCE	11-Oct-85			23,934.34	22,610.66 *	1,323.68 *	0.00 *	(0.00)
INTEREST	11-Oct-85	107.42		107.42	101.48	5.94	0.00	0.00
	29-Oct-85	1,526.00		1,526.00	1,526.00			
	29-Oct-85			0.00				
	11-Oct-85	2,380.00		2,380.00	2,380.00			
	04-Nov-85	800.00		800.00	800.00			
	04-Nov-85	781.00		781.00	781.00			
	04-Nov-85	4,323.50		4,323.50	3,973.50	350.00		
	26-Nov-85	12,817.00		12,817.00	9,734.00	3,083.00		
	04-Dec-85	2,823.00		2,823.00	2,698.00	125.00		
	12-Dec-85	1,235.00		1,235.00	1,235.00			
	13-Dec-85	2,122.00		2,122.00	2,072.00	50.00		
	29-Dec-85		(3,000.00)	(3,000.00)		(3,000.00)		
BALANCE	29-Dec-85			49,849.26	47,911.64 *	1,937.62 *	0.00 *	(0.00)
INTEREST	29-Dec-85	157.05		157.05	150.95	6.10	0.00	0.00
	31-Dec-85	1,992.00		1,992.00		1,992.00		
	03-Jan-86	3,789.30		3,789.30	3,789.30			
RETURNED CHECK	03-Jan-86		(26.50)	(26.50)	(26.50)			
RETURNED CHECK	03-Jan-86		(100.00)	(100.00)	(100.00)			
RETURNED CHECK	03-Jan-86		(15.00)	(15.00)	(15.00)			
BALANCE	03-Jan-86			55,646.11	51,710.39 *	3,935.72 *	0.00 *	(0.00)
INTEREST	03-Jan-86	210.77		210.77	195.86	14.91	0.00	0.00
CONGRESSIONAL CAMPAIGN TRANS	13-Jan-86		(15,066.99)	(15,066.99)	(15,066.99)			
CONGRESSIONAL CAMPAIGN TRANS	24-Jan-86		(2,703.00)	(2,703.00)	(2,703.00)			

HERGER CAMPAIGN TRANSFERS  
FROM SEGREGATED ACCOUNT

	DATE	DEPOSIT	WITHDRAW	TOTAL	INDIVIDUAL <= \$1000	CORPORATE	INDIVIDUAL > \$1000	CO-MINGLED
CONGRESSIONAL CAMPAIGN TRANS	24-Jan-86		(4,000.00)	(4,000.00)	(4,000.00)			
CONGRESSIONAL CAMPAIGN TRANS	04-Feb-86		(400.00)	(400.00)	(400.00)			
CONGRESSIONAL CAMPAIGN TRANS	04-Feb-86		(234.00)	(234.00)	(234.00)			
CONGRESSIONAL CAMPAIGN TRANS	04-Feb-86		(3,568.13)	(3,568.13)	(3,568.13)			
	07-Feb-86		(41.66)	(41.66)		(41.66)		
CONGRESSIONAL CAMPAIGN TRANS	10-Feb-86		(60.00)	(60.00)	(60.00)			
CONGRESSIONAL CAMPAIGN TRANS	15-Feb-86		(4,000.00)	(4,000.00)	(4,000.00)			
BALANCE	15-Feb-86			25,783.10	21,874.13 *	3,908.97 *	0.00 *	(0.00)
INTEREST	15-Feb-86	309.02		309.02	262.17	46.85	0.00	0.00
	17-Feb-86		(49.00)	(49.00)		(49.00)		
	19-Feb-86	185.00		185.00	185.00			
	19-Feb-86		(10.00)	(10.00)		(10.00)		
BALANCE	15-Feb-86			26,218.12	22,321.30 *	3,896.82 *	0.00 *	(0.00)
INTEREST	15-Feb-86	188.14		188.14	160.18	27.96	0.00	0.00
CORPORATE ACCT TRANS	06-Mar-86		(6,448.43)	(6,448.43)	(2,523.65)	(3,924.78)		
	07-Mar-86	9,471.14		9,471.14	9,471.14			
CONGRESSIONAL CAMPAIGN TRANS	14-Mar-86		(751.00)	(751.00)	(751.00)			
	14-Mar-86		(26.99)	(26.99)	(26.99)			
BALANCE	14-Mar-86			28,650.98	28,650.98 *	(0.00) *	0.00 *	(0.00)
CONGRESSIONAL CAMPAIGN TRANS	14-Mar-86		(28,549.98)	(28,549.98)	(28,549.98)			
BALANCE	14-Mar-86			101.00	101.00 *	(0.00) *	0.00 *	(0.00)
				0.00				
				0.00				

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

October 31, 9186

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive  
Suite 200  
McLean, VA 22102

Re: MUR 2178  
Wally Herger for Congress  
Friends of Wally Herger  
for Assembly  
Jerry Crippen, Treasurer

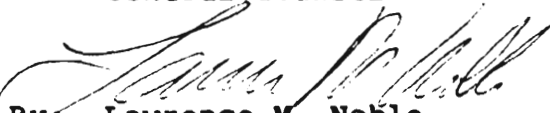
Dear Mr. Herge:

This is in reference to your letter dated October 15, 1986, requesting an extension of 20 days to respond to the Commission's notice in connection with its finding of reason to believe your clients violated the Federal Election Campaign Act of 1971, as amended. After considering the circumstances presented in your letter, I have determined to grant you your requested extension. Accordingly, your response will be due on November 12, 1986.

If you have any questions, please contact Beverly Kramer, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Lawrence M. Noble  
Deputy General Counsel

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HERGE, SPARKS, CHRISTOPHER & BIONDI

ATTORNEYS AT LAW

SUITE 200

8201 GREENSBORO DRIVE  
MCLEAN, VIRGINIA 22102

J. CURTIS HERGE  
ROBERT R. SPARKS, JR.  
A. MARK CHRISTOPHER  
GEORGE V. BIONDI  
DONNA LYNN MILLER

(703) 846-4700

October 15, 1986

Ms. Beverly Kramer  
Office of General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

RE: MUR 2178

Dear Ms. Kramer:

This is written in reference to the letter from Chairman Aikens to me, dated October 7, 1986 which I received on October 9, 1986, advising me that the Federal Election Commission determined there is reason to believe that Friends of Wally Herger for Assembly, Wally Herger for Congress and Jerry Crippen, as treasurer of those committees, may have violated various provisions of the Federal Election Campaign Act of 1971, as amended.

I am advised that, because of the press of responsibilities in the final days of the current campaign, my clients find it impossible to assemble the necessary information to enable us to respond prior to October 23, 1986. As a consequence, we respectfully request that we be granted a twenty day extension, until November 12, 1986, within which to file our response.

Sincerely yours,

  
J. Curtis Herge

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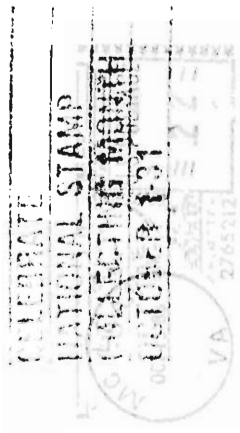
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RECEIVED THE FEC  
Oct #1786  
86 OCT 20 10:30

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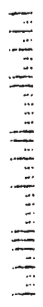
8 7 0 4 0 5  
HERGE, SPARKS, CHRISTOPHER & BIONDI

SUITE 200  
8201 GREENSBORO DRIVE  
MCLEAN, VIRGINIA 22102



Ms. Beverly Kramer  
Office of General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

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FEC





BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of )  
 )  
Wally Herger for Congress Committee )  
and Jerry Crippen, Treasurer )  
Friends of Wally Herger for Assembly ) MUR 2178  
and Jerry Crippen, Treasurer )  
Candidate Wally Herger )

CERTIFICATION

I, Marjorie W. Emmons, recording secretary for the  
Federal Election Commission executive session of September 30,  
1986, do hereby certify that the Commission decided by a vote  
of 5-1 to take the following actions in MUR 2178:

1. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) by failing to register in a timely manner.
2. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) by transferring to the Wally Herger for Congress Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible under the Act.
3. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the source(s) of its cash on hand at the time of registration; and, by failing to disclose all receipts and disbursements from the date it became a political committee under the Act.

(continued)

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- 8704052982
4. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from the following: California Financial Services Association, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, California Pharmacists PAC, California Chiropractic PAC, Mobilehome Parks PAC, California Hospitals PAC, AG Council of California PAC, and California Medical Association PAC.
  5. Find reason to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly which contained contributions from corporations and other sources that appear to be impermissible in connection with a federal election.
  6. Find no reason to believe that Wally Herger violated the Act.
  7. Close the file as it pertains to Wally Herger.
  8. Approve and send the letters attached to the General Counsel's report dated September 17, 1986.

Commissioners Aikens, Harris, Josefiak, McDonald, and McGarry voted affirmatively for the decision; Commissioner Elliott dissented.

Attest:

10-1-86

Date

Marjorie W. Emmons

Marjorie W. Emmons  
Secretary of the Commission



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

October 7, 1986

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger

Dear Mr. Herge:

On May 23, 1986, the Commission notified your client of a complaint alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended.

The Commission, on September 30, 1986, determined that on the basis of the information in the complaint, there is no reason to believe that a violation of any statute within its jurisdiction has been committed by Wally Herger. Accordingly, the Commission closed its file in this matter as it pertains to Mr. Herger. This matter will become a part of the public record within 30 days after the file has been closed with respect to all respondents. The Commission reminds you that the confidentiality provisions of 2 U.S.C. §§ 437g(a)(4)(B) and 437g(a)(12)(A) remain in effect until the entire matter is closed. The Commission will notify you when the entire file has been closed.

Sincerely,

Charles N. Steele  
General Counsel

*Lawrence M. Noble (RM7)*

By: Lawrence M. Noble  
Deputy General Counsel

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**FEDERAL ELECTION COMMISSION**

WASHINGTON, D.C. 20463

October 7, 1986

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger for Congress  
Committee and Jerry  
Crippen, Treasurer  
Friends of Wally Herger for  
Assembly and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

The Federal Election Commission notified your clients on May 23, 1986, of a complaint alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended ("the Act"), and the Commission's regulations. A copy of the complaint was forwarded to your clients at that time. We acknowledge receipt of your clients' response to the complaint.

Upon further review of the allegations contained in the complaint, the Commission on September 30, 1986, determined there is reason to believe:

1. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) by failing to register in a timely manner.
2. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. 102.6(a) by transferring to the Wally Herger for Congress Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible under the Act.

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3. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the source(s) of its cash on hand at the time of registration; and, by failing to disclose all receipts and disbursements from the date it became a political committee under the Act.
4. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from the following: California Financial Services Association, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, California Pharmacists PAC, California Chiropractic PAC, Mobilehome Parks PAC, California Hospitals PAC, AG Council of California PAC, California Medical Association PAC.
5. the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly which contained contributions from corporations and other sources that appear to be impermissible in connection with a federal election.

You may submit any factual or legal materials that you believe are relevant to the Commission's analysis of this matter. Please file any such response within fifteen days of your receipt of this notification.

If you are interested in pursuing pre-probable cause conciliation, you should so request in writing. See 11 C.F.R. § 111.18(d). Upon receipt of the request, the Office of the General Counsel will make recommendations to the Commission either proposing an agreement in settlement of the matter or recommending declining that pre-probable cause conciliation be pursued. The Office of the General Counsel may recommend that

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pre-probable cause conciliation not be entered into at this time so that it may complete its investigation of the matter. Further, requests for pre-probable cause conciliation will not be entertained after briefs on probable cause have been mailed to the respondents.

Requests for extensions of time will not be routinely granted. Requests must be made in writing at least five days prior to the due date of the response and specific good cause must be demonstrated. In addition, the Office of the General Counsel is not authorized to give extensions beyond 20 days.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and 437g(a)(12)(A) unless you notify the Commission in writing that your clients wish the matter to be made public.

If you have any questions, please contact Beverly Kramer, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,

*Joan D. Aikens*

Joan D. Aikens  
Chairman

Enclosure  
Procedures

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM TO: CHARLES STEELE, GENERAL COUNSEL  
FROM: MARJORIE W. EMMONS/ CHERYL A. FLEMING  
DATE: SEPTEMBER 22, 1986  
SUBJECT: OBJECTION TO MUR 2178 - FIRST GENERAL COUNSEL'S  
SIGNED SEPTEMBER 17, 1986

The above-named document was circulated to the  
Commission on Thursday, September 18, 1986 at 11:00 A.M.

Objections have been received from the Commissioners  
as indicated by the name(s) checked:

Commissioner Aikens	<u>X</u>
Commissioner Elliott	<u>X</u>
Commissioner Harris	<u>X</u>
Commissioner Josefiak	<u>X</u>
Commissioner McDonald	<u>      </u>
Commissioner McGarry	<u>      </u>

This matter will be placed on the Executive Session  
agenda for Tuesday, September 30, 1986.

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM TO: CHARLES STEELE, GENERAL COUNSEL  
FROM: MARJORIE W. EMMONS/ *MWE*  
DATE: SEPTEMBER 19, 1986  
SUBJECT: MUR 2178 - GENERAL COUNSEL'S REPORT  
Signed September 17, 1986.

The above-named document was circulated to the  
Commission on Thursday, September 28, 1986 at 11:00 a.m.

Objections have been received from the Commissioners  
as indicated by the name(s) checked:

Commissioner Aikens	_____
Commissioner Elliott	_____
Commissioner Harris	_____
Commissioner Josefiak	_____ X _____
Commissioner McDonald	_____
Commissioner McGarry	_____

This matter will be placed on the Executive Session  
agenda for TUESDAY, SEPTEMBER 30, 1986.

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FEDERAL ELECTION COMMISSION  
WASHINGTON D.C. 20463

MEMORANDUM TO: CHARLES STEELE, GENERAL COUNSEL  
FROM: MARJORIE W. EMMONS/ *mwe*  
DATE: SEPTEMBER 19, 1986  
SUBJECT: MUR 2178 - GENERAL COUNSEL'S REPORT  
DATED SEPTEMBER 17, 1986

The above-named document was circulated to the  
Commission on THURSDAY, SEPTEMBER 28, 1986 at 11:00 a.m.

Objections have been received from the Commissioners  
as indicated by the name(s) checked:

Commissioner Aikens	_____
Commissioner Elliott	_____X_____
Commissioner Harris	_____X_____
Commissioner Josefiak	_____X_____
Commissioner McDonald	_____
Commissioner McGarry	_____

This matter will be placed on the Executive Session  
agenda for TUESDAY, SEPTEMBER 30, 1986.

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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

MEMORANDUM TO: CHARLES STEELE, GENERAL COUNSEL  
FROM: MARJORIE W. EMMONS/ *mwe*  
DATE: SEPTEMBER 19, 1986  
SUBJECT: MUR 2178 - GENERAL COUNSEL'S REPORT  
SIGNED SEPTEMBER 17, 1986

The above-named document was circulated to the  
Commission on

Objections have been received from the Commissioners  
as indicated by the name(s) checked:

Commissioner Aikens	_____
Commissioner Elliott	_____
Commissioner Harris	_____ X
Commissioner Josefiak	_____ X
Commissioner McDonald	_____
Commissioner McGarry	_____

This matter will be placed on the Executive Session  
agenda for TUESDAY, SEPTEMBER 30, 1986.

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FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

MEMORANDUM

TO: Office of the Commission Secretary  
FROM: Office of General Counsel *Red*  
DATE: September 17, 1986  
SUBJECT: MUR 2178 - First General Counsel's Rpt.

The attached is submitted as an Agenda document  
for the Commission Meeting of \_\_\_\_\_

Open Session \_\_\_\_\_

Closed Session \_\_\_\_\_

CIRCULATIONS

48 Hour Tally Vote [X]  
Sensitive [X]  
Non-Sensitive [ ]

24 Hour No Objection [ ]  
Sensitive [ ]  
Non-Sensitive [ ]

Information [ ]  
Sensitive [ ]  
Non-Sensitive [ ]

Other [ ]

DISTRIBUTION

Compliance [X]

Audit Matters [ ]

Litigation [ ]

Closed MUR Letters [ ]

Status Sheets [ ]

Advisory Opinions [ ]

Other (see distribution below) [ ]

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**FEDERAL ELECTION COMMISSION**  
999 E Street, N.W.  
Washington, D.C. 20463

**SENSITIVE**  
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OFFICE OF THE FEC  
COMMISSION SECRETARY  
82 SEP 17 12:41

**FIRST GENERAL COUNSEL'S REPORT**

DATE AND TIME OF TRANSMITTAL  
BY OGC TO THE COMMISSION \_\_\_\_\_

MUR # 2178  
DATE COMPLAINT RECEIVED  
BY OGC 5-22-86  
DATE OF NOTIFICATION TO  
RESPONDENTS 5-23-86  
STAFF MEMBER  
Beverly Kramer

COMPLAINANT: Don Gallino

RESPONDENTS: Wally Herger for Congress Committee  
and Jerry Crippen, Treasurer  
Friends of Wally Herger for Assembly  
and Jerry Crippen, Treasurer  
Candidate Wally Herger

RELEVANT STATUTE: 2 U.S.C. § 433(a)  
2 U.S.C. § 434  
2 U.S.C. § 441b(a)  
11 C.F.R. § 102.6(a)  
11 C.F.R. § 104.12

INTERNAL REPORTS CHECKED: Public Records  
Advisory Opinion 1982-52  
Advisory Opinion 1985-2

FEDERAL AGENCIES CHECKED: None

**SUMMARY OF ALLEGATIONS**

This matter originates from a complaint filed by Don Gallino on May 22, 1986. 1/ The complaint alleges that the Friends of Wally Herger for Assembly ("the Assembly Committee") transferred

1/ On June 9, 1986, the Commission received a letter and additional documents from the complainant pertaining to the allegations in his complaint filed on May 22, 1986. Copies of these materials were mailed to the respondents on June 17, 1986.

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to the Wally Herger for Congress Committee ("the Federal Committee") campaign funds which included contributions from corporations and other sources which appear to be impermissible for Federal purposes, in violation of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a). <sup>2/</sup> In addition, the complaint alleges that the Assembly Committee became a "political committee" under the Act resulting from its transfer of \$1,000 or more to the Federal Committee, but that the State Committee failed to register as a political committee, in violation of 2 U.S.C. § 433 and 11 C.F.R. § 102.1(d). As basis for these allegations, the complaint relies on information provided in the State Committee's campaign disclosure statements filed with the State of California, as well as the information disclosed by the Assembly Committee and the Federal Committee in their FEC reports of receipts and disbursements.

The complaint also identifies candidate Wally Herger as a respondent in this matter. However, no specific allegations are made against the candidate in his individual capacity, nor are any facts presented which would establish a violation of the Act by candidate Wally Herger.

Notification of the complaint was mailed to the respondents on May 23, 1986. By letter of June 4, 1986, counsel for the respondents requested an extension until June 23, 1986 to respond

<sup>2/</sup> The complaint alleges a violation of 11 C.F.R. § 102.5(b). However this provision does not apply to the transfers at issue since they are transfers between affiliated committees.

to the allegations in the complaint. The Office of the General Counsel granted the requested extension and on June 23, 1986 received the respondents' reply to the instant complaint. Attachment 1 at 1-5.

#### FACTUAL AND LEGAL ANALYSIS

##### 1. Factual Background

Walter William ("Wally") Herger, Jr. is a candidate for election in 1986 to the U.S. House of Representatives from California's second congressional district. On February 6, 1986, Wally Herger filed his statement of candidacy, designating the Wally Herger for Congress Committee ("the Federal Committee") as his principal campaign committee. The Federal Committee filed a statement of organization on February 11, 1986, listing Jerry Crippen as its treasurer.

On February 19, 1986, Wally Herger filed an amended statement of candidacy, designating the Friends of Wally Herger for Assembly ("the Assembly Committee") as his authorized committee. Similarly, on February 24, 1986, the Federal Committee amended its statement of organization to disclose the Assembly Committee as an affiliated committee. 3/

3/ Apparently due to some confusion regarding the meaning of an affiliated committee under the Act, the Federal Committee filed two subsequent amendments, first to remove the Assembly Committee from its listing of affiliated committees, and, second, to add the Assembly Committee back to its list of affiliated committees.

The Assembly Committee was the principal campaign committee of Wally Herger, who, prior to becoming a candidate for the U.S. House of Representatives, was seeking election to the Assembly of the State of California. Jerry Crippen served as treasurer of the Assembly Committee.

On April 15, 1986, the Assembly Committee filed a combined April Quarterly and termination report with the Commission covering the period beginning January 1, 1986 and ending March 31, 1986. In its report, the Assembly Committee disclosed eight transfers to the Federal Committee totalling \$59,377. The transfers were reported as having been made between the dates of January 13, 1986 and March 11, 1986. The Assembly Committee included in its report an itemized listing of contributions identified as the source of funds transferred to the Federal Committee. On April 18, 1986, the Federal Committee filed its first quarterly report for 1986, disclosing its receipt of eight transfers totalling \$59,377 from the Assembly Committee.

On May 30, 1986, the Assembly Committee filed a statement of organization listing the Federal Committee as an affiliated committee.

## 2. Legal Framework

Commission regulations provide that transfers of funds may be made without limit between "affiliated" committees. 11 C.F.R. § 102.6(a). Included within the definition of affiliated committees are all those political committees that are established, financed, maintained or controlled by the same

person or group of persons. See 2 U.S.C. § 441a(a)(5); 11 C.F.R. § 100.5(g)(2) and 110.3(a)(1)(i). Moreover, Commission regulations provide that transfers of funds may be made without limit between a candidate's previous campaign and his or her currently registered principal campaign committee or other authorized committee, as long as none of the funds transferred contain contributions which would be in violation of the Federal Election Campaign Act of 1971, as amended ("the Act"). See 11 C.F.R. 110.3(a)(2)(iv).

While transfers of funds may be made between these committees without limit, such transfers nevertheless apply toward the threshold for determining whether the Assembly Committee is a "political committee" as defined at 2 U.S.C. § 431(4)(A) and 11 C.F.R. §100.5(a). See 11 C.F.R. § 102.6(a). Section 431(4)(A) of the Act and Commission regulation 11 C.F.R. § 100.5(a) define "political committee" to mean "any committee, club, association, or other group of persons which receives contributions aggregating in excess of \$1,000 during a calendar year or which makes expenditures aggregating in excess of \$1,000 during a calendar year." Accordingly, if the Assembly Committee transfers more than \$1,000 to the Federal Committee in a given calendar year, the Assembly Committee would be a political committee under the Act. The Assembly Committee would be required to register within 10 days after becoming a political committee. See 2 U.S.C. § 433(a). Furthermore, the Assembly Committee would be required to report as a political committee,

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disclosing in its first report the sources of the funds in its account at the time of registration. See 11 C.F.R. § 104.12. The cash on hand balance is assumed to be composed of those contributions most recently received by the Committee. See 11 C.F.R. § 104.12. The Assembly Committee would be required to itemize such prior contributions to the extent required by the Act and Commission regulations. See 2 U.S.C. § 434(b); 11 C.F.R. § 104.3(a), 104.8(a). The Assembly Committee would be required to exclude any contributions not permissible under the Act from those funds being transferred to the Federal Committee. See 2 U.S.C. § 441a, §441b, §441c, and §441e; 11 C.F.R. § 102.6(a)(1)(iv); 11 C.F.R. § 104.12; AO 1984-3, 1982-52, and 1985-2. This includes all direct or indirect contributions from corporations. Finally, on becoming a political committee under the Act, the Assembly Committee may not accept corporate or other impermissible contributions. 2 U.S.C. § 441a and § 441b.

### 3. Failure to Register

The complaint asserts that the Assembly Committee became a political committee under the Act when, on January 13, 1986, it transferred \$15,066.99 to the Federal Committee. The complaint alleges that the Assembly Committee failed to register as a political committee, in violation of 2 U.S.C. § 433.

The Assembly Committee's response to the instant complaint does not dispute the allegation that it became a political committee subject to the registration requirements of 2 U.S.C. § 433, resulting from its transfer of \$15,066.99 to the Federal

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Committee on January 13, 1986. However, in an affidavit submitted as part of its response, the Assembly Committee's treasurer, Jerry Crippen, asserts that the Assembly Committee has registered as an affiliated committee of the Federal Committee.

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The Office of the General Counsel has reviewed the public record to determine whether in fact the Assembly Committee registered as a political committee in accordance with 2 U.S.C. § 433. Our review revealed that the Assembly Committee did register by filing a statement of organization, but that the statement of organization was not filed until May 30, 1986--seven days after the instant complaint was filed and 137 days after the Assembly Committee became a political committee under the Act. The Assembly Committee's failure to register within 10 days after becoming a political committee under the Act, nevertheless appears to be a violation of 2 U.S.C. § 433(a). Accordingly, this Office recommends that the Commission find reason to believe that the Assembly Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) by failing to register in a timely manner.

#### 4. Transfer of Impermissible Funds

The complainant also alleges that the Assembly Committee transferred to the Federal Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible, in violation of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a). The allegation concerns eight transfers totalling \$59,377 that were made between January 13, 1986 and March 11, 1986. If, at the time these transfers were made, the



facts demonstrate that the Assembly Committee's cash on hand balance (composed of those contributions most recently received) contained insufficient "clean" funds, i.e., contributions which are permissible under the Act, such facts would be sufficient to make out a possible violation of section 441b(a) of the Act and Commission regulation 11 C.F.R. §102.6(a).

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The General Counsel's Office, with the cooperation and assistance of the Commission's Audit Division, has reviewed the state and federal reports of the Assembly Committee to determine whether the facts necessary to demonstrate a violation of 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) are presented. The findings of the Audit Division are presented in a memorandum to this Office dated August 21, 1986 which is appended to this report as Attachment 2 at pages 6 through 13. Based on the information presented in the audit staff's memorandum, we conclude that the Assembly Committee's transfers to the Federal Committee included contributions that are impermissible under the Act. As discussed in the Audit Memorandum, the available information is inconclusive regarding the amount involved in the violation. Certain critical assumptions were required to be made in order to arrive at an initial figure for the amount of cash on hand at the time of the transfers. The application of the various assumptions indicates, however, that the range of impermissible funds involved is between \$11,154.00 and \$15,716.00. See Attachments at 9. It is the recommendation of this Office, therefore, that the Commission find reason to believe that the Assembly Committee and Jerry Crippen, as

treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) by transferring to the Federal Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible. In addition, we recommend that the Commission find reason to believe that the Federal Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from corporations and other sources which appear to be impermissible in connection with a federal election.

**5. Other Issues Raised Based on a Review of the Documentation Accompanying the Complaint**

A review by this Office and the Audit Division of the materials submitted with the complaint raises other issues that are not specifically addressed by the complaint. The matters concern apparent reporting violations by the Assembly Committee in its combined 1986 April Quarterly and termination report filed with the Commission, as well as its acceptance of contributions, subsequent to becoming a political committee under the Act, which appear to be impermissible under 2 U.S.C. § 441b(a).

**a. Reporting Violations**

As we show below, a review of the Assembly Committee's state and federal reports indicates that the Assembly Committee violated the disclosure requirements set forth in 2 U.S.C. § 434 and Commission Regulation 11 C.F.R. § 104.12 which expressly states:

Political committees which have cash on hand at the time of registration shall disclose in

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their first report the source(s) of such funds... The cash on hand balance is assumed to be composed of those contributions most recently received.

Our conclusion that the Assembly Committee violated these disclosure requirements rests in two important assumptions:

(1) that the Assembly Committee became a political committee, subject to the registration and reporting requirements of the Act, on January 13, 1986 (see discussion, infra, at pages 6 and 7); and (2) that the Assembly Committee's campaign disclosure statements filed with the State of California contain accurate and complete information. Based on these initial premises, available information reveals that at the time the Assembly Committee was required to register as a political committee, its beginning cash on hand was between \$66,898 and \$78,460. 4/ This cash on hand balance was composed of contributions from individuals, corporations, state Pacs and trade associations which were received no earlier than May 20, 1985.

Contrary to the information disclosed in its state reports, the Assembly Committee's first report filed with the Commission discloses a cash on hand balance of only \$59,377. The cash on hand balance is reported as being composed solely of contributions from individuals. Forty-eight (48) of the

4/ The Assembly Committee's state report for the period 1/1/86 through 3/17/86 lists multiple expenditures for which no dates are disclosed. The cash on hand figure of \$66,898 assumes that all of the expenditures were made prior to the Assembly Committee's date of registration. The cash on hand figure of \$78,460 assumes the expenditures were made after the date of registration.

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contributions, totalling \$6,862.00, are reported as received prior to May 20, 1985. In addition, the Assembly Committee's itemized receipts included 38 entries in which the Assembly Committee reported the contributor's cumulative contributions to date instead of the contributions included in its cash on hand at the time of its transfers -- a difference of \$4,360.00. One contribution of \$129 was reported twice. Moreover, the Committee disclosed in its FEC report unitemized contributions which exceeded the amount of unitemized contributions disclosed in its state report by \$3,131.00. See Attachments at 10.

The Assembly Committee also failed to disclose all non-federal activity from the date it became a political committee under the Act. Based on a review of its state reports, this activity includes \$7,250 in contributions, other receipts of \$14,060 and \$11,129 in expenditures. See Attachments at 11.

In view of the foregoing, this Office recommends that the Commission find reason to believe that the Assembly Committee violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12.

**b. Receipt of Impermissible Contributions**

The Assembly Committee's state report discloses that after January 13, 1986, the date it became a political committee under the Act, the Assembly Committee accepted the following contributions from four (4) corporations and seven (7) state political committees which may not have separate segregated funds:

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<u>Contributor</u>	<u>Date</u>	<u>Amount</u>
1. CA Financial Services Assoc.	2-12-86	\$250
2. Beneficial Management Corp.	2-12-86	\$250
3. 20th Century Ins. Co.	2-12-86	\$1,000
4. Western United Dairymen	2-12-86	\$500
5. CA Grocers Assoc. PAC	2-12-86	\$500
6. CA Pharmacists PAC	2-12-86	\$500
7. CA Chiropractic PAC	2-12-86	\$500
8. Mobilehome Parks PAC	2-12-86	\$500
9. CA Hospitals PAC <u>5/</u>	2-12-86	\$500
10. AG Council of CA PAC	2-12-86	\$500
11. CA Medical Assoc. PAC <u>6/</u>	3-03-86	<u>\$500</u>
	Total:	\$5,500

As to the first four contributors listed above, the California Secretary of State's Office has verified their corporate status. Thus, the Assembly Committee's acceptance of contributions from these corporations appears to violate 2 U.S.C. § 441b(a).

As to the contributions accepted by the Assembly Committee from the seven state Pacs listed above, this Office notes that it is permissible for unregistered political committees to contribute to federal candidates and committees. State political

5/ The California Hospitals Association has a political committee which registered with the Commission on July 22, 1985. The Committee has not filed any reports since its inception.

6/ The California Medical Association has a political committee which is registered with the Commission. The Committee's 1986 April Quarterly report does not disclose a contribution to the Assembly Committee. Thus, it appears that the contribution may have been from the state account of the California Medical Association.

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committees, however, may only make such contributions from a separate account to which only funds subject to the prohibitions and limitations of the Act are deposited, or must demonstrate through a reasonable accounting method that the organization received sufficient funds subject to the prohibitions and limitations of the Act to make such contributions. See 11 C.F.R. § 102.5(b).

In California, corporate and labor union contributions are permissible for use in state election campaigns, and there is no limit on the amount a person may contribute to a state political committee.

Insofar as the Assembly Committee accepted contributions from California State Pacs and California law permits these Pacs to accept corporate and labor union money, this Office recommends the Commission find that there is reason to believe the Assembly Committee accepted impermissible contributions in violation of 2 U.S.C. § 441b(a).

6. Alleged Violations by Wally Herger.

As stated, infra, at page 2, the complaint identifies candidate Wally Herger as a respondent in this matter. However, no specific allegations are made against the candidate in his individual capacity, nor are any facts presented which would establish a violation of the Act by candidate Wally Herger. Accordingly, this Office recommends that the Commission find no reason to believe Wally Herger violated the Act.

8704053004

RECOMMENDATIONS

1. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) by failing to register in a timely manner.
2. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. § 102.6(a) by transferring to the Wally Herger for Congress Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible under the Act.
3. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the source(s) of its cash on hand at the time of registration; and, by failing to disclose all receipts and disbursements from the date it became a political committee under the Act.
4. Find reason to believe that the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from the following: California Financial Services Association, Beneficial Management Corporation, 20th Century Insurance Co., Western United Dairymen, California Grocers Association PAC, California Pharmacists PAC, California Chiropractic PAC, Mobilehome Parks PAC, California Hospitals PAC, AG Council of California PAC, California Medical Association PAC.
5. Find reason to believe that the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly which contained contributions from corporations and other sources that appear to be impermissible in connection with a federal election.
6. Find no reason to believe that Wally Herger violated the Act.
7. Close the file as it pertains to Wally Herger.
8. Approve and send the attached letters.

Charles N. Steele  
General Counsel

Date

9/17/86

By:

Lawrence M. Noble  
Deputy General Counsel

Attachments

1. Response to complaint
2. Audit Memorandum
3. Proposed letters

8704055005



86 JUN 23 REC# 766  
86 JUN 23 9:31

HERGE, SPARKS, CHRISTOPHER & BIONDI

ATTORNEYS AT LAW

SUITE 200

8201 GREENSBORO DRIVE

MCLEAN, VIRGINIA 22102

J. CURTIS HERGE  
ROBERT R. SPARKS, JR.  
A. MARK CHRISTOPHER  
GEORGE V. BIONDI  
DONNA LYNN MILLER

June 20, 1986

86 JUN 23 11:17

Lawrence M. Noble, Esq.  
Deputy General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

RE: MUR 2178

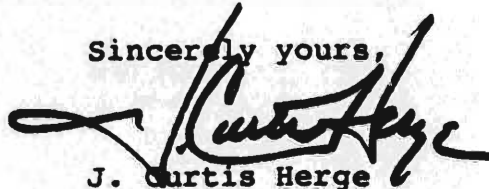
Dear Mr. Noble:

This is written in furtherance of my letter to Mr. Gross, dated June 4, 1986, which was directed to your attention, in which I noticed my appearance as counsel on behalf of the respondents in the above-captioned matter and in which I requested an extension until June 23, 1986, within which to respond.

We submit to you herewith the affidavit of Jerome B. Crippen, also known as Jerry Crippen, the treasurer of Friends of Wally Herger for Assembly and the treasurer of Wally Herger for Congress Committee. In his affidavit, Mr. Crippen has described the procedures used in identifying and reporting the sources and amounts of the funds transferred from Friends of Wally Herger for Assembly to Wally Herger for Congress Committee. It is evident that the actions taken were consistent with the requirements set forth by the Commission in Advisory Opinion 1982-52, Advisory Opinion 1985-2 and Volume 12, Number 1 of the Record. Therefore, the Commission has no reasonable basis to proceed in this matter and the file should be closed.

Do not hesitate to telephone me if you have any questions, or if you should like any additional information, in evaluating this matter.

Sincerely yours,

  
J. Curtis Herge

:sbl

Enclosure

Attachment 1

870405000

BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of:

WALLY HERGER FOR CONGRESS  
COMMITTEE,

FRIENDS OF WALLY HERGER  
FOR ASSEMBLY and

JERRY CRIPPEN, as treasurer,

Respondents.

MUR 2178

AFFIDAVIT OF JEROME B. CRIPPEN

STATE OF CALIFORNIA )

COUNTY OF yuba )

:ss

JEROME B. CRIPPEN, also known as Jerry Crippen, being  
duly sworn, deposes and says:

1. That he is the treasurer of the Wally Herger for Congress Committee, the principal campaign committee of Walter William ("Wally") Herger, Jr., a candidate for election to the United States House of Representatives from the State of California. (The Wally Herger for Congress Committee being hereinafter referred to as the "Federal Committee.")

2. That he is the treasurer of Friends of Wally Herger for Assembly, the principal campaign committee of Walter William ("Wally") Herger, Jr., who was a candidate for election to the Assembly of the State of California. (Friends of Wally Herger for Assembly being hereinafter referred to as the "State

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Committee.")

3. Upon information and belief, the State Committee and the Federal Committee, being campaign committees established by and for the benefit of the same individual, are deemed to be affiliated under the Federal Election Campaign Act of 1971, as amended. 2 U.S.C. §441a(a)(5); 11 CFR §§100.5(g)(2), 110.3(a)(1)(i).

4. Upon information and belief, there is no limit under the Federal Election Campaign Act of 1971, as amended, as to the amount of funds which may be transferred from the State Committee to the Federal Committee. 11 CFR §102.6(a); Advisory Opinion 1982-52.

5. That, during the period from January 13, 1986 through March 11, 1986, the State Committee transferred a total of \$59,377.00 to the Federal Committee.

6. That, in identifying the funds to be transferred from the State Committee to the Federal Committee, the State Committee examined its records concerning the donations most recently received in order to determine whether any of the donations came from prohibited sources or exceeded contribution limitations. Procedural guidance for this examination was found in Advisory Opinion 1982-52 and Advisory Opinion 1985-2. See, also, Federal Election Commission, Record, Vol. 12, Number 1, pages 8-10.

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7. That the sources and amounts of funds identified for transfer from the State Committee to the Federal Committee and which were transferred from the State Committee to the Federal Committee were described in full in the Schedule A for Line 11 of the Report of Receipts and Disbursements of Friends of Wally Herger for Assembly, covering the period January 1, 1986 through March 31, 1986, being the State Committee's April 15 Quarterly Report and Termination Report, which was filed on or about April 14, 1986. Said Report accounted for and identified donations to the State Committee which aggregated \$59,377.00 and reported the transfer of \$59,377.00 from the State Committee to the Federal Committee. See, Schedule B for line 20.

8. That the receipt of the transfer of \$59,377.00 from the State Committee to the Federal Committee was reported on Schedule A for line 12 of the Report of Receipts and Disbursements of Wally Herger for Congress Committee, covering the period January 1, 1986 through March 13, 1986, being the Federal Committee's April 15 Quarterly Report, which was filed on or about April 14, 1986.

9. That the Federal Committee filed an amended Statement of Organization, reporting the State Committee as an affiliated committee.

10. That the State Committee filed a Statement of Organization, reporting the Federal Committee as an affiliated

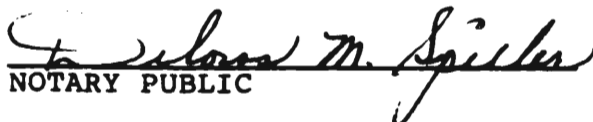
committee.

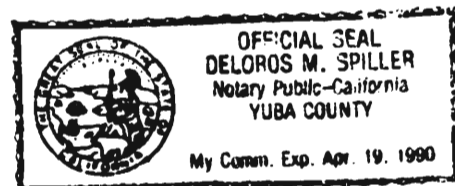
11. That your affiant has used his best efforts to obtain, maintain and submit the information required by the Federal Election Campaign Act of 1971, as amended, as described in Advisory Opinion 1982-52, Advisory Opinion 1985-2 and Volume 12, Number 1 of the Federal Election Commission Record, as they relate to transfers of funds from a State committee to a Federal Committee of the same candidate.

IN WITNESS WHEREOF, your affiant has executed this Affidavit this 19th day of June, 1986.

  
JEROME B. CRIPPEN

Sworn to before me, a Notary Public,  
this 19th day of June, 1986.

  
NOTARY PUBLIC



My Commission Expires: 4-19-1990.



Kramer



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

August 21, 1986

MEMORANDUM

TO: CHARLES N. STEELE  
GENERAL COUNSEL

THROUGH: JOHN C. SURINA  
STAFF DIRECTOR

FROM: ROBERT J. COSTA  
ASSISTANT STAFF DIRECTOR  
AUDIT DIVISION

SUBJECT: MUR 2178 - FRIENDS OF WALLY HERGER FOR ASSEMBLY  
WALLY HERGER FOR CONGRESS COMMITTEE

On July 30, 1986, the Audit Division was asked by the Office of General Counsel to assist in the review of materials submitted as part of the complaint in the above referenced matter. Specifically, we were asked to help determine the character of contributions composing funds from which eight transfers, totalling \$59,377, were made from the Friends of Wally Herger for Assembly ("the State Committee") to the Wally Herger for Congress Committee ("the Federal Committee"). In addition, the Audit staff was asked to help identify errors related to the disclosure of those contributions on the State Committee's reports which also appeared on the report filed with the Commission. The Office of General Counsel provided the Audit staff with copies of the State Committee's Campaign Disclosure Statements filed with the State of California, as well as FEC reports (Schedule A for the period 1/1/86 to 3/31/86) filed by the State Committee.

Given the limited amount of material available (i.e., no source documentation was provided), the Audit staff was required to make several assumptions to facilitate this review. These were the general assumptions made:

1. Information as disclosed on the state disclosure reports is complete and accurate. This information was used to conduct the analysis of cash on hand and disclosure on Federal reports. This is not audited information.

Attachment 2

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2. No analysis could be conducted on contributions not itemized on all reports provided to the Audit staff. For purposes of simplified calculation and conservatism, unitemized contributions are deemed to be permissible contributions.
- 3 Refunds received were excluded from the determination of cash on hand at the time of the initial transfer, under the assumption that funds used to make the original disbursement for these items were received prior to the receipt of contributions which compose cash on hand. In addition, interest income has also been excluded since it almost certainly was paid on both permissible and impermissible contributions.
- 4 Calculations are based on the assumption that the State Committee became a political committee, as defined at 2 U.S.C. § 431(4)(A), on January 13, 1986, the date of the State Committee's first transfer (\$15,067) to the Federal Committee. As a result, the State Committee is required to disclose the contributions which composed cash on hand as of January 13, 1986, and all subsequent contributions and expenditures.

Please note that a change in any of the assumptions noted above would affect the results of this review. In all instances (except where otherwise noted), the approach of maximum benefit to the State and Federal Committees was used.

1. Cash on Hand Analysis:

The Audit staff reviewed the reports filed by the State Committee with the State of California to determine cash on hand and the character of contributions which composed cash on hand on January 13, 1986.

In attempting to use the State Committee's report for the period 1/1/86 through 3/17/86, we found that none of the expenditures disclosed were dated.<sup>1/</sup> As a result, this analysis was conducted based on two different assumptions, as noted below:

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<sup>1/</sup> Confirmation with the Secretary of State's office in California verified that the "date" an expenditure was made is not required to be disclosed. However, the Audit staff noted two expenditures on this report which were disclosed, with dates, on a supplementary schedule. As a result, the cash on hand analysis reflects this information regardless of any assumptions.



MEMORANDUM TO CHARLES N. STEELE  
Page 3

Assumption #1: All Expenditures reported on 1/1/86 - 3/17/86 state report, except where noted, were made after the State Committee became a political committee as defined in the Act. Result: contributions from 5/20/85 to 12/31/85 are included in cash on hand at January 13, 1986.

Assumption #2: All expenditures reported on 1/1/86 - 3/17/86 state report, except where noted, were made before the State Committee became a political committee as defined in the Act. Result: contributions from 8/20/85 to 12/31/85 are included in cash on hand at January 13, 1986.

It was further noted that the State Committee's state reports show no contributions received between January 1 and January 13, 1986.

Based on the information provided in the State Committee's reports filed with the State of California, cash on hand as of January 13 is composed of the following types of contributions<sup>2/</sup>:

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<sup>2/</sup> Please refer to Attachment 1 for definitions of terms used in this analysis.

	<u>Assumption #1</u> 5/20-12/31/85 3/ Contributions	<u>Assumption #2</u> 8/20-12/31/85 3/ Contributions
Contributions from Individuals	\$31,510.00	\$27,118.00
Unitemized Contributions	16,713.00 (5/19-12/31/85)	16,543.00 (7/1-12/31/85)
State Pac's/Trade Assoc.	16,950.00	12,450.00
Apparent Prohibited	8,343.00	6,093.00
Contributions from Businesses	<u>4,944.00</u>	<u>4,694.00</u>
Estimated Cash on Hand at 1/13/86	<u>\$78,460.00</u>	<u>\$66,898.00</u>

— As a result, it appears that the total amount of the State Committee's transfers to the Federal Committee exceeded the amount of permissible Contributions 4/ included in cash on hand as of January 13, 1986, as noted below.

	<u>Assumption #1</u>	<u>Assumption #2</u>
Contributions from Individuals	\$31,510.00	\$27,118.00
Unitemized Contributions	<u>16,713.00</u>	<u>16,543.00</u>
Permissible Contributions <u>4/</u>	48,223.00	43,661.00
Less: Transfers to Federal Committee	<u>(59,377.00)</u>	<u>(59,377.00)</u>
Amount of Transfer In Excess of Permissible Contributions	<u>\$11,154.00</u>	<u>\$15,716.00</u>

3/ In order to come as close to calculated cash on hand as possible, some of the contributions dated 5/20/85 (Assumption #1) and 8/20/85 (Assumption #2) were not included in these calculations. The Audit staff determined which contributions to eliminate in the manner most advantageous to the Committee, consistent to the approach utilized throughout this analysis.

4/ See Attachment 1. These contributions were assumed to be permissible for purposes of facilitating this review.

2. Disclosure Analysis

The Audit staff reviewed the FEC report for the period 1/1/86 through 3/31/86 filed by the State Committee to determine if the State Committee properly disclosed its contributions once it became a political committee as defined by the FECA.

All contributions reported on the FEC report were traced back to the reports filed with the State of California to determine if the contributions comprising cash on hand on the FEC Report were disclosed properly, with these results 5/:

Total Contributions Disclosed	\$59,377.00
Less: Year To Date Errors (38)	(4,360.00)
Cash on Hand Errors (48)	(6,862.00)
Excess Unitemized Contributions Reported	(3,131.00)
Contributions Reported Twice (1)	(129.00)
Interest Income Reported	<u>(1,028.00)</u>
Properly Disclosed Contributions	<u>\$43,867.00</u>
Percentage of Properly Disclosed Contributions	
to Cash on Hand at (1/13/86 - Assumption #1 <u>6/</u>	55.9%

5/ See Attachment 2 for definitions of terms used in this analysis. Item counts in parenthesis, where applicable.

6/ For Assumption #1, this percentage represents \$15,510 in incorrectly disclosed contributions and \$19,083 not disclosed at all.

MEMORANDUM TO CHARLES N. STEELE

Page 6

The State Committee also failed to disclose all non-federal activity from the date that it became a political committee. Based on a review of reports filed with the State of California, this activity includes \$7,250 in contributions, other receipts of \$14,060,<sup>7/</sup> and \$11,129 in expenditures.<sup>8/</sup>

In addition to the information requested in your memorandum of July 30, 1986, the Audit staff was requested to offer an opinion as to the usefulness of an audit of this Committee. First, as noted above, much of the information contained in this memorandum is based on unaudited reports and a series of assumptions. The assumptions are required since the material at hand does not contain sufficient detail to make a determination. If the Committee's records are adequate, an audit would produce a more accurate and certain result. Second, it appears that the State Committee has not reported all of their activity since the date of their registration with the Commission. An audit would produce the information necessary to verify the needed amended reports.

The records required to obtain this information would include bank statements, cancelled checks, contribution records, invoices, receipted bills, journals, ledgers, as well as any other records in the Committee's possession which could bear on the problems addressed above.

As stated earlier, the limited amount of information available for these analyses necessitated the use of a number of assumptions. Changes in any of these assumptions may have a significant affect on the results as presented. If you have any questions, please contact John Mamone or Joe Stoltz at 376-5320.

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<sup>7/</sup> None of the receipts contained in the State Committee's report filed with the State of California for the period 1/1-3/17/86 appear to be permissible.

<sup>8/</sup> Assuming all expenditures were made after 1/13/86.

Attachments as stated

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Definitions:      Cash on Hand Analysis

"Contributions from Individuals"      -      contributions disclosed on the Committee's State reports which identify the contributor as an individual or group of individuals, such as a partnership.

"Unitemized Contributions"      -      contributions disclosed as a lump sum on the state reports of less than \$100 which were not itemized.

"State PAC's/Trade Assoc"      -      contributions from entities which appear to be trade associations (as reported on state reports) and PAC's registered with the State of California (identified by, what appears to be, a state ID number). CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW SINCE STATE LAW PERMITS ACCEPTANCE OF CONTRIBUTIONS FROM CORPORATE/LABOR SOURCES.

"Apparent Prohibited"      -      contributions from entities which have been disclosed on the state reports from corporations or known corporate entities. CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW.

"Contributions from Businesses"      -      contributions from business entities whose corporate status has not been disclosed or confirmed. CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW.

Definitions: Disclosure Review Errors

"Year to Date Errors" - contributor's cumulative year to date total reported instead of contribution included in cash on hand at date of transfer. Explains the apparent discrepancy between amounts reported on State and Federal Reports for some individuals. The difference between the amount on the FEC Report and contributions shown on the California State Reports was apparently received before 5/19/85 or is unitemized.

"Cash on Hand Errors" - contributions reported which are not part of cash on hand at date of transfer (i.e., contributions received prior to beginning of the period determined by the Assumption #1 LIFO analysis.

"Excess Unitemized" - contributions reported as unitemized in excess of the amount disclosed on state reports from 5/19/85 to 12/31/85 (\$16,713) (likely similar to Year to Date + Cash on Hand Errors noted above).

"Interest Income" - income from interest earned on state account-considered error because interest was earned on apparent combined permissible and impermissible contributions.

"Reported Twice" - contributions reported twice on report.





FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger for Congress  
Committee and Jerry  
Crippen, Treasurer  
Friends of Wally Herger for  
Assembly and Jerry Crippen,  
Treasurer

Dear Mr. Herge:

The Federal Election Commission notified your clients on May 23, 1986, of a complaint alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended ("the Act"), and the Commission's regulations. A copy of the complaint was forwarded to your clients at that time. We acknowledge receipt of your clients' response to the complaint.

Upon further review of the allegations contained in the complaint, the Commission on , 1986, determined there is reason to believe:

1. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 433(a) by failing to register in a timely manner.
2. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) and 11 C.F.R. 102.6(a) by transferring to the Wally Herger for Congress Committee campaign funds that included contributions from corporations and other sources which appear to be impermissible under the Act.

*Attachment 3*

87040553019

3. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 434 and 11 C.F.R. § 104.12 by failing to disclose fully and accurately the source(s) of its cash on hand at the time of registration; and, by failing to disclose all receipts and disbursements from the date it became a political committee under the Act.
4. the Friends of Wally Herger for Assembly and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting contributions from the following: California Financial Services Association, Beneficial Management Corporation, 20th Century Insurance Co., Inc., Western United Dairymen, California Grocers Association PAC, California Chiropractic PAC, Mobilehome Parks PAC, California Hospitals PAC, AG Council of California PAC, California Medical Association PAC.
5. the Wally Herger for Congress Committee and Jerry Crippen, as treasurer, violated 2 U.S.C. § 441b(a) by accepting transfers from the Friends of Wally Herger for Assembly which contained contributions from corporations and other sources that appear to be impermissible in connection with a federal election.

You may submit any factual or legal materials that you believe are relevant to the Commission's analysis of this matter. Please file any such response within fifteen days of your receipt of this notification.

If you are interested in pursuing pre-probable cause conciliation, you should so request in writing. See 11 C.F.R. § 111.18(d). Upon receipt of the request, the Office of the General Counsel will make recommendations to the Commission either proposing an agreement in settlement of the matter or recommending declining that pre-probable cause conciliation be pursued. The Office of the General Counsel may recommend that

pre-probable cause conciliation not be entered into at this time so that it may complete its investigation of the matter. Further, requests for pre-probable cause conciliation will not be entertained after briefs on probable cause have been mailed to the respondents.

Requests for extensions of time will not be routinely granted. Requests must be made in writing at least five days prior to the due date of the response and specific good cause must be demonstrated. In addition, the Office of the General Counsel is not authorized to give extensions beyond 20 days.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and 437g(a)(12)(A) unless you notify the Commission in writing that your clients wish the matter to be made public.

If you have any questions, please contact Beverly Kramer, the staff member assigned to this matter, at (202) 376-5690.

Sincerely,

Joan D. Aikens  
Chairman

Enclosure  
Procedures



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

J. Curtis Herge, Esquire  
Herge, Sparks, Christopher & Biondi  
8201 Greensboro Drive, Suite 200  
McLean, VA 22102

RE: MUR 2178  
Wally Herger

Dear Mr. Herge:

On May 23, 1986, the Commission notified your client of a complaint alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended.

The Commission, on 1986, determined that on the basis of the information in the complaint, there is no reason to believe that a violation of any statute within its jurisdiction has been committed by Wally Herger. Accordingly, the Commission closed its file in this matter as it pertains to Mr. Herger. This matter will become a part of the public record within 30 days after the file has been closed with respect to all respondents. The Commission reminds you that the confidentiality provisions of 2 U.S.C. §§ 437g(a)(4)(B) and 437g(a)(12)(A) remain in effect until the entire matter is closed. The Commission will notify you when the entire file has been closed.

Sincerely,

Charles N. Steele  
General Counsel

By: Lawrence M. Noble  
Deputy General Counsel

87040553022



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

August 21, 1986

MEMORANDUM

TO: CHARLES N. STEELE  
GENERAL COUNSEL

THROUGH: JOHN C. SURINA  
STAFF DIRECTOR

FROM: ROBERT J. COSTA  
ASSISTANT STAFF DIRECTOR  
AUDIT DIVISION

SUBJECT: MUR 2178 - FRIENDS OF WALLY HERGER FOR ASSEMBLY  
WALLY HERGER FOR CONGRESS COMMITTEE

On July 30, 1986, the Audit Division was asked by the Office of General Counsel to assist in the review of materials submitted as part of the complaint in the above referenced matter. Specifically, we were asked to help determine the character of contributions composing funds from which eight transfers, totalling \$59,377, were made from the Friends of Wally Herger for Assembly ("the State Committee") to the Wally Herger for Congress Committee ("the Federal Committee"). In addition, the Audit staff was asked to help identify errors related to the disclosure of those contributions on the State Committee's reports which also appeared on the report filed with the Commission. The Office of General Counsel provided the Audit staff with copies of the State Committee's Campaign Disclosure Statements filed with the State of California, as well as FEC reports (Schedule A for the period 1/1/86 to 3/31/86) filed by the State Committee.

Given the limited amount of material available (i.e., no source documentation was provided), the Audit staff was required to make several assumptions to facilitate this review. These were the general assumptions made:

1. Information as disclosed on the state disclosure reports is complete and accurate. This information was used to conduct the analysis of cash on hand and disclosure on Federal reports. This is not audited information.

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2. No analysis could be conducted on contributions not itemized on all reports provided to the Audit staff. For purposes of simplified calculation and conservatism, unitemized contributions are deemed to be permissible contributions.
- 3 Refunds received were excluded from the determination of cash on hand at the time of the initial transfer, under the assumption that funds used to make the original disbursement for these items were received prior to the receipt of contributions which compose cash on hand. In addition, interest income has also been excluded since it almost certainly was paid on both permissible and impermissible contributions.
- 4 Calculations are based on the assumption that the State Committee became a political committee, as defined at 2 U.S.C. § 431(4)(A), on January 13, 1986, the date of the State Committee's first transfer (\$15,067) to the Federal Committee. As a result, the State Committee is required to disclose the contributions which composed cash on hand as of January 13, 1986, and all subsequent contributions and expenditures.

Please note that a change in any of the assumptions noted above would affect the results of this review. In all instances (except where otherwise noted), the approach of maximum benefit to the State and Federal Committees was used.

1. Cash on Hand Analysis:

The Audit staff reviewed the reports filed by the State Committee with the State of California to determine cash on hand and the character of contributions which composed cash on hand on January 13, 1986.

In attempting to use the State Committee's report for the period 1/1/86 through 3/17/86, we found that none of the expenditures disclosed were dated.<sup>1/</sup> As a result, this analysis was conducted based on two different assumptions, as noted below:

- 
- <sup>1/</sup> Confirmation with the Secretary of State's office in California verified that the "date" an expenditure was made is not required to be disclosed. However, the Audit staff noted two expenditures on this report which were disclosed, with dates, on a supplementary schedule. As a result, the cash on hand analysis reflects this information regardless of any assumptions.

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Assumption #1: All Expenditures reported on 1/1/86 - 3/17/86 state report, except where noted, were made after the State Committee became a political committee as defined in the Act. Result: contributions from 5/20/85 to 12/31/85 are included in cash on hand at January 13, 1986.

Assumption #2: All expenditures reported on 1/1/86 - 3/17/86 state report, except where noted, were made before the State Committee became a political committee as defined in the Act. Result: contributions from 8/20/85 to 12/31/85 are included in cash on hand at January 13, 1986.

It was further noted that the State Committee's state reports show no contributions received between January 1 and January 13, 1986.

Based on the information provided in the State Committee's reports filed with the State of California, cash on hand as of January 13 is composed of the following types of contributions<sup>2/</sup>:

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<sup>2/</sup> Please refer to Attachment 1 for definitions of terms used in this analysis.

87040553025

	<u>Assumption #1</u> 5/20-12/31/85 3/ Contributions	<u>Assumption #2</u> 8/20-12/31/85 3/ Contributions
Contributions from Individuals	\$31,510.00	\$27,118.00
Unitemized Contributions	16,713.00 (5/19-12/31/85)	16,543.00 (7/1-12/31/85)
State Pac's/Trade Assoc.	16,950.00	12,450.00
Apparent Prohibited	8,343.00	6,093.00
Contributions from Businesses	<u>4,944.00</u>	<u>4,694.00</u>
Estimated Cash on Hand at 1/13/86	<u>\$78,460.00</u>	<u>\$66,898.00</u>

As a result, it appears that the total amount of the State Committee's transfers to the Federal Committee exceeded the amount of permissible contributions <sup>4/</sup> included in cash on hand as of January 13, 1986, as noted below.

	<u>Assumption #1</u>	<u>Assumption #2</u>
Contributions from Individuals	\$31,510.00	\$27,118.00
Unitemized Contributions	<u>16,713.00</u>	<u>16,543.00</u>
Permissible Contributions <sup>4/</sup>	48,223.00	43,661.00
Less: Transfers to Federal Committee	<u>(59,377.00)</u>	<u>(59,377.00)</u>
Amount of Transfer In Excess of Permissible Contributions	<u>\$11,154.00</u>	<u>\$15,716.00</u>

<sup>3/</sup> In order to come as close to calculated cash on hand as possible, some of the contributions dated 5/20/85 (Assumption #1) and 8/20/85 (Assumption #2) were not included in these calculations. The Audit staff determined which contributions to eliminate in the manner most advantageous to the Committee, consistent to the approach utilized throughout this analysis.

<sup>4/</sup> See Attachment 1. These contributions were assumed to be permissible for purposes of facilitating this review.

2. Disclosure Analysis

The Audit staff reviewed the FEC report for the period 1/1/86 through 3/31/86 filed by the State Committee to determine if the State Committee properly disclosed its contributions once it became a political committee as defined by the FECA.

All contributions reported on the FEC report were traced back to the reports filed with the State of California to determine if the contributions comprising cash on hand on the FEC Report were disclosed properly, with these results 5/:

Total Contributions Disclosed	\$59,377.00
Less: Year To Date Errors (38)	(4,360.00)
Cash on Hand Errors (48)	(6,862.00)
Excess Unitemized Contributions Reported	(3,131.00)
Contributions Reported Twice (1)	(129.00)
Interest Income Reported	<u>(1,028.00)</u>
Properly Disclosed Contributions	<u>\$43,867.00</u>
Percentage of Properly Disclosed Contributions	
to Cash on Hand at (1/13/86 - Assumption #1 <u>6/</u>	55.9%

5/ See Attachment 2 for definitions of terms used in this analysis. Item counts in parenthesis, where applicable.

6/ For Assumption #1, this percentage represents \$15,510 in incorrectly disclosed contributions and \$19,083 not disclosed at all.

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MEMORANDUM TO CHARLES N. STEELE

Page 6

The State Committee also failed to disclose all non-federal activity from the date that it became a political committee. Based on a review of reports filed with the State of California, this activity includes \$7,250 in contributions, other receipts of \$14,060,<sup>7/</sup> and \$11,129 in expenditures.<sup>8/</sup>

In addition to the information requested in your memorandum of July 30, 1986, the Audit staff was requested to offer an opinion as to the usefulness of an audit of this Committee. First, as noted above, much of the information contained in this memorandum is based on unaudited reports and a series of assumptions. The assumptions are required since the material at hand does not contain sufficient detail to make a determination. If the Committee's records are adequate, an audit would produce a more accurate and certain result. Second, it appears that the State Committee has not reported all of their activity since the date of their registration with the Commission. An audit would produce the information necessary to verify the needed amended reports.

The records required to obtain this information would include bank statements, cancelled checks, contribution records, invoices, receipted bills, journals, ledgers, as well as any other records in the Committee's possession which could bear on the problems addressed above.

As stated earlier, the limited amount of information available for these analyses necessitated the use of a number of assumptions. Changes in any of these assumptions may have a significant affect on the results as presented. If you have any questions, please contact John Mamone or Joe Stoltz at 376-5320.

---

<sup>7/</sup> None of the receipts contained in the State Committee's report filed with the State of California for the period 1/1-3/17/86 appear to be permissible.

<sup>8/</sup> Assuming all expenditures were made after 1/13/86.

Attachments as stated

8704053028

Definitions:    Cash on Hand Analysis

"Contributions from Individuals"    -    contributions disclosed on the Committee's State reports which identify the contributor as an individual or group of individuals, such as a partnership.

"Unitemized Contributions"    -    contributions disclosed as a lump sum on the state reports of less than \$100 which were not itemized.

"State PAC's/Trade Assoc"    -    contributions from entities which appear to be trade associations (as reported on state reports) and PAC's registered with the State of California (identified by, what appears to be, a state ID number). CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW SINCE STATE LAW PERMITS ACCEPTANCE OF CONTRIBUTIONS FROM CORPORATE/LABOR SOURCES.

"Apparent Prohibited"    -    contributions from entities which have been disclosed on the state reports from corporations or known corporate entities. CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW.

"Contributions from Businesses"    -    contributions from business entities whose corporate status has not been disclosed or confirmed. CONSIDERED IMPERMISSIBLE FOR PURPOSES OF THIS REVIEW.

8704055029

Definitions: Disclosure Review Errors

"Year to Date Errors" - contributor's cumulative year to date total reported instead of contribution included in cash on hand at date of transfer. Explains the apparent discrepancy between amounts reported on State and Federal Reports for some individuals. The difference between the amount on the FEC Report and contributions shown on the California State Reports was apparently received before 5/19/85 or is unitemized.

"Cash on Hand Errors" - contributions reported which are not part of cash on hand at date of transfer (i.e., contributions received prior to beginning of the period determined by the Assumption #1 LIFO analysis.

"Excess Unitemized" - contributions reported as unitemized in excess of the amount disclosed on state reports from 5/19/85 to 12/31/85 (\$16,713) (likely similar to Year to Date + Cash on Hand Errors noted above).

"Interest Income" - income from interest earned on state account-considered error because interest was earned on apparent combined permissible and impermissible contributions.

"Reported Twice" - contributions reported twice on report.

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HERGE, SPARKS, CHRISTOPHER & BIONDI

ATTORNEYS AT LAW

SUITE 200

8201 GREENSBORO DRIVE  
MCLEAN, VIRGINIA 22102

J. CURTIS HERGE  
ROBERT R. SPARKS, JR.  
A. MARK CHRISTOPHER  
GEORGE V. BIONDI  
DONNA LYNN MILLER

June 20, 1986

Lawrence M. Noble, Esq.  
Deputy General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

RE: MUR 2178

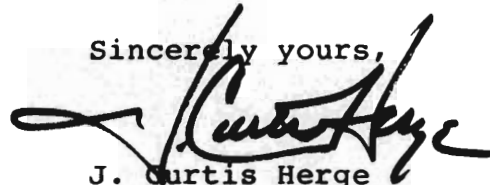
Dear Mr. Noble:

This is written in furtherance of my letter to Mr. Gross, dated June 4, 1986, which was directed to your attention, in which I noticed my appearance as counsel on behalf of the respondents in the above-captioned matter and in which I requested an extension until June 23, 1986, within which to respond.

We submit to you herewith the affidavit of Jerome B. Crippen, also known as Jerry Crippen, the treasurer of Friends of Wally Herger for Assembly and the treasurer of Wally Herger for Congress Committee. In his affidavit, Mr. Crippen has described the procedures used in identifying and reporting the sources and amounts of the funds transferred from Friends of Wally Herger for Assembly to Wally Herger for Congress Committee. It is evident that the actions taken were consistent with the requirements set forth by the Commission in Advisory Opinion 1982-52, Advisory Opinion 1985-2 and Volume 12, Number 1 of the Record. Therefore, the Commission has no reasonable basis to proceed in this matter and the file should be closed.

Do not hesitate to telephone me if you have any questions, or if you should like any additional information, in evaluating this matter.

Sincerely yours,



J. Curtis Herge

:sbl

Enclosure

RECEIVED AT THE FEC  
86 JUN 23 REC# 766  
86 JUN 23 A9:32

86 JUN 23 11:17  
RECEIVED  
GENERAL COUNSEL  
FEDERAL ELECTION COMMISSION

130550404031

## BEFORE THE FEDERAL ELECTION COMMISSION

In the Matter of: )  
 )  
 WALLY HERGER FOR CONGRESS )  
 COMMITTEE, )  
 ) MUR 2178  
 FRIENDS OF WALLY HERGER )  
 FOR ASSEMBLY and )  
 )  
 JERRY CRIPPEN, as treasurer, )  
 )  
Respondents. )

## AFFIDAVIT OF JEROME B. CRIPPEN

STATE OF CALIFORNIA )  
 ) :ss  
 COUNTY OF yuba )

JEROME B. CRIPPEN, also known as Jerry Crippen, being  
 duly sworn, deposes and says:

1. That he is the treasurer of the Wally Herger for Congress Committee, the principal campaign committee of Walter William ("Wally") Herger, Jr., a candidate for election to the United States House of Representatives from the State of California. (The Wally Herger for Congress Committee being hereinafter referred to as the "Federal Committee.")

2. That he is the treasurer of Friends of Wally Herger for Assembly, the principal campaign committee of Walter William ("Wally") Herger, Jr., who was a candidate for election to the Assembly of the State of California. (Friends of Wally Herger for Assembly being hereinafter referred to as the "State

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Committee.")

3. Upon information and belief, the State Committee and the Federal Committee, being campaign committees established by and for the benefit of the same individual, are deemed to be affiliated under the Federal Election Campaign Act of 1971, as amended. 2 U.S.C. §441a(a)(5); 11 CFR §§100.5(g)(2), 110.3(a)(1)(i).

4. Upon information and belief, there is no limit under the Federal Election Campaign Act of 1971, as amended, as to the amount of funds which may be transferred from the State Committee to the Federal Committee. 11 CFR §102.6(a); Advisory Opinion 1982-52.

5. That, during the period from January 13, 1986 through March 11, 1986, the State Committee transferred a total of \$59,377.00 to the Federal Committee.

6. That, in identifying the funds to be transferred from the State Committee to the Federal Committee, the State Committee examined its records concerning the donations most recently received in order to determine whether any of the donations came from prohibited sources or exceeded contribution limitations. Procedural guidance for this examination was found in Advisory Opinion 1982-52 and Advisory Opinion 1985-2. See, also, Federal Election Commission, Record, Vol. 12, Number 1, pages 8-10.

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7. That the sources and amounts of funds identified for transfer from the State Committee to the Federal Committee and which were transferred from the State Committee to the Federal Committee were described in full in the Schedule A for Line 11 of the Report of Receipts and Disbursements of Friends of Wally Herger for Assembly, covering the period January 1, 1986 through March 31, 1986, being the State Committee's April 15 Quarterly Report and Termination Report, which was filed on or about April 14, 1986. Said Report accounted for and identified donations to the State Committee which aggregated \$59,377.00 and reported the transfer of \$59,377.00 from the State Committee to the Federal Committee. See, Schedule B for line 20.

8. That the receipt of the transfer of \$59,377.00 from the State Committee to the Federal Committee was reported on Schedule A for line 12 of the Report of Receipts and Disbursements of Wally Herger for Congress Committee, covering the period January 1, 1986 through March 13, 1986, being the Federal Committee's April 15 Quarterly Report, which was filed on or about April 14, 1986.

9. That the Federal Committee filed an amended Statement of Organization, reporting the State Committee as an affiliated committee.

10. That the State Committee filed a Statement of Organization, reporting the Federal Committee as an affiliated

committee.

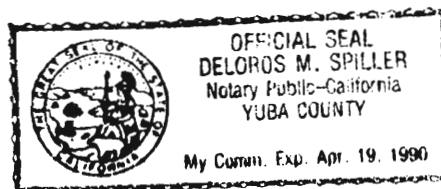
11. That your affiant has used his best efforts to obtain, maintain and submit the information required by the Federal Election Campaign Act of 1971, as amended, as described in Advisory Opinion 1982-52, Advisory Opinion 1985-2 and Volume 12, Number 1 of the Federal Election Commission Record, as they relate to transfers of funds from a State committee to a Federal Committee of the same candidate.

IN WITNESS WHEREOF, your affiant has executed this Affidavit this 19th day of June, 1986.

  
JEROME B. CRIPPEN

Sworn to before me, a Notary Public,  
this 19th day of June, 1986.

  
NOTARY PUBLIC



My Commission Expires: 4-19-1990.

37040653035

3 7 2 4 0 5 8 0 3 6  
HERGE, SPARKS, CHRISTOPHER & BIONDI

SUITE 200

8201 GREENSBORO DRIVE

MCLEAN, VIRGINIA 22102



Lawrence M. Noble, Esq.  
Deputy General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D.C. 20463

86 JUN 23 49:31





FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

June 17, 1986

Wally Herger  
1120 Fourth Avenue  
Rio Oso, CA 95674

Re: MUR 2178

Dear Mr. Herger:

On May 23, 1986, you were notified that the Federal Election Commission received a complaint from Don Gallino alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended. You were also given a copy of the complaint and informed that your response to the complaint should be submitted within fifteen days of your receipt of the notification.

On June 9, 1986, the Commission received a letter and additional documents from the complainant pertaining to the allegations in the complaint. We are enclosing a copy of these materials.

If you have any questions, please contact Beverly Kramer, the staff member assigned to this matter, at (202)376-8200.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Lawrence M. Noble  
Deputy General Counsel

Enclosure

8704055037



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

June 17, 1986

J. Curtis Herge  
Herge, Sparks, Christopher & Biondi  
Attorneys at Law  
Suite 200  
8201 Greensboro Drive  
McLean, Virginia 22102

Re: MUR 2178

Dear Mr. Herge:

On May 23, 1986, your clients were notified that the Federal Election Commission received a complaint from Don Gallino alleging violations of certain sections of the Federal Election Campaign Act of 1971, as amended. Your clients were also given a copy of the complaint and informed that a response to the complaint should be submitted within fifteen days of receipt of the notification.

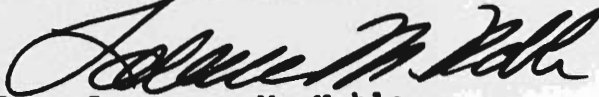
On June 9, 1986, the Commission received a letter and additional documents from the complainant pertaining to the allegations in the complaint. We are enclosing a copy of these materials.

In addition, this letter is in reference to your letter dated June 4, 1986, requesting an extension until June 23 to respond to the Commission's notification of the filing of a complaint. After considering the circumstances presented in your letter, the Commission has determined to grant you your requested extension. Accordingly, your response will be due on June 23, 1986.

If you have any questions, please contact Beverly Kramer,  
the staff member assigned to this matter, at (202)376-8200.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Lawrence M. Noble  
Deputy General Counsel

Enclosure

87040553039

RECEIVED AT THE FEC  
CCH 678  
86 JUN 9 A8: 53

DONALD F. GALLINO  
4784 Alta Camino  
Redding, CA 96002

June 3, 1986

Mr. Charles Steele  
General Counsel  
Federic Election Commission  
999 E Street, N.W. Room 657  
Washington, D.C. 20563

Re: MUR 2178

Dear Mr. Steele:

I am sending you herein, documents that are needed to substantiate my complaint of May 19, 1986, received by you May 20, 1986, against the Wally Herger for Congress Committee et al.

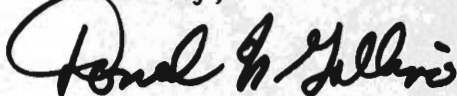
- Statements filed with the California Fair Political Practices Commission (FPPC) by Friends of Wally Herger for Assembly (California State ID # 790456).
- Summary of cash on hand by Friends of Wally Herger for Assembly and receipts by type and period.

These documents show beyond any doubt that Herger for Congress Committee could not possibly have received by transfer from Friends of Wally Herger for Assembly the \$59,000. + without having received impermissible corporate contributions. This accounting gives Herger every benefit of the doubt regarding unitemized contributions.

I am preparing a more detailed account which you will receive in 2 or 3 days, which will show more precisely that the amount of impermissible contributions transferred is between \$14,000. and \$34,000.

It would be helpful at this point if Mr. Herger's accountants would provide more detailed information about the nature of the funds on hand at the time of the transfers and whether or not they complied with "last in, is cash on hand" accounting.

Sincerely,



Donald F. Gallino

RECEIVED  
OFFICE OF THE  
GENERAL COUNSEL

36 JUN 9 A11: 15

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8 7 0 4 0 5 3 0 4 1

1/1/86 to 3/17/86	7/1/85 to 12/31/85	5/19/85 to 6/30/85	3/19/85 to 5/18/85	1/1/85 to 3/17/85	10/21/84 to 12/31/84
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ITEMIZED CORPORATE & PAC  
CONTRIBUTIONS (APPROXIMATE)

\$ 7,250.00	\$25,625.00	\$ 2,650.00	\$12,949.00	\$11,400.00	\$17,725.00
-------------	-------------	-------------	-------------	-------------	-------------

ITEMIZED INDIVIDUAL  
CONTRIBUTIONS (APPROXIMATE)

\$ -0-	\$25,373.00	\$ 600.00	\$ 3,450.00	\$ 3,100.00	\$ 4,688.00
--------	-------------	-----------	-------------	-------------	-------------

UNITEMIZED CONTRIBUTIONS  
(APPROXIMATE)

\$ N/A	\$16,000.00	\$ -0-	\$ 4,500.00	\$ -0-	\$ 1,500.00
--------	-------------	--------	-------------	--------	-------------

CASH ON HAND

\$ N/A	\$79,318.00	\$50,618.00	\$49,369.00	\$28,547.00	\$14,350.00
--------	-------------	-------------	-------------	-------------	-------------

**DETAILED SUMMARY PAGE**  
Receipts and Disbursements  
(Page 2, FEC FORM 3X)

Name of Committee (No Full)

Report Covering the Period

**RIENDS OF WALLY HERGER FOR ASSEMBLY-Individual**  
Account

From: **1-1-86**

To: **3-31-86**

	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>I. RECEIPTS</b>			
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees	59,377.	59,377.	11(a)
(Memo Entry Unitemized \$ . . . . .)			
(b) Political Party Committees			11(b)
(c) Other Political Committees			11(c)
(d) TOTAL CONTRIBUTIONS (other than loans) (Add 11(a), 11(b) and 11(c))	59,377.	59,377.	11(d)
<b>12. TRANSFERS FROM AFFILIATED/OTHER PARTY COMMITTEES</b>			12
<b>13. ALL LOANS RECEIVED</b>			13
<b>14. LOAN REPAYMENTS RECEIVED</b>			14
<b>15. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>			15
<b>16. REFUNDS OF CONTRIBUTIONS MADE TO FEDERAL CANDIDATES</b>			16
<b>AND OTHER POLITICAL COMMITTEES</b>			
<b>17. OTHER RECEIPTS (Dividends, Interest, etc.)</b>			17
<b>18. TOTAL RECEIPTS (Add 11(d), 12, 13, 14, 15, 16 and 17)</b>	59,377.	59,377.	18
<b>II. DISBURSEMENTS</b>			
<b>19. OPERATING EXPENDITURES</b>			19
<b>20. TRANSFERS TO AFFILIATED/OTHER PARTY COMMITTEES</b>	59,377.	59,377.	20
<b>21. CONTRIBUTIONS TO FEDERAL CANDIDATES AND</b>			21
<b>OTHER POLITICAL COMMITTEES</b>			
<b>22. INDEPENDENT EXPENDITURES (use Schedule E)</b>			22
<b>23. COORDINATED EXPENDITURES MADE BY PARTY COMMITTEES</b>			23
(7 U.S.C. § 441 (d)) (Use Schedule F)			
<b>24. LOAN REPAYMENTS MADE</b>			24
<b>25. LOANS MADE</b>			25
<b>26. REFUNDS OF CONTRIBUTIONS TO</b>			
(a) Individuals/Persons Other Than Political Committees			26(a)
(b) Political Party Committees			26(b)
(c) Other Political Committees			26(c)
(d) TOTAL CONTRIBUTION REFUNDS (Add 26(a), 26(b) and 26(c))			26(d)
<b>27. OTHER DISBURSEMENTS</b>			27
<b>28. TOTAL DISBURSEMENTS (add lines 19, 20, 21, 22, 23, 24, 25, 26(d) and 27)</b>	59,377.	59,377.	28
<b>III. NET CONTRIBUTIONS AND NET OPERATING EXPENDITURES</b>			
<b>29. TOTAL CONTRIBUTIONS (other than loans) from Line 11(d)</b>	59,377.	59,377.	29
<b>30. TOTAL CONTRIBUTION REFUNDS from Line 26(d)</b>	-0-	-0-	30
<b>31. NET CONTRIBUTIONS (other than loans) (Subtract Line 30 from Line 29)</b>	59,377.	59,377.	31
<b>32. TOTAL OPERATING EXPENDITURES from Line 19</b>			32
<b>33. OFFSETS TO OPERATING EXPENDITURES from Line 15</b>			33
<b>34. NET OPERATING EXPENDITURES (Subtract Line 33 from Line 32)</b>			34



Information copied from such Reports or Statements may not be sold or used by any person for the purpose of enlisting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

TENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code In Abele x 2 buckle, CA 95912 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Abele Farms Occupation Farmer Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 9-16-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code d Montgomery 18 Burdick Rd ico, CA 95926 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Almond Orchards Occupation Farmer Aggregate Year-to-Date-\$ 500.	Date (month, day, year) 12-20-85	Amount of Each Receipt This Period 500.
Full Name, Mailing Address and ZIP Code l Amarel Box 1323 a City, CA 95991 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Amarel Grain Co. Occupation Owner Aggregate Year-to-Date-\$ 1000.	Date (month, day, year) 9-22-85	Amount of Each Receipt This Period 1000.
Full Name, Mailing Address and ZIP Code n Amarel . Box 67 a City, CA 95959 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 9-18-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code Bartram 5 Esplanade ee, CA 95926 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Vern Bartram, MD Occupation Doctor Aggregate Year-to-Date-\$ 200.	Date (month, day, year) 8-25-85	Amount of Each Receipt This Period 200.
Full Name, Mailing Address and ZIP Code l Bartschi . Box 756 lley, CA 95848 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Paul Bartschi, MD Occupation Doctor Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-18-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code nel Otto Behunnin Sheldon Ave lley, CA 95948 Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-11-85	Amount of Each Receipt This Period 100.
TOTAL of Receipts This Page (optional)			\$2100.
This Period (last page this line number only)			

Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

name of Committee (in Full)

LEADS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code rbara Beutler 55 Pease Rd ha City, CA 95991	Name of Employer  Occupation Homemaker Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 12-20-85	Amount of Each Receipt This Period 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code lter Rolles 1 Acacia Ave ville, CA 95966	Name of Employer  Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 12-28-85	Amount of Each Receipt This Period 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code hard Boyer . Box 667 City, CA 95992	Name of Employer Richard Boyer, MD Occupation Doctor Aggregate Year-to-Date-\$ 121.	Date (month, day, year) 11-20-85	Amount of Each Receipt This Period 121.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code k Brandt El Margarita Rd City, CA 95991	Name of Employer Dick Brandt Ranch Occupation Rancher Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-20-85	Amount of Each Receipt This Period 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Bransford Sioc St 988, CA 95932	Name of Employer Bransford Farms Occupation Farmer Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 7-23-85	Amount of Each Receipt This Period 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code er Brennan B Center St City, CA 95991	Name of Employer Peter Brennan, MAI Occupation Appraiser Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-28-85	Amount of Each Receipt This Period 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code ur Bristow Franklin Rd City, CA 95991	Name of Employer  Occupation Retired Aggregate Year-to-Date-\$ 200.	Date (month, day, year) 9-30-85 11-18-85	Amount of Each Receipt This Period 100. 100.
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
TAL of Receipts This Page (optional)			821.
This Period (last page this line number only)			

Information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

is of Committee (in Full)

ENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code Brock Smith 1 Gray Ave San Jose City, CA 95991	Name of Employer Brock's Ice Cream Occupation Owner Aggregate Year-to-Date-\$ 220.	Date (month, day, year) 7-5-85 11-8-85	Amount of Each Receipt This Period 100. 120.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Lewis Brogan 81 Midway San Jose, CA 95926	Name of Employer Lewis Brogan, Vet. Occupation Veterinarian Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 7-27-85	Amount of Each Receipt This Period 100.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code M. Brown Second St San Jose City, CA 95991	Name of Employer Brown's Gas Occupation Owner Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 12-28-85	Amount of Each Receipt This Period 100.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Bryant 2 Colusa Hwy San Jose City, CA 95991	Name of Employer Bryant Ranch Occupation Farmer Aggregate Year-to-Date-\$ 300.	Date (month, day, year) 7-27-85 10-7-85	Amount of Each Receipt This Period 100. 200.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Burtis Box 2 San Jose, CA 95982	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-9-85	Amount of Each Receipt This Period 100.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Bene Brocker Carriage Square San Jose City, CA 95991	Name of Employer Career Colleges Occupation Owner Aggregate Year-to-Date-\$100.	Date (month, day, year) 11-2-85	Amount of Each Receipt This Period 100.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code Carleton Holden Ave San Jose, CA 95926	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-5-85	Amount of Each Receipt This Period 100.
Report For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
TOTAL of Receipts This Page (optional)			1020.
This Period (last page this line number only)			

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Name of Committee (in Full)

FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward E. Carter 1d Plum Road O. Box 196 Merced City, CA 96125 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Retired Aggregate Year-to-Date-\$ 100.	12-15-85	100.
Christopher Land & Livestock 9 Oak St Merced, CA 95932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Carter Land & Livestock Livestock Aggregate Year-to-Date-\$ 200.	11-11-85	200.
B. Chambers 3 Pratter Rd Merced, CA 95948 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Chambers Farms Farmer Aggregate Year-to-Date-\$ 943.	10-22-85 10-30-85	443. 500.
Christopher Chandler 10 Coats Drive Merced City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Christopher Chandler Attorney Attorney Aggregate Year-to-Date-\$ 100.	11-19-85	100.
James G. Changaris 35 Richland Rd Merced City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	James G. Changaris Attorney Aggregate Year-to-Date-\$ 100.	10-23-85	100.
Conant Orchards 88 Bear Rive Dr Merced Oso, CA 95674 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Conant Orchards Rancher Aggregate Year-to-Date-\$ 200.	11-19-85	200.
Lawrence W. Cox 10 Webster Merced, CA 95932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Farmer Aggregate Year-to-Date-\$ 100.	9-18-85	100.
TOTAL of Receipts This Page (optional)			1743.
AL This Period (last page this line number only)			

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Name of Committee (in Full)

FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code x Daoust O. Box 1071 Crysview, CA 95901	Name of Employer Daoust Chevrolet	Date (month, day, year) 8-30-85	Amount of Each Receipt This Period 200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation New Car Dealer Aggregate Year-to-Date-\$ 200.		
Full Name, Mailing Address and ZIP Code Charles B. Davidson O. Box 604 Carmichael Valley, CA 95946	Name of Employer	Date (month, day, year) 11-9-85	Amount of Each Receipt This Period 200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Aggregate Year-to-Date-\$ 200.		
Full Name, Mailing Address and ZIP Code Thomas E. DeKellis 300 Dolphin Ct San Jose City, CA 95991	Name of Employer Self	Date (month, day, year) 10-17-85 11-19-85	Amount of Each Receipt This Period 100. 100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Farmer Aggregate Year-to-Date-\$ 200.		
Full Name, Mailing Address and ZIP Code Lisa Demmer 5 Vermont St Carmichael, CA 95948	Name of Employer	Date (month, day, year) 12-8-85	Amount of Each Receipt This Period 200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired Aggregate Year-to-Date-\$ 200.		
Full Name, Mailing Address and ZIP Code DeValentine Swanson Rd Oroville, CA 95674	Name of Employer DeValentine	Date (month, day, year) 11-18-85	Amount of Each Receipt This Period 293.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Farmer Aggregate Year-to-Date-\$ 293.		
Full Name, Mailing Address and ZIP Code E. Dickey 594 Combie Rd Carmichael, CA 95603	Name of Employer Combie Plaza	Date (month, day, year) 9-18-85	Amount of Each Receipt This Period 200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Gas Business Aggregate Year-to-Date-\$ 200.		
Full Name, Mailing Address and ZIP Code Gold S. Edwards 1 Ramirez Rd Crysview, CA 95901	Name of Employer	Date (month, day, year) 8-30-85	Amount of Each Receipt This Period 125.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):	Occupation Retired Aggregate Year-to-Date-\$ 125.		
TOTAL of Receipts This Page (optional)			1418.
AL This Period (last page this line number only)			

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Committee (in Full)

TENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

<p>Full Name, Mailing Address and ZIP Code</p> <p>Dorian Faber 1 Dale Ave Irvine City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Dorian Faber, MD</p> <p>Occupation</p> <p>Doctor</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>11-6-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Books Fiske O. Box 243 Marysville, CA 95901</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Retired</p> <p>Occupation</p> <p>Retired</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>9-20-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Joseph Fitzhenry 155 Stone Arch Dr Eads Valley, CA 95945</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Retired</p> <p>Occupation</p> <p>Retired</p> <p>Aggregate Year-to-Date-\$ 193.</p>	<p>Date (month, day, year)</p> <p>10-25-85</p>	<p>Amount of Each Receipt This Period</p> <p>193.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Jim Forsman 100 Plumas-Arboga Rd Marysville, CA 95901</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Self</p> <p>Occupation</p> <p>Farmer</p> <p>Aggregate Year-to-Date-\$ 100</p>	<p>Date (month, day, year)</p> <p>7-22-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Richard French 184 Riosa Rd Colton, CA 95648</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Farm Supply Dealer</p> <p>Occupation</p> <p>Farm Supply Dealer</p> <p>Aggregate Year-to-Date-\$ 100</p>	<p>Date (month, day, year)</p> <p>11-19-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Ronald A. Frye 91 Colusa Hwy Irvine City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Frye &amp; Lonon</p> <p>Occupation</p> <p>Farmer</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>10-7-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Ch Geiselhart O. Box 1103 Geatland, CA 95692</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):</p>	<p>Name of Employer</p> <p>Bear River Farming Coop</p> <p>Occupation</p> <p>Farmer</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>11-30-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>TOTAL of Receipts This Page (optional)</p>			<p>703.</p>
<p>AL This Period (last page this line number only)</p>			



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ENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
mes Gilpatric 7 Darrough Dr ha City, CA 95991	Gilpatric Oil Occupation Oil Dealer Aggregate Year-to-Date-\$ 292.	11-7-85	292.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
d Gingrich 5 Franklin Rd ha City, CA 95991	Ted Ginrich, MD Occupation Doctor Aggregate Year-to-Date-\$ 100.	8-25-85	100.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ald Giovannetti 3 E. Hillcrest Ave ha City, CA 95991	B.E. Giovannetti & Sons Occupation Farmer Aggregate Year-to-Date-\$ 200.	11-10-85	200.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ald Glassgow Box 16 hinceton, CA 95970	Glassgow Occupation Trucker Aggregate Year-to-Date-\$ 200.	11-20-85	200.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gomer Box 72 ha City, CA 95991	 Occupation Title Co. Aggregate Year-to-Date-\$ 100.	11-11-85	100.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ances Gomez x 366 11 River Mills, CA 96028	 Occupation Aggregate Year-to-Date-\$ 100.	11-11-85	100.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
ert Graf 11 Mitchell Ave ville, CA 95965	 Occupation Food Processor Aggregate Year-to-Date-\$ 200.	11-3-85	200.
ipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify):			
TOTAL of Receipts This Page (optional)			1192.
AL This Period (last page this line number only)			

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ing of Committee (in Full)

### TENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joe Graham 9 Plumas St ha City, CA 95991	E. Joe Graham, DDS Occupation DDS Aggregate Year-to-Date-\$ 200.	10-10-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
A. Graham ar Rte 580 ownsville, CA 95919	Occupation Logger Aggregate Year-to-Date-\$ 200.	12-20-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
le Green 18 Market St a City, CA 95991	Dale Green Contracting Occupation Contractor Aggregate Year-to-Date-\$ 200.	12-12-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
B. Grimes Upper Circle Dr as Valley, CA 95945	Occupation Retired Aggregate Year-to-Date-\$ 143.	11-22-85	143.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Grossman Vallombrosa Ave eno, CA 95926	Chico Immediate Care Medical Center Occupation Self-EMPLOYED Aggregate Year-to-Date-\$ 200.	11-9-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
nes Hamilton 1 Del Norte Ave a City, CA 95991	James Hamilton, MD Occupation Doctor Aggregate Year-to-Date-\$ 200.	10-5-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
hael Hanns 4 Doc Adams Rd ysville, CA 95901	Superior Beverage Occupation Salesman Aggregate Year-to-Date-\$ 100.	11-13-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
TOTAL of Receipts This Page (optional)			1243.
AL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page Q of 127 for  
LINE NUMBER 11  
Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Full Name, Mailing Address and ZIP Code Kristen Hansen O. Box 2 Grass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hansen Trucking Occupation Trucking Aggregate Year-to-Date-\$143.	Date (month, day, year) 9-10-85	Amount of Each Receipt This Period 143.
Full Name, Mailing Address and ZIP Code John Haskell O. Box 1716 Grass Valley, CA 95992 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Investment Occupation Investments Aggregate Year-to-Date-\$150.	Date (month, day, year) 10-3-85 10-20-85	Amount of Each Receipt This Period 100. 50.
Full Name, Mailing Address and ZIP Code Dorothy H. Hassman 130 Grinding Rock Rd Grass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Housewife Occupation Housewife Aggregate Year-to-Date-\$100.	Date (month, day, year) 11-19-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code Ernest Hatch 108 River View Dr Grass Valley, CA 95965 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Butte Creek C.C. Occupation Rice Grower Aggregate Year-to-Date-\$343.	Date (month, day, year) 9-18-85	Amount of Each Receipt This Period 343.
Full Name, Mailing Address and ZIP Code James W. Higgins 225 Lakeshore Dr, So. Grass Valley, CA 95603 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date-\$200.	Date (month, day, year) 8-30-85	Amount of Each Receipt This Period 200.
Full Name, Mailing Address and ZIP Code Fred T. Huntington O. Box 991 Grass Valley, CA 95965 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date-\$125.	Date (month, day, year) 10-25-85	Amount of Each Receipt This Period 125.
Full Name, Mailing Address and ZIP Code Carolyn Millerich Rte Lights Landing, CA 95645 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Millerich Farms Occupation Farmer Aggregate Year-to-Date-\$100.	Date (month, day, year) 9-18-85	Amount of Each Receipt This Period 100.
<b>TOTAL of Receipts This Page (optional)</b>			1161.
<b>TOTAL This Period (last page this line number only)</b>			

# SCHEDULE A

# ITEMIZED RECEIPTS

Page 11 of 27  
 LINE NUMBER 11  
 Use separate schedule(s) for each category of the Detailed Summary Page)

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Use of Committee (in Full)

## RIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
om Jopson 255 Pleasant Grove heatland, CA 95692	Jopson Ranch Occupation Farmer Aggregate Year-to-Date-\$1000.	12-28-85	1000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code . E. Jopson 15 Harris St rysaville, CA 95901	Jopson Occupation Farmer Aggregate Year-to-Date-\$500.	8-25-85	500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code J. Justeson 9 Block Rd Wiley, CA 95948	Justeson Ranch Occupation Farmer Aggregate Year-to-Date-\$1000.	9-5-85	1000.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code mply Keeley 140 9th St Glusa, CA 95932	Keeley Ranch Occupation Farmer Aggregate Year-to-Date-\$250.	10-2-85	250.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code eeley Ranch O. Box 1318 Glusa, CA 95932	Keeley Ranch Occupation Farm Aggregate Year-to-Date-\$100.	12-31-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code ide Kitchens 9 Littlejohn iba City, CA 95991	Insurance Aggregate Year-to-Date-\$200.	11-18-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code mes Leathers 2 Elm St odland, CA 95695	Farmer Aggregate Year-to-Date-\$200.	10-30-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
TOTAL of Receipts This Page (optional)			3250.
TOTAL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 11 of 27 for  
LINE NUMBER 111111  
(Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

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Name of Committee (in Full)

**FIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Eugene H. Lonon 110 Ohleyer Rd Folsom City, CA 95991	Frye & Lonon Occupation Farmer Aggregate Year-to-Date-\$ 500.	9-18-85	500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Tomer Lundberg P.O. Box 216 Richvale, CA 95974	Vandy Farms Occupation Rancher Aggregate Year-to-Date-\$ 400.	11-19-85	400.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Douglas McGeough P.O. Box 729 Maxwell, CA 95955	Self Occupation Farming Aggregate Year-to-Date-\$ 100.	11-19-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jack Macko 50 Butte Ave Folsom City, CA 95991	Macko Oil Co Occupation Self Aggregate Year-to-Date-\$ 343.	9-18-85 11-9-85	100. 243.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lanny Marona P.O. Box 1053 Folsom City, CA 95991	Self Occupation Entertainer Aggregate Year-to-Date-\$ 100.	11-14-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
George Meyers 60 Onstott Rd Folsom City, CA 95991	Brady Ranch Occupation Farming Aggregate Year-to-Date-\$ 765.	10-31-85	765.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lenn E. Miller P.O. Box 47 Folsom City, CA 95970	Self Occupation Farmer Aggregate Year-to-Date-\$ 200.	11-10-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
TOTAL of Receipts This Page (optional)			2408.
TOTAL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>Full Name, Mailing Address and ZIP Code</b> Royal Miller, Jr 38 1/2 W. 8th Chico, CA 95926  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Miller Oldsmobile  <b>Occupation</b> Self  <b>Aggregate Year-to-Date—\$</b> 100.	<b>Date (month, day, year)</b> 10-21-85	<b>Amount of Each Receipt this Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> J. A. Miller 77 Hillcrest Ave Ukiah City, CA 95991  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b> Retired  <b>Aggregate Year-to-Date—\$</b> 100.	<b>Date (month, day, year)</b> 9-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> Bill Mitchell 100 Feather River Blvd Elysville, CA 95901  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Mitchell Ranch  <b>Occupation</b> Farming  <b>Aggregate Year-to-Date—\$</b> 243.	<b>Date (month, day, year)</b> 11-30-85	<b>Amount of Each Receipt This Period</b> 243.
<b>Full Name, Mailing Address and ZIP Code</b> Moffitt Farms 532 Larkin Rd Ukiah, CA 95917  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Moffitt Farms  <b>Occupation</b> Farming  <b>Aggregate Year-to-Date—\$</b> 100.	<b>Date (month, day, year)</b> 10-10-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> Warren Moffitt 532 Larkin Rd Ukiah, CA 95917  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Moffitt Farms  <b>Occupation</b> Farmer  <b>Aggregate Year-to-Date—\$</b> 100.	<b>Date (month, day, year)</b> 10-20-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> John Monnot 93 Bunce Rd Ukiah City, CA 95991  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Monnot  <b>Occupation</b> Rancher  <b>Aggregate Year-to-Date—\$</b> 100.	<b>Date (month, day, year)</b> 10-25-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> J. G. Montna 78 Stewart Rd Ukiah City, CA 95991  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Montna Farm  <b>Occupation</b> Rice Farmer  <b>Aggregate Year-to-Date—\$</b> 200.	<b>Date (month, day, year)</b> 11-9-85	<b>Amount of Each Receipt This Period</b> 200.
<b>TOTAL of Receipts This Page (optional)</b>			943.
<b>TOTAL This Period (last page this line number only)</b>			



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**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**RIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Morgan 901 Dayton Rd Fresno, CA 95926	Retired	7-8-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 100.			
Warren Morris P.O. Box 97 Fresno, CA 95950	Self	8-8-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 100.			
Wayne Morrison P.O. Box 29 Fresno City, CA 95991	Morrison's	11-30-85	300.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 300.			
James Moulder 65 Mallick Ave Fresno City, CA 95991	Moulder Realtor	9-22-85	125.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 125.			
Gene Mutersback 13 Market St Fresno, CA 95932	Mutersback	10-20-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 200.			
Amiel Newton 100 Nihell St Fresno City, CA 95959	Retired	9-26-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 100.			
Earl Nichols P.O. Box 25 Heatland, CA 95692	Nichols Point Mobile Home Park	10-8-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Aggregate Year-to-Date-\$ 100.			
<b>TOTAL of Receipts This Page (optional)</b>			1025.
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)

RIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

<p>Full Name, Mailing Address and ZIP Code</p> <p>erle Norene 629 Bear River Dr Heatland, CA 95692</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Norene Ranches</p> <p>Occupation</p> <p>Rancher</p> <p>Aggregate Year-to-Date-\$ 500.</p>	<p>Date (month, day, year)</p> <p>10-5-85</p>	<p>Amount of Each Receipt This Period</p> <p>500.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>harlie Northrop 991 Butte House Rd uba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Stock &amp; Bond Broker</p> <p>Occupation</p> <p>Self</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>7-8-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>as Oji 567 Sawtelle Ave uba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Oji Farms</p> <p>Occupation</p> <p>Farmer</p> <p>Aggregate Year-to-Date-\$ 1000.</p>	<p>Date (month, day, year)</p> <p>9-9-85</p>	<p>Amount of Each Receipt This Period</p> <p>1000.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Onstott Dusters P.O. Box 709 uba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Onstott Dusters</p> <p>Occupation</p> <p>Crop Dusters</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>11-10-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>L. A. Otterson P.O. Box 731 Colusa, CA 95932</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>L. A. Otterson</p> <p>Occupation</p> <p>Farmer</p> <p>Aggregate Year-to-Date-\$ 200.</p>	<p>Date (month, day, year)</p> <p>9-26-85</p>	<p>Amount of Each Receipt This Period</p> <p>200.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>ean Palmer 357 Franklin Rd uba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Mason-McDuffie</p> <p>Occupation</p> <p>Mortgage Broker</p> <p>Aggregate Year-to-Date-\$ 100.</p>	<p>Date (month, day, year)</p> <p>10-19-85</p>	<p>Amount of Each Receipt This Period</p> <p>100.</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>lenn Parker 6578 McCourtney Rd rass Valley, CA 95945</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p></p> <p>Occupation</p> <p>Retired</p> <p>Aggregate Year-to-Date-\$ 143.</p>	<p>Date (month, day, year)</p> <p>11-20-85</p>	<p>Amount of Each Receipt This Period</p> <p>143.</p>
<p>TOTAL of Receipts This Page (optional)</p>			<p>2143.</p>
<p>TOTAL This Period (last page this line number only)</p>			

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**ITEMIZED RECEIPTS**

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name of Committee (in Full)

**RIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>Full Name, Mailing Address and ZIP Code</b> Earl Parker 09 E. 25th St arrysville, CA 95901  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>  <b>Occupation</b> Retired Aggregate Year-to-Date-\$250.	<b>Date (month, day, year)</b> 10-25-85	<b>Amount of Each Receipt This Period</b> 250.
<b>Full Name, Mailing Address and ZIP Code</b> Earl Parker, Jr P.O. Box 2441 arrysville, CA 95901  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> H. Earl Parker, Atty  <b>Occupation</b> Attorney Aggregate Year-to-Date-\$200.	<b>Date (month, day, year)</b> 9-30-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Paul Peterson 175 Woodland Ave Rico, CA 95926  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Peterson's Painting Service  <b>Occupation</b> Painter Aggregate Year-to-Date-\$125.	<b>Date (month, day, year)</b> 10-22-85	<b>Amount of Each Receipt This Period</b> 125.
<b>Full Name, Mailing Address and ZIP Code</b> John F. Rankin 19 Zion St Nevada City, CA 95959  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Rankins Trailer Park  <b>Occupation</b> Self Aggregate Year-to-Date-\$100.	<b>Date (month, day, year)</b> 7-10-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> Janny L. Renfrow 190 Civic Center Blvd iha City, CA 95991  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Chipman & Renfrow  <b>Occupation</b> CPA Aggregate Year-to-Date-\$200.	<b>Date (month, day, year)</b> 11-13-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Donald Richey 14 Rio Linda Ave iico, CA 95926  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Donald Richey, MD  <b>Occupation</b> Doctor Aggregate Year-to-Date-\$200.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Wmry Richter, Jr ar Rte ights Landing, CA 95645  <b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Richter Ranch  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$500.	<b>Date (month, day, year)</b> 9-7-85	<b>Amount of Each Receipt This Period</b> 500.
<b>TOTAL of Receipts This Page (optional)</b>			1575.
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)

RIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Full Name, Mailing Address and ZIP Code ell Riehe 29 Idaho-Maryland Rd rass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Riehe's Supplies Occupation Auto Supplies Aggregate Year-to-Date-\$ 500.	Date (month, day, year) 11-30-85	Amount of Each Receipt This Period 500.
Full Name, Mailing Address and ZIP Code . W. Rienks, Jr .O. Box 988 rrysville, CA 95901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 150.	Date (month, day, year) 8-1-85 11-30-85	Amount of Each Receipt This Period 150.
Full Name, Mailing Address and ZIP Code lwina Robbins 26 Taber Ave Ma City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-19-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code y Robinson rass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Guy Robinson & Sons Occupation Self Aggregate Year-to-Date-\$ 200.	Date (month, day, year) 11-19-85	Amount of Each Receipt This Period 200.
Full Name, Mailing Address and ZIP Code Michael E. Rue 700 Plumas-Arboga Rd rrysville, CA 95901 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Farmer Aggregate Year-to-Date-\$ 200.	Date (month, day, year) 10-30-85	Amount of Each Receipt This Period 200.
Full Name, Mailing Address and ZIP Code uline Russell .O. Box 483 ico, CA 95927 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 7-31-85	Amount of Each Receipt This Period 100.
Full Name, Mailing Address and ZIP Code fred Sadler ol Cassidy iba City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Sadler's Cleaners Occupation Self Aggregate Year-to-Date-\$ 500.	Date (month, day, year) 9-3-85	Amount of Each Receipt This Period 500.
TOTAL of Receipts This Page (optional)			1750.
AL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>Full Name, Mailing Address and ZIP Code</b> Dale Sakuth 1541 Nuestro Rd Yuba City, CA 95991	<b>Name of Employer</b> Dale Sakuth  <b>Occupation</b> Rancher	<b>Date (month, day, year)</b> 12-23-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 100.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> Donald Sargent 804 Loma Rica Rd Marysville, CA 95901	<b>Name of Employer</b>   <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 9-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 100.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> Victor Savage 54 Shasta St Yuba City, CA 95991	<b>Name of Employer</b> Victor Savage, DDS  <b>Occupation</b> Dentist	<b>Date (month, day, year)</b> 9-10-85 11-15-85	<b>Amount of Each Receipt This Period</b> 143. 400.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 543.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> Ymo Scocci 129 Trident Ct Yuba City, CA 95991	<b>Name of Employer</b> Yuba-Sutter Disposal  <b>Occupation</b> Owner	<b>Date (month, day, year)</b> 8-30-85	<b>Amount of Each Receipt This Period</b> 400.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 400.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> Beverly Seghezzi 2694 Mayflower Dr Nevada City, CA 95959	<b>Name of Employer</b> Amos' Bottle Shop, Inc  <b>Occupation</b> Self	<b>Date (month, day, year)</b> 8-20-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 100.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> W. Sellman O. Box 1299 Paradise, CA 95969	<b>Name of Employer</b>   <b>Occupation</b>  	<b>Date (month, day, year)</b> 11-3-85	<b>Amount of Each Receipt This Period</b> 150.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 150.</b>		
<b>Full Name, Mailing Address and ZIP Code</b> Rrell Shirey 1 Joann Way Grass Valley, CA 95945	<b>Name of Employer</b>   <b>Occupation</b> Retired	<b>Date (month, day, year)</b> 10-8-85	<b>Amount of Each Receipt This Period</b> 175.
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date—\$ 175.</b>		
<b>TOTAL of Receipts This Page (optional)</b>			1568.
<b>AL This Period (last page this line number only)</b>			

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**ITEMIZED RECEIPTS**

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**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>A. Full Name, Mailing Address and ZIP Code</b> Steve Carnes P.O. Box 126 Marysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Sierra View Mausoleum  <b>Occupation</b> Owner Aggregate Year-to-Date-\$ 22.	<b>Date (month, day, year)</b> 11-20-85	<b>Amount of Each Receipt This Period</b> 22.
<b>I. Full Name, Mailing Address and ZIP Code</b> Clifton Simmons 581 Ridge Way Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired Aggregate Year-to-Date-\$ 200.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Marvin Snow 85 Valley Ridge Rd Paradise, CA 95969  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired Aggregate Year-to-Date-\$ 410.	<b>Date (month, day, year)</b> 11-2-85	<b>Amount of Each Receipt This Period</b> 410.
<b>Full Name, Mailing Address and ZIP Code</b> Clayton L. Spangler 946 Garden Hwy Nicolaus, CA 95659  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Spangler Bros.  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$ 200.	<b>Date (month, day, year)</b> 10-30-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Chester Spooner P.O. Box 5 Williams, CA 95987  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Spooner Ranch  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 11-30-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> William L. Spangler 932 Garden Hwy Nicolaus, CA 95659  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Spangler Bros.  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$ 200.	<b>Date (month, day, year)</b> 10-26-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Robert Sproat 105 Center St, Ste 103 Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Robert Sproat, DDS  <b>Occupation</b> Dentist Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 11-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>TOTAL of Receipts This Page (optional)</b>			1232.
<b>TAL This Period (last page this line number only)</b>			



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name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Stevens, French & Wood P.O. Box S Truckee, CA 95734	Stevens, French & Wood Attorneys	11-30-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.		
Don Strachan 522 Terra Buena Rd Santa Rosa City, CA 95991	Strachan Apiaries Bee Keeper	11-30-85	200.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 200.		
William Stuke 463 Hwy 99 Tidley, CA 95948	Stuke Nursery Co. Nursery	10-8-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.		
Jack Sullivan P.O. Box 671 Santa Rosa City, CA 95991	Sullivan Ranch Farmer	7-27-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.		
Louis Tarke 1481 S. Butte Rd Cutter, CA 95982	Tarke Bros. Farmer	11-19-85	586.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 586.		
Richard Tarke 1481 S. Butte Rd Cutter, CA 95982	Tarke Bros. Farmer	11-19-85	500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 500.		
Louis W. Tescher Tidley, CA 95948	Tescher Contracting Building Contractor	11-11-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$ 100.		
<b>TOTAL of Receipts This Page (optional)</b>			1686.
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)

FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jagat Singh Thiara P.O. Box 188 Live Oak, CA 95953 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Thiara Ranch Occupation: Farmer Aggregate Year-to-Date-\$100.	11-19-85	100.
Albert Troost 17 Scott Way Grass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date-\$200.	9-18-85	200.
Dan Tucker P.O. Box 127 Gridley, CA 95948 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Tucker Chevrolet Buick Occupation: Car Dealer Aggregate Year-to-Date-\$100.	8-5-85	100.
Brothea Van Eckhardt 44 Jeffrey Dr Yuba City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Interior Designer Aggregate Year-to-Date-\$100.	11-18-85	100.
Peter Wagenhals Car Rte, Box 325 Grass Valley, CA 95919 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date-\$300.	7-10-85	300.
Audie Walker 1426 Partridge Rd Grass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date-\$100.	11-2-85	100.
Eleanor Welch 14 10th Street Plusa, CA 95932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Aggregate Year-to-Date-\$300.	9-20-85	300.
TOTAL of Receipts This Page (optional)			1200.
TOTAL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>Full Name, Mailing Address and ZIP Code</b> George West 182 Long Bar Rd Groville, CA 95962  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 9-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> David Wheeler 15 Windsor Dr uba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Wheeler Olds, Cad.  <b>Occupation</b> Car Dealer Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> eane Williams 288 Larkin Rd Rags, CA 95917  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Retired Aggregate Year-to-Date-\$ 200.	<b>Date (month, day, year)</b> 9-18-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Paig Woods O. Box 2025 ings Beach, CA 95719  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> ohnnie Wurm 020 Walnut Ave arysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Wurm Ranch  <b>Occupation</b> Rancher Aggregate Year-to-Date-\$ 200.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 200.
<b>Full Name, Mailing Address and ZIP Code</b> Charles Yates O. Box 808 olusa, CA 95932  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Yates Ranch  <b>Occupation</b> Rancher Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 9-25-85	<b>Amount of Each Receipt This Period</b> 100.
<b>Full Name, Mailing Address and ZIP Code</b> Charles T. Yerxa ox 269 olusa, CA 95932  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Yerxa Farms  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$ 400.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt This Period</b> 400.
<b>TOTAL of Receipts This Page (optional)</b>			1200.
<b>TOTAL This Period (last page this line number only)</b>			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)

FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

<b>A. Full Name, Mailing Address and ZIP Code</b> Paul D. Young 640 Crestmont Ave Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Paul D. Construction Co.  <b>Occupation</b> Self Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 11-19-85	<b>Amount of Each Receipt this Period</b> 100.
<b>B. Full Name, Mailing Address and ZIP Code</b> Russell Young, Jr Meridian, CA 95957  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Russell Ranch  <b>Occupation</b> Farmer Aggregate Year-to-Date-\$ 143.	<b>Date (month, day, year)</b> 11-15-85	<b>Amount of Each Receipt This Period</b> 143.
<b>C. Full Name, Mailing Address and ZIP Code</b> Unitemized Contributions  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  Aggregate Year-to-Date-\$ 16,087.	<b>Date (month, day, year)</b>   	<b>Amount of Each Receipt This Period</b> 16,087.
<b>D. Full Name, Mailing Address and ZIP Code</b> R. Travis P.O. Box 1467 Sacramento, CA 95691  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Warehouseman  <b>Occupation</b> Executive Aggregate Year-to-Date-\$ 150.	<b>Date (month, day, year)</b> 4-30-85	<b>Amount of Each Receipt This Period</b> 150.
<b>E. Full Name, Mailing Address and ZIP Code</b> Neill Mitchell 1000 Feather River Blvd Marysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Rancher Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 4-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>F. Full Name, Mailing Address and ZIP Code</b> Juanita Kelly 1260 Johnson Ave Marysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 4-11-85	<b>Amount of Each Receipt This Period</b> 100.
<b>G. Full Name, Mailing Address and ZIP Code</b> Hilton Wilson P.O. Box 157 Lincoln, CA 95648  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 4-18-85	<b>Amount of Each Receipt This Period</b> 100.
<b>TOTAL of Receipts This Page (optional)</b>			16,780.
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Arden Ziegenmeyer 7317 Barrow St Sutter, CA 95982		4-23-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$100.	
B. Full Name, Mailing Address and ZIP Code Colusa County Republican Women P.O. Box 269 Colusa, CA 95932		4-8-85	499.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$499.	
C. Full Name, Mailing Address and ZIP Code Ralph Nissen P.O. Box 216 Williams, CA 95987	Self	4-15-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher	Aggregate Year-to-Date-\$100.	
D. Full Name, Mailing Address and ZIP Code Frank Rehmann P.O. Box 6 Live Oak, CA 95953	Self	4-8-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher	Aggregate Year-to-Date-\$100.	
E. Full Name, Mailing Address and ZIP Code James Taylor 12819 Torrey Pines Dr Auburn, CA 95603		3-28-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$100.	
F. Full Name, Mailing Address and ZIP Code Earl Shine 200 Jan Rd Grass Valley, CA 95945		3-31-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$100.	
G. Full Name, Mailing Address and ZIP Code Downey Clinch 506 Linden Ave Grass Valley, CA 95945		4-1-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$100.	
<b>SUBTOTAL of Receipts This Page (optional)</b>			1099.
<b>TOTAL This Period (last page this line number only)</b>			

*By [Signature]*

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>A. Full Name, Mailing Address and ZIP Code</b> Jean Filer 6900 Clark Rd Paradise, CA 95969 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer  Occupation Aggregate Year-to-Date-\$100.	Date (month, day, year) 5-28-85	Amount of Each Receipt This Period 100.
<b>B. Full Name, Mailing Address and ZIP Code</b> John Oakes P.O. Box 1575 Yuba City, CA 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Feather River State Bank Occupation Banker Aggregate Year-to-Date-\$200.	Date (month, day, year) 6-14-85	Amount of Each Receipt This Period 200.
<b>C. Full Name, Mailing Address and ZIP Code</b> Don Beck P.O. Box 79 Tahoe Vista, CA 95732 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Don Beck Realty Occupation Realtor Aggregate Year-to-Date-\$100.	Date (month, day, year) 5-31-85	Amount of Each Receipt This Period 100.
<b>D. Full Name, Mailing Address and ZIP Code</b> Unitemized Contributions Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer  Occupation Aggregate Year-to-Date-\$120.	Date (month, day, year) 120.	Amount of Each Receipt This Period 120.
<b>E. Full Name, Mailing Address and ZIP Code</b> Carol Crain 106 Charles Grass Valley, CA 95945 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer  Occupation Aggregate Year-to-Date-\$100.	Date (month, day, year) 4-18-85	Amount of Each Receipt This Period 100.
<b>F. Full Name, Mailing Address and ZIP Code</b> Akin Ranch P.O. Box 196 Robbins, CA 95676 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer  Occupation Aggregate Year-to-Date-\$100.	Date (month, day, year) 5-7-85	Amount of Each Receipt This Period 100.
<b>G. Full Name, Mailing Address and ZIP Code</b> Gerald Harter 5444 Larkin Rd Live Oak, CA 95953 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$100.	Date (month, day, year) 5-6-85	Amount of Each Receipt This Period 100.
<b>UBTOTAL of Receipts This Page (optional)</b>				820.
<b>TOTAL This Period (last page this line number only)</b>				820.



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>A. Full Name, Mailing Address and ZIP Code</b> Fred Shaeffer 10850 Oroville Hwy Marysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Rancher  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 5-10-85	<b>Amount of Each Receipt This Period</b> 100.
<b>B. Full Name, Mailing Address and ZIP Code</b> Mary Newton 300 Nihell St Nevada City, CA 95959  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Housewife  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 5-1-85	<b>Amount of Each Receipt This Period</b> 100.
<b>C. Full Name, Mailing Address and ZIP Code</b> Ken Charter Rt. 1, Box 62 Arbuckle, CA 95912  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b> Rancher  Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 4-29-85	<b>Amount of Each Receipt This Period</b> 100.
<b>D. Full Name, Mailing Address and ZIP Code</b> Ralph Priest 10210 Forest Springs Dr Grass Valley, CA 95945  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>   Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 3-12-85	<b>Amount of Each Receipt This Period</b> 100.
<b>E. Full Name, Mailing Address and ZIP Code</b> Franklin Schollerman 13553 Lakeview Pl Auburn, CA 95603  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>   Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 3-26-85	<b>Amount of Each Receipt This Period</b> 100.
<b>F. Full Name, Mailing Address and ZIP Code</b> Jacklyn Poundstone P. O. Box 887 Colusa, Ca. 95932  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Rancher  Aggregate Year-to-Date-\$ 500	<b>Date (month, day, year)</b> 1-3-85	<b>Amount of Each Receipt This Period</b> 500.
<b>G. Full Name, Mailing Address and ZIP Code</b> Edward Thomas 11994 Torrey Pines Dr Auburn, CA 95603  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>   Aggregate Year-to-Date-\$ 100.	<b>Date (month, day, year)</b> 3-9-85	<b>Amount of Each Receipt This Period</b> 100.
<b>SUBTOTAL of Receipts This Page (optional)</b>			1100.
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)

FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lester Doty 1168 Bridge St Yuba City, CA 95991	Liquor Store Occupation Owner	3-22-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$100.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Unitemized Contributions			3541.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$3541.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jopson Ranch 1255 Pleasant Grove Rd Sheatland, CA 95692		11-19-85	129.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$129.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Hood 15615 Hummer Ln Grass Valley, CA 95945		2-22-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$100.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Hamilton Stone 214 Sharon Way Grass Valley, CA 95945		2-21-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$100.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ray Miller 1869 Franklin Rd Yuba City, CA 95991	The Refuge Occupation Owner	2-7-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$100.		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wally Pryor 10900 Wissahicken Way Grass Valley, CA 95945	Contractor Occupation Self	2-19-85	100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date-\$100.		
SUBTOTAL of Receipts This Page (optional)			4170.
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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Name of Committee (in Full)  
 FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT

<p>A. Full Name, Mailing Address and ZIP Code                      Betty Hill                      P.O. Box 549                      Penn Valley, CA 95946</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                      True Value Hardware Store</p> <p>Occupation                      Owner</p> <p>Aggregate Year-to-Date-\$100.</p>	<p>Date (month, day, year)                      1-29-85</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>B. Full Name, Mailing Address and ZIP Code                      Charles Phillips                      P.O. Box 2146                      Chico, CA 95927</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                      Farmer's Ins.</p> <p>Occupation                      Sales</p> <p>Aggregate Year-to-Date-\$100.</p>	<p>Date (month, day, year)                      2-4-85</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>C. Full Name, Mailing Address and ZIP Code                      Gladys Perkins                      P.O. Box 6                      Grass Valley, CA 95945</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date-\$100.</p>	<p>Date (month, day, year)                      1-31-85</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>D. Full Name, Mailing Address and ZIP Code                      Wally Reemelin</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date-\$100</p>	<p>Date (month, day, year)                      5-12-85</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>E. Full Name, Mailing Address and ZIP Code                      Charles Larsen                      771 Buschmann Road                      Paradise, Ca. 95969</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                      Self</p> <p>Occupation                      Dentist</p> <p>Aggregate Year-to-Date-\$100</p>	<p>Date (month, day, year)                      5-12-85</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>F. Full Name, Mailing Address and ZIP Code                      Republican Central Committee                      P. O. Box 333                      Marysville, Ca. 95901</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                      N/A</p> <p>Occupation                      N/A</p> <p>Aggregate Year-to-Date-\$100</p>	<p>Date (month, day, year)                      12-12-84</p>	<p>Amount of Each Receipt This Period                      100.</p>
<p>G. Full Name, Mailing Address and ZIP Code                      N. R. Travis                      P. O. Box 1467                      West Sacramento, Ca. 95691</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                      Warehouser</p> <p>Occupation                      Executive</p> <p>Aggregate Year-to-Date-\$150.</p>	<p>Date (month, day, year)                      1-1-8-84</p>	<p>Amount of Each Receipt This Period                      150.</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			<p>750.</p>
<p>TOTAL This Period (last page this line number only)</p>			

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**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 1 of 1  
 Use separate schedule(s) for each category of the Detailed Summary Page

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Name of Committee (in Full)

**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<b>Unitemized Contributions</b>			
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Occupation Aggregate Year-to-Date-\$ 96		96.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer Interest Occupation Aggregate Year-to-Date-\$ 1028.	Date (month, day, year)	Amount of Each Receipt This Period 1028.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer N/A Occupation Housewife Aggregate Year-to-Date-\$ 500.	Date (month, day, year) 11-6-84	Amount of Each Receipt This Period 500.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-5-84	Amount of Each Receipt This Period 100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 11-5-84	Amount of Each Receipt This Period 100.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$ 125.	Date (month, day, year) 11-5-84	Amount of Each Receipt This Period 125.
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Full Name, Mailing Address and ZIP Code	Name of Employer State of California Occupation Attorney Aggregate Year-to-Date-\$ 150.	Date (month, day, year) 11-5-84	Amount of Each Receipt This Period 150.
<b>TOTAL of Receipts This Page (optional)</b>			2099.
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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Name of Committee (in Full)  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY - INDIVIDUAL ACCOUNT**

<b>A. Full Name, Mailing Address and ZIP Code</b> Colusa Co. Republican Cent. Comm. PO Box 269 Colusa, Ca. 95932 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A Occupation N/A Aggregate Year-to-Date-\$ 500	Date (month, day, year) 11-5-84	Amount of Each Receipt This Period 500.
<b>B. Full Name, Mailing Address and ZIP Code</b> Robert Mohammed 1857 S. Butte Road Yuba City, ca. 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$ 150.	Date (month, day, year) 11-2-84	Amount of Each Receipt This Period 150.
<b>C. Full Name, Mailing Address and ZIP Code</b> James Moulder 965 Malick Yuba City, Ca. 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Realtor Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-31-84	Amount of Each Receipt This Period 100.
<b>D. Full Name, Mailing Address and ZIP Code</b> Kewal Singh 932 Mesa Verde Yuba City, ca. 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Self Occupation Rancher Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 100.
<b>E. Full Name, Mailing Address and ZIP Code</b> Clarence Summy 4550 Railroad Yuba City, Ca. 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date-\$ 100.	Date (month, day, year) 10-29-84	Amount of Each Receipt This Period 100.
<b>F. Full Name, Mailing Address and ZIP Code</b> J. W. Hill 548 Winslow Dr. Yuba City, Ca. 95991 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Retired Occupation Retired Aggregate Year-to-Date-\$ 138.	Date (month, day, year) 10-25-84	Amount of Each Receipt This Period 138.
<b>G. Full Name, Mailing Address and ZIP Code</b>  Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Aggregate Year-to-Date-\$	Date (month, day, year)	Amount of Each Receipt This Period
<b>SUBTOTAL of Receipts This Page (optional)</b>			1,088.
<b>TOTAL This Period (last page this line number only)</b>			59,377.

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 64

**REPORTS OF RECEIPTS AND DISBURSEMENTS**  
For Authorized Committee

(Summary Page)

<p><b>1 Name of Committee (in Full)</b> <b>WALLY HERGER FOR CONGRESS COMMITTEE</b></p> <p><b>Address (Number and Street)</b> <b>P.O. Box 123</b></p> <p><b>City, State and Zip Code</b> <b>Yuba City, CA 95992</b></p>	<p><b>2 FEC Identification Number</b> <b>117731</b></p> <p><b>3 Is this Report an Amendment?</b>  <input type="checkbox"/> YES    <input checked="" type="checkbox"/> NO         </p> <p><input type="checkbox"/> Check if address is different than previously reported.</p>
--	---

**TYPE OF REPORT**

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> April 15 Quarterly Report<br><input type="checkbox"/> July 15 Quarterly Report<br><input type="checkbox"/> October 15 Quarterly Report<br><input type="checkbox"/> January 31 Year End Report<br><input type="checkbox"/> July 31 Mid Year Report (Non election Year Only) | <input type="checkbox"/> Twelfth day report preceding _____ (Type of Election)<br>election on _____ in the State of _____<br><input type="checkbox"/> Thirtieth day report following the General Election on _____<br>in the State of _____<br><input type="checkbox"/> Termination Report |
|--|--|

This report contains activity for:    ☒ Primary Election    ☐ General Election    ☐ Special Election    ☐ Runoff Election

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5	Covering Period <b>1-1-86</b> through <b>3-31-86</b>		
6	Net Contributions (other than loans)		
	(a) Total Contributions (other than loans) (from Line 11 (a))	46,657.46	46,657.46
	(b) Total Contribution Refunds (from Line 20 (b))	250.00	250.00
	(c) Net Contributions (other than loans) (subtract Line 6 (b) from 6 (a))	46,407.46	46,407.46
7	Net Operating Expenditures		
	(a) Total Operating Expenditures (from Line 12)	65,836.60	65,836.60
	(b) Total Offsets to Operating Expenditures (from Line 14)	-0-	-0-
	(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))	65,836.60	65,836.60
8	Cash on Hand at Close of Reporting Period (from Line 27)	41,101.88	
9	Debts and Obligations Owed TO The Committee (Itemize all on Schedule C or Schedule D)		
10	Debts and Obligations Owed BY The Committee (Itemize all on Schedule C or Schedule D)	1,000.00	

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

For further information, contact:  
Federal Election Commission  
Toll Free 800 424 9530  
Local 202 523 4088

**JEROME B. CRIPPEN**

Type or Print Name of Treasurer

SIGNATURE OF TREASURER

*4/14/86*  
Date

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g

All previous versions of FEC FORM 3 and FEC FORM 3a are obsolete and should no longer be used.

FEC FORM 3 (3/80)

8704055072



**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

Name of Committee (in Full)		Report Covering the Period:		
WALLY HERGER FOR CONGRESS COMMITTEE		From: 1-1-86	To: 3-31-86	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year to Date	
11. CONTRIBUTIONS (other than loans) FROM:				
(a) Individuals/Persons Other Than Political Committees	43,657.46	43,657.46	11 (a)	
(Memo Entry Unitized \$ 9,128.50 )				
(b) Political Party Committees	3,000.00	3,000.00	11 (b)	
(c) Other Political Committees			11 (c)	
(d) The Candidate			11 (d)	
(e) TOTAL CONTRIBUTIONS (other than loans (add 11 (a), 11 (b), 11 (c) and 11 (d))	46,657.46	46,657.46	11 (e)	
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	59,377.00	59,377.00	12	
13. LOANS:				
(a) Made or Guaranteed by the Candidate			13 (a)	
(b) All Other Loans	1,000.00	1,000.00	13 (b)	
(c) TOTAL LOANS (add 13 (a) and 13 (b))	1,000.00	1,000.00	13 (c)	
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	-0-	-0-	14	
15. OTHER RECEIPTS (Dividends, Interest, etc.)	154.02	154.02	15	
16. TOTAL RECEIPTS (add 11 (e), 12, 13 (c), 14 and 15)	107,188.48	107,188.48	16	
II. DISBURSEMENTS				
17. OPERATING EXPENDITURES	65,836.60	65,836.60	17	
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES			18	
19. LOAN REPAYMENTS:				
(a) Of Loans Made or Guaranteed by the Candidate			19 (a)	
(b) Of All Other Loans			19 (b)	
(c) TOTAL LOAN REPAYMENTS (add 19 (a) and 19 (b))			19 (c)	
20. REFUNDS OF CONTRIBUTIONS TO:				
(a) Individuals/Persons Other Than Political Committees	250.00	250.00	20 (a)	
(b) Political Party Committees			20 (b)	
(c) Other Political Committees			20 (c)	
(d) TOTAL CONTRIBUTION REFUNDS (add 20 (a), 20 (b), and 20 (c))	250.00	250.00	20 (d)	
21. OTHER DISBURSEMENTS			21	
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)	66,086.60	66,086.60	22	
III. CASH SUMMARY				
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$ -0-		23	
24. TOTAL RECEIPTS THIS PERIOD (From Line 16)	\$ 107,188.48		24	
25. SUBTOTAL (Add Line 23 and Line 24)	\$ 107,188.48		25	
26. TOTAL DISBURSEMENTS THIS PERIOD (From Line 22)	\$ 66,086.60		26	
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$ 41,101.88		27	

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Name of Committee (in Full)

NALLY HERGER FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code Fred Montgomery 3108 Burdick Rd Chico, CA 95928	Name of Employer Almont Orchards	Date (month, day, year) 2/18/86	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 200.00	
Full Name, Mailing Address and ZIP Code Peter Olson 521 N. Arden Dr Beverly Hills, CA 90210	Name of Employer	Date (month, day, year) 2/18/86	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 500.00	
Full Name, Mailing Address and ZIP Code Alberta Gilpatric 517 Darrrough Dr Yuba City, CA 95991	Name of Employer Gilpatric Oil Co.	Date (month, day, year) 2/19/86	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 200.00	
Full Name, Mailing Address and ZIP Code Ernest Hatch 348 River View Dr Oroville, CA 95965	Name of Employer Self	Date (month, day, year) 2/19/86	Amount of Each Receipt This Period 250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher	Aggregate Year-to-Date-\$ 250.00	
Full Name, Mailing Address and ZIP Code Ralph Nissen P.O. Box 216 Williams, CA 95987	Name of Employer Self	Date (month, day, year) 2/19/86	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher	Aggregate Year-to-Date-\$ 200.00	
Full Name, Mailing Address and ZIP Code Alfred Sadler 651 Cassidy Yuba City, CA 95991	Name of Employer Sadler's Cleaners	Date (month, day, year) 2/19/86	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 200.00	
Full Name, Mailing Address and ZIP Code Ralph Stephens 1685 Fernald Santa Barbara, CA 93108	Name of Employer	Date (month, day, year) 2/19/86	Amount of Each Receipt This Period 200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date-\$ 200.00	
<b>TOTAL of Receipts This Page (optional)</b>			1,750.00
<b>TOTAL This Period (last page this line number only)</b>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 2 of 10 in  
LINE NUMBER 11a  
(Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

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Name of Committee (in Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
James Denio P.O. Box 999 Roseville, CA 95661	Denio's Farmer's Market Occupation Owner	2/21/86	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$200.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gladys Justeson 469 Black Rd Gridley, CA 95948	Self Occupation Rancher	2/26/86	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$500.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jaquelin Hume 555 Kearny, #1000 San Francisco, CA 94108	Occupation	2/28/86	500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mr. Mel Amarel P.O. Box 1323 Yuba City, CA 95991	Amarel Grain Co Occupation Owner	3/4/86	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mrs. Mel Amarel P.O. Box 1323 Yuba City, CA 95991	N/A Occupation Housewife	3/4/86	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$1000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Janet Lonon 910 Ohleyer Yuba City, CA 95991	Self Occupation Rancher	3/4/86	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Emery Poundstone P.O. Box 887 Colusa, CA 95932	Self Occupation Rancher	3/4/86	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date—\$1000.00		
<b>SUBTOTAL of Receipts This Page (optional)</b>			<b>5200.00</b>
<b>TOTAL This Period (last page this line number only)</b>			

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

<p>1. Full Name, Mailing Address and ZIP Code</p> <p>Dennis Robinson P.O. Box 1620 Oroville, CA 95965</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Robinson Construction</p> <p>Occupation</p> <p>Owner</p> <p>Aggregate Year-to-Date-\$1000.00</p>	<p>Date (month, day, year)</p> <p>3/4/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Betty Tarke 11481 S. Butte Rd Sutter, CA 95982</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Tarke Brothers</p> <p>Occupation</p> <p>Owner</p> <p>Aggregate Year-to-Date-\$500.00</p>	<p>Date (month, day, year)</p> <p>3/4/86</p>	<p>Amount of Each Receipt This Period</p> <p>500.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Mitchell Morgan P.O. Box 991 Marysville, CA 95901</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Morgan &amp; Rhoades</p> <p>Occupation</p> <p>Owner</p> <p>Aggregate Year-to-Date-\$500.00</p>	<p>Date (month, day, year)</p> <p>3/6/86</p>	<p>Amount of Each Receipt This Period</p> <p>500.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Eugene Penne 1940 Jefferson Ave Red Bluff, CA 96080</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Penne Lane Bowling Alley</p> <p>Occupation</p> <p>Owner</p> <p>Aggregate Year-to-Date-\$1000.00</p>	<p>Date (month, day, year)</p> <p>3/6/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Marsha Bamford P.O. Box 309 Challenge, CA 95925</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>N/A</p> <p>Occupation</p> <p>Housewife</p> <p>Aggregate Year-to-Date-\$1000.00</p>	<p>Date (month, day, year)</p> <p>3/7/86 3/21/86</p>	<p>Amount of Each Receipt This Period</p> <p>500.00 500.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>A. A. Emmerson 280 E. 12th Arcata, CA 95521</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p></p> <p>Occupation</p> <p></p> <p>Aggregate Year-to-Date-\$1000.00</p>	<p>Date (month, day, year)</p> <p>3/7/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>David Westcott P.O. Box 45, St Rt Brownsville, CA 95919</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Soper-Wheeler</p> <p>Occupation</p> <p>President</p> <p>Aggregate Year-to-Date-\$1000.00</p>	<p>Date (month, day, year)</p> <p>3/7/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>TOTAL of Receipts This Page (optional)</p>			<p>6000.00</p>
<p>TOTAL This Period (last page this line number only)</p>			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 1 of 1  
 LINE NUMBER 11a  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Aznedo 9416 2nd Ave Elk Grove, CA 95624 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Four Star Electric Occupation President Aggregate Year-to-Date-\$ 200.00	3/10/86	200.00
Wesley Jopson 1255 Pleasant Grove Rd Wheatland, CA 95692 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Self Occupation Rancher Aggregate Year-to-Date-\$ 750.00	3/10/86	750.00
Stephen Cole 4242 Florin Rd Sacramento, CA 95823 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Cole, Cross & Culbreth Occupation Attorney Aggregate Year-to-Date-\$ 500.00	3/13/86	500.00
Jim Jarrett Rt 1, Box 93 Williams, CA 95987 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Self Occupation Rancher Aggregate Year-to-Date-\$ 200.00	3/13/86	200.00
Motorcycle Manufacturer's PAC 3151 Airway Ave, #P-1 Costa Mesa, CA 92626 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		#761017 Occupation N/A Aggregate Year-to-Date-\$ 250.00	3/13/86	250.00
Renee Snider 3305 Dinot Circle Fair Oaks, CA 95628 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		N/A Occupation Housewife Aggregate Year-to-Date-\$ 1000.00	3/13/86	1000.00
Paul Snider 1150 Madison Ave Sacramento, CA 95841 Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Snider Olds Car Dealership Occupation Owner Aggregate Year-to-Date-\$ 1000.00	3/13/86	1000.00
<b>TOTAL of Receipts This Page (optional)</b>				3900.00
<b>TOTAL This Period (last page this line number only)</b>				

MODULE A

ITEMIZED RECEIPTS

Page 2 of 11  
LINE NUMBER 11a  
(Use separate schedule(s) for each category of the Detailed Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committees.

Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

<p>Full Name, Mailing Address and ZIP Code</p> <p>Kari Christopherson 1341 Hunn Rd Yuba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Moore Van &amp; Storage</p> <p>Occupation Admin Asst</p> <p>Aggregate Year-to-Date-\$ 1000.00</p>	<p>Date (month, day, year)</p> <p>3/13/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>John Drake P.O. Box 1448 Chico, CA 95927</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Drake Homes</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date-\$ 500.00</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>500.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>John Kocherer 2150 N. Main St, #7 Red Bluff, CA 96080</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>CA Gas Services</p> <p>Occupation President</p> <p>Aggregate Year-to-Date-\$ 1000.00</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Jack Macko 150 Butte Ave Yuba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Macko Oil Co</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date-\$ 500.00</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>500.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Robert Peppercorn 367 Del Norte, #4 Yuba City, CA 95991</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Self</p> <p>Occupation Doctor</p> <p>Aggregate Year-to-Date-\$ 1000.00</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>Propane PAC 1301 W. 22nd St, #610 Oak Brook, IL 60521</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>#C00079681</p> <p>Occupation N/A</p> <p>Aggregate Year-to-Date-\$ 1000.00</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>1000.00</p>
<p>Full Name, Mailing Address and ZIP Code</p> <p>William Smith 3711 J St Sacramento, CA 95816</p> <p>Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Smith Photography</p> <p>Occupation Owner</p> <p>Aggregate Year-to-Date-\$ 413.30</p>	<p>Date (month, day, year)</p> <p>3/17/86</p>	<p>Amount of Each Receipt This Period</p> <p>413.30</p>
<p>TOTAL of Receipts This Page (optional)</p>			<p>5413.30</p>
<p>TOTAL This Period (last page this line number only)</p>			



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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(Use separate schedule(s) for each  
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Summary Page)

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Name of Committee (In Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> <b>Albert Day</b> <b>95 Farmington Circle</b> <b>Harlboro, MA 01752</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>New York Life Insurance</b>  <b>Occupation</b> <b>Sales</b> <b>Aggregate Year-to-Date—\$ 300.00</b>	<b>Date (month, day, year)</b> <b>3/31/86</b>	<b>Amount of Each Receipt This Period</b>  <b>300.00</b>
<b>B. Full Name, Mailing Address and ZIP Code</b> <b>Victor Werlhof</b> <b>Rt. 5, Box 93-R</b> <b>Chico, CA 95928</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Self</b>  <b>Occupation</b> <b>Doctor</b> <b>Aggregate Year-to-Date—\$ 200.00</b>	<b>Date (month, day, year)</b> <b>3/21/86</b>	<b>Amount of Each Receipt This Period</b>  <b>200.00</b>
<b>C. Full Name, Mailing Address and ZIP Code</b> <b>Richard Boyer</b> <b>P.O. Box 667</b> <b>Yuba City, CA 95991</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Self</b>  <b>Occupation</b> <b>Doctor</b> <b>Aggregate Year-to-Date—\$ 500.00</b>	<b>Date (month, day, year)</b> <b>3/25/86</b>	<b>Amount of Each Receipt This Period</b>  <b>500.00</b>
<b>D. Full Name, Mailing Address and ZIP Code</b> <b>Stanley Friden</b> <b>8909 Oro Fino Rd</b> <b>Fort Jones, CA 96032</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Self</b>  <b>Occupation</b> <b>Rancher</b> <b>Aggregate Year-to-Date—\$ 500.00</b>	<b>Date (month, day, year)</b> <b>3/25/86</b>	<b>Amount of Each Receipt This Period</b>  <b>500.00</b>
<b>E. Full Name, Mailing Address and ZIP Code</b> <b>Merle Norene</b> <b>3629 Bear River Dr</b> <b>Wheatland, CA 95692</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Self</b>  <b>Occupation</b> <b>Rancher</b> <b>Aggregate Year-to-Date—\$ 200.00</b>	<b>Date (month, day, year)</b> <b>3/25/86</b>	<b>Amount of Each Receipt This Period</b>  <b>200.00</b>
<b>F. Full Name, Mailing Address and ZIP Code</b> <b>Steve Carnes</b> <b>P.O. Box 126</b> <b>Marysville, CA 95901</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Sierra View Mortuary</b>  <b>Occupation</b> <b>Owner</b> <b>Aggregate Year-to-Date—\$ 500.00</b>	<b>Date (month, day, year)</b> <b>3/28/86</b>	<b>Amount of Each Receipt This Period</b>  <b>500.00</b>
<b>G. Full Name, Mailing Address and ZIP Code</b> <b>Martin Booth</b> <b>P.O. Box 5</b> <b>Marysville, CA 95901</b>  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> <b>Frank Booth, Inc.</b>  <b>Occupation</b> <b>Chief Exec Ofc</b> <b>Aggregate Year-to-Date—\$ 722.22</b>	<b>Date (month, day, year)</b> <b>3/28/86</b>	<b>Amount of Each Receipt This Period</b>  <b>722.22</b>
<b>SUBTOTAL of Receipts This Page (optional)</b>			<b>2922.22</b>
<b>TOTAL This Period (last page this line number only)</b>			

## SCHEDULE A

## ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
L. R. Booth 2201 Sacramento, #303 San Francisco, CA 94115	Valley Sheet Metal	3/28/86	722.22
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Vice President	Aggregate Year-to-Date-\$ 722.22	
1. Full Name, Mailing Address and ZIP Code Frances Booth P.O. Box 5 Marysville, CA 95901	Name of Employer Frank Booth, Inc.	Date (month, day, year) 3/28/86	Amount of Each Receipt This Period 722.22
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Chairman of the Board	Aggregate Year-to-Date-\$ 722.22	
2. Full Name, Mailing Address and ZIP Code Roberta Andreotti Rt 1, Box 185 Williams, CA 95987	Name of Employer N/A	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 371.50
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Housewife	Aggregate Year-to-Date-\$ 371.50	
3. Full Name, Mailing Address and ZIP Code N. P. Clay P.O. Box 173 Colusa, CA 95932	Name of Employer Andreotti Bros Trucking	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 371.50
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Owner	Aggregate Year-to-Date-\$ 371.50	
4. Full Name, Mailing Address and ZIP Code Eugene Delquido 3245 Rio Dr, #1003 Falls Church, VA 22041	Name of Employer Public Advocate	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive Director	Aggregate Year-to-Date-\$ 500.00	
5. Full Name, Mailing Address and ZIP Code Vincent Hamilton 969 Plumas, #206 Yuba City, CA 95991	Name of Employer Self	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Doctor	Aggregate Year-to-Date-\$ 1000.00	
6. Full Name, Mailing Address and ZIP Code Alex Koshman 9330 Moore Rd Pleasant Grove, CA 95668	Name of Employer Self	Date (month, day, year) 2/19/86 3/31/86	Amount of Each Receipt This Period 25.00 500.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher	Aggregate Year-to-Date-\$ 525.00	
SUBTOTAL of Receipts This Page (optional)			4212.44
TOTAL This Period (last page this line number only)			

## SCHEDULE A

## ITEMIZED RECEIPTS

Page 1 of 1  
 LINE NUMBER 11a  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)  
 WALLY HERGER FOR CONGRESS COMMITTEE

<b>A. Full Name, Mailing Address and ZIP Code</b> Amb. V. Alexis Johnson 3133 Conv. Ave, NW, #627 Washington, D.C. 20008  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer  Occupation Retired Aggregate Year-to-Date-\$ 500.00	Date (month, day, year) 3/31/86	Amount of Each Receipt this Period 500.00
<b>B. Full Name, Mailing Address and ZIP Code</b> CRS Properties 619 9th St, #A Marysville, CA 95901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation N/A Aggregate Year-to-Date-\$ 400.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 400.00
<b>C. Full Name, Mailing Address and ZIP Code</b> John Guth 1141 Robert Dr Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Ashby, Guth & Doughty  Occupation Attorney Aggregate Year-to-Date-\$ 200.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 200.00
<b>D. Full Name, Mailing Address and ZIP Code</b> Roy Lanza P.O. Box 591 Marysville, CA 959901  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Hust Bros  Occupation Owner Aggregate Year-to-Date-\$ 600.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 600.00
<b>E. Full Name, Mailing Address and ZIP Code</b> Judy Robinson P.O. Box 2306 Oroville, CA 95965  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Housewife Aggregate Year-to-Date-\$ 481.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 481.00
<b>F. Full Name, Mailing Address and ZIP Code</b> Cynthia Robinson 5344 Treasure Hill Dr Oroville, CA 95965  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Housewife Aggregate Year-to-Date-\$ 481.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 481.00
<b>G. Full Name, Mailing Address and ZIP Code</b> Renee Robinson 1560 Glen Ellen Dr Gridley, CA 95948  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Housewife Aggregate Year-to-Date-\$ 481.00	Date (month, day, year) 3/31/86	Amount of Each Receipt This Period 481.00
<b>SUBTOTAL of Receipts This Page (optional)</b>			3143.00
<b>TOTAL This Period (last page this line number only)</b>			

## SCHEDULE A

## ITEMIZED RECEIPTS

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 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles H. Bridges P.O. Box 1425 Yuba City, CA 95991	Office Equipment In-Kind	3/3/86	108.50 In-Kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation N/A		
	Aggregate Year-to-Date-\$ 108.50		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Walter H. Christiansen P.O. Box 1330 Yuba City, CA 95991	Butte Pipe & Supply	2/14/86 3/31/86	150.00 100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation General Manager		
	Aggregate Year-to-Date-\$ 250.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ellis Matthews 320 1st St Marysville, CA 95901	Matthews, Crippen & Tenney	2/28/86 3/31/86	40.00 40.00 In-Kind Rent
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA		
	Aggregate Year-to-Date-\$ 80.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jerry Crippen 320 1st St Marysville, CA 95901	Matthews, Crippen & Tenney	2/28/86 3/31/86	40.00 40.00 In-Kind Rent
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA		
	Aggregate Year-to-Date-\$ 80.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jerry Tenney 320 1st St Marysville, CA 95901	Matthews, Crippen & Tenney	2/28/86 3/31/86	40.00 40.00 In-Kind Rent
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation CPA		
	Aggregate Year-to-Date-\$ 80.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Gallagher 3999 Bear River Dr. Rio Oso, CA 95674	Self	3/31/86	247.00 In-Kind
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Pilot		
	Aggregate Year-to-Date-\$ 247.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Jan Leal P.O. Box 1531 Chico, CA 95927	Self	3/31/86	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Rancher		
	Aggregate Year-to-Date-\$ 200.00		
SUBTOTAL of Receipts This Page (optional)			1045.50
TOTAL This Period (last page this line number only)			

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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LIPF NUMBER 11A  
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Name of Committee (in Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

<b>1. Full Name, Mailing Address and ZIP Code</b> Gayle Morrison P.O. Box 29 Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Self  <b>Occupation</b> Moulding Manufacturing <b>Aggregate Year-to-Date—\$</b> 500.00	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Each Receipt This Period</b> 500.00
<b>1. Full Name, Mailing Address and ZIP Code</b> Peter Huckins 625 Bridge St Yuba City, CA 95991  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Superior Beverage  <b>Occupation</b> Owner <b>Aggregate Year-to-Date—\$</b> 300.00	<b>Date (month, day, year)</b> 3/21/86	<b>Amount of Each Receipt This Period</b> 300.00
<b>1. Full Name, Mailing Address and ZIP Code</b> Wayne Hoblit P.O. Box 489 Woodland, CA 95932  Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b> Golden Gate Auto Auctions  <b>Occupation</b> Pilot <b>Aggregate Year-to-Date—\$</b> 142.50	<b>Date (month, day, year)</b> 3/29/86	<b>Amount of Each Receipt This Period</b> 142.50 In-Kind
<b>1. Full Name, Mailing Address and ZIP Code</b>    Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  <b>Aggregate Year-to-Date—\$</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>1. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  <b>Aggregate Year-to-Date—\$</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>1. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  <b>Aggregate Year-to-Date—\$</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>1. Full Name, Mailing Address and ZIP Code</b>   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Name of Employer</b>   <b>Occupation</b>  <b>Aggregate Year-to-Date—\$</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>SUBTOTAL of Receipts This Page (optional)</b>			942.50
<b>TOTAL This Period (last page this line number only)</b>			34,528.96

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 Form 118C  
 (Use separate schedule(s) for each  
 category of the Detailed  
 Summary Page)

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Name of Committee (in Full)

**ALLY HERGER FOR CONGRESS COMMITTEE**

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Frank Hill for Assembly Committee P.O. Box 9246 Whittier, CA 90608	ID #820-144	3/6/86	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$ 1000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Friends of Dronenburg 629 Columbia St San Diego, CA 92101		3/10/86	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$ 1000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lewis for Assembly - Federal P.O. Box 665 Corona Linda, CA 92686		3/13/86	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$ 1000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date-\$		
TOTAL of Receipts This Page (optional)			3,000.00
TOTAL This Period (last page this line number only)			3,000.00



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Name of Committee (in Full)

ALLY HERGER FOR CONGRESS COMMITTEE

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

1/13/86

Amount of Each  
Receipt this Period

15,066.99

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 15,066.99

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

1/24/86

Amount of Each  
Receipt This Period

6,703.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 21,769.99

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

2/3/86

Amount of Each  
Receipt This Period

3,568.13

Receipt For: ☐ Primary ☐ General

☒ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 25,338.12

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

2/4/86

Amount of Each  
Receipt This Period

634.00

Receipt For: ☒ Primary ☐ General

☒ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 25,972.12

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

2/6/86

Amount of Each  
Receipt This Period

103.90

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 26,076.02

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

2/14/86

Amount of Each  
Receipt This Period

751.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 26,827.02

Full Name, Mailing Address and ZIP Code

Friends of Wally Herger for Assembly  
P.O. Box 123  
Tuba City, CA 95991

Name of Employer

CA #790456

Date (month,  
day, year)

2/15/86

Amount of Each  
Receipt This Period

4,000.00

Receipt For: ☒ Primary ☐ General

☐ Other (specify):

Occupation

Campaign Committee

Aggregate Year-to-Date-\$ 30,827.02

TOTAL of Receipts This Page (optional)

30,827.02

TOTAL This Period (last page this line number only)

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Page 2 of 2 for  
LINE NUMBER 12  
Use separate schedule(s) for each  
category of the Detailed  
Summary Page

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Name of Committee (in Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

1. Full Name, Mailing Address and ZIP Code Friends of Wally Herger for Assembly P.O. Box 123 Yuba City, CA 95991	Name of Employer CA #790456	Date (month, day, year) 3/11/86	Amount of Each Receipt This Period 28,549.98
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Campaign Committee Aggregate Year-to-Date-\$ 59,377.00		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
1. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Aggregate Year-to-Date-\$		
SUBTOTAL of Receipts This Page (optional)			28,549.98
TOTAL This Period (last page this line number only)			59,377.00

SCHEDULE A

ITEMIZED RECEIPTS

Page 1 of 1 for  
LINE NUMBER 138.  
(Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

Any information copied from such Reports or Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)  
WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code Royce for Congress P.O. Box 6765 Fullerton, CA 92634	Name of Employer N/A Loan	Date (month, day, year) 3/10/86	Amount of Each Receipt This Period 1,000.00
	Occupation N/A	Aggregate Year-to-Date-\$ 1,000.00	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
	Occupation	Aggregate Year-to-Date-\$	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) 1,000.00

TOTAL This Period (last page this line number only) 1,000.00

870405097

SCHEDULE B

ITEMIZED DISBURSEMENTS

Page 1 of 4 for  
LINE NUMBER 17  
(Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Dick Colby 2211 Lincoln Rd Yuba City, CA 95991	Mailer	1/13/86	15,066.99
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Grass Valley Computers 616 C St Marysville, CA 95901	Computers & Supplies	1/24/86 2/26/86 3/31/86	2,703.00 31.80 95.40
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Russo, Watts & Rollins 770 I. St, #950 Sacramento, CA 95887	Consultants	1/24/86	4,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Pacific Bell Sacramento, CA 95887	Telephone	2/14/86 2/16/86 3/2/86 3/3/86 3/31/86	625.00 60.00 325.00 492.75 477.75
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Christopher Nelson Sugarloaf, CA 92386	Consultant	2/3/86 2/21/86 3/15/86	2,000.00 3,000.00 3,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
National Advertising Co Bedford Park, IL 60501	Billboards	2/15/86 3/12/86	4,000.00 4,018.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Sutter County Clerk County Bldg Yuba City, CA 95991	Filing Fee	2/14/86	751.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
U. S. Postmaster Yuba City, CA 95991	Postage	2/20/86 3/26/86	150.00 100.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
Cottrell Ad Display Co 1014 E. 10th St Long Beach, CA 90813	Billboards	2/21/86 3/21/86	1,347.23 35.50
SUBTOTAL of Disbursements This Page (optional)			42,198.40
TOTAL This Period (last page this line number only)			

## SCHEDULE B

## ITEMIZED DISBURSEMENTS

Page 2 of 17  
 LINE NUMBER 17  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PIP Printing 753 Sutter St Yuba City, CA 95991	Printing	2/26/86	58.94
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/24/86	403.27
	<input type="checkbox"/> Other (specify):	3/25/86	79.18
Hilde Swinehart 941 Richland Rd Yuba City, CA 95991	Employee	3/3/86	761.51
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Sandra Cummings Hooper Rd Yuba City, CA 95991	Employee	3/3/86	478.20
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Normart P.O. Box 1068 Marysville, CA 95901	Printing	3/6/86	325.53
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Brad Zerbe 320 1st St Marysville, CA 95901	Campaign Manager	3/7/86	400.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	3/10/86	2,994.56
	<input type="checkbox"/> Other (specify):	3/28/86	296.40
Valley Rose Printing 421 Center St Yuba City, CA 95991	Mailers	3/10/86	500.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Bank of America 619 E St Marysville, CA 95901	Travel Expenses (VISA)	3/11/86	987.53
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Jay Stott P.O. Box 214 Chico, CA 95927	Billboards	3/16/86	2,520.00
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
Peggy Bristow 1590 Spencer Ln Yuba City, CA 95991	Employee	3/3/86	201.76
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		
	<input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			10,006.88
TOTAL This Period (last page this line number only)			

97040353089

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Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Type Setting		
Fine Print 869 Via de La Paz, Suite B Pacific Palisades, CA 90272	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/20/86	506.94
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Signs		
D & D Printing Consultant 5509 Rallentine #8 Sacramento, CA 95826	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/22/86	450.50
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Signs		
Candidates Outdoor Graphics Svs 1041 Old County Rd Belmont, CA 94002	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/28/86	9,306.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Office Equipment		
Charles W. Bridges P.O. Box 1425 Yuba City, CA 95991	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/3/86	108.50 In-Kind
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Office Rent		
Ellis Matthews 320-1st St Marysville, CA 95901	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Office Rent		
Jerry Crippen 320-1st St Marysville, CA 95901	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Office Rent		
Jerry Tenny 320-1st St Marysville, CA 95901	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Transportation		
Bob Gallagher 3999 Bear River Dr Rio Oso, CA 95674	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/31/86	247.00 In-Kind
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Transportation		
Wayne Hoblit P.O. Box 489 Woodland, CA 95932	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/29/86	142.50 In-Kind
SUBTOTAL of Disbursements This Page (optional)			11,001.44
TOTAL This Period (last page this line number only)			

870405000



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Page 4 of 4  
 LINE NUMBER  
 (Use separate schedule(s) for each category of the Detailed Summary Page)

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Name of Committee (in Full)

**WALLY HERGER FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Christopher Nelson Sugarloaf, Ca. 92386	Re-imburse Travel & Telephone Expense	2/3/86	1,568.13
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/15/86	82.21
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			1,650.34
TOTAL This Period (last page this line number only)			54,857.06

870405091

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Page 1 of 1 for  
LINE NUMBER 20A  
(Use separate schedule(s) for each  
category of the Detailed  
Summary Page)

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

Name of Committee (in Full)

WALLY HERGER FOR CONGRESS COMMITTEE

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Motorcycle Manufacturing, PAC 3151 Airway Ave., #P-1 Costa Mesa, Ca. 92626	Refund of Contribution	3/19/86	250.(X)
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional)			250.(X)
TOTAL This Period (last page this line number only)			250.(X)

2704055092

Name of Committee (in Full) <b>WALLY HERGER FOR CONGRESS COMMITTEE</b>			
A. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
<b>Royce for Congress</b> <b>P.O. Box 6765</b> <b>Fullerton, CA 92634</b>	<b>1,000.00</b>	<b>-0-</b>	<b>1,000.00</b>
Election: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Date Incurred <b>3/10/86</b> Date Due <b>1/1/87</b> Interest Rate <b>10 % (apr)</b> <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item A			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
B. Full Name, Mailing Address and ZIP Code of Loan Source			
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): Terms: Date Incurred Date Due Interest Rate % (apr) <input type="checkbox"/> Secured			
List All Endorsers or Guarantors (if any) to Item B			
1. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer		
	Occupation		
	Amount Guaranteed Outstanding \$		
SUBTOTALS This Period This Page (optional)			<b>1,000.00</b>
TOTALS This Period (last page in this line only)			<b>1,000.00</b>
Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.			

8704053093

**SCHEDULE D**  
(Revised 3/80)

**DEBTS AND OBLIGATIONS**  
**Excluding Loans**

Page 1 of 1 for  
LINE NUMBER 1302  
(Use separate schedules  
for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<b>WALLY HERGER FOR CONGRESS COMMITTEE</b>				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional) . . . . .				-0-
2) TOTAL This Period (last page this line only) . . . . .				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) . . . . .				), (X), (X)
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) . . . . .				1, (X), (X)

9704053024



Form 405  
1936

# AMENDMENT TO CAMPAIGN DISCLOSURE STATEMENT

For use by persons amending statements filed pursuant to Government Code Section 84200-84217. This form must be filed with all filing officers who received the statement being amended. NOTE: This form is not used to amend a Statement of Organization (Form 410).

(Type or Print in Ink)

RECEIVED  
AND FILED

In the Office of the Secretary of State  
of the State of California

APR 17 1986

MARCH FONG EU, Secretary of State

A OFFICIAL USE ONLY

The information required in Section I must correspond to the information provided on the campaign statement.

NAME OF FILER:

Friends of Wally Herger for Assembly

I.D. NO. (IF APPLICABLE)

790456

ADDRESS OF FILER:

P. O. Box 123

NO. AND STREET

CITY

STATE

ZIP CODE

Yuba City, Ca. 95992

AREA CODE PHONE NUMBER

916/741-0447

NAME OF TREASURER (IF APPLICABLE):

Jerry Crippen

PERMANENT ADDRESS OF TREASURER (IF APPLICABLE):

320 First Street

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

Marysville, CA 95901

916/742-8201

The following information amends campaign disclosure statement, Form No. 490, Executed on 3/21/86

(MO., DAY, YR.)

for the period Jan. 1, 1986 to March 17, 1986.

I. The amended information affects items on the:

☐ Front Page

☐ Summary

☒ Schedule(s) G

V. Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement.

Transfer of Contributions to Wally Herger for Congress Committee broken down into more detailed summary.

Reason for amendment:

Accounting Mistake

Include additional information on reverse side or on appropriately labeled continuation sheets. (Number of pages attached 2)

## VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 4/14/86 at Marysville Calif by Jerome B. Crippen

(DATE)

(CITY AND STATE)

(SIGNATURE OF TREASURER)

A candidate or officeholder who controls a committee must also verify the campaign statement.

I have used all reasonable diligence, and to the best of my knowledge, the treasurer has used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 4/13/86 at Marysville, Ca. by Wally Herger

(DATE)

(CITY AND STATE)

(SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
2/12	COGS 1041 County Road Belmont, Ca. 94002	Refund	3,000	
2/12	Dick Colby 2211 Lincoln Road Yuba City, Ca. 95991	Refund	10,000	
2/19	David Evans for Assembly 330 Anita Yuba City, Ca. 95991	Purchase Used Office Equipment	200	
3/11	The Wally Herger Committee 320 First St. Marysville, Ca. 95901	Transfer		30,118
	Interest on Bank Accounts		860	
1/13	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		15,067
1/24	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		6,703
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G			(a)	(b)
			SUBTOTAL	

**SUMMARY**

1.	INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$	
2.	INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)		
3.	TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		
4.	DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))		
5.	DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)		
6.	TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		
7.	TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page	\$	

(May be negative figure)



**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
2/3	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		3,568
2/4	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		634
2/6	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		104
2/14	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		751
2/15	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		4,000
3/11	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		28,550
			(a)	(b)
	If more space is needed, check box at left and attach additional Schedules G	SUBTOTAL	14,060	89,495

**SUMMARY**

INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a) )	\$ 14,060	
INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not Itemized)	14	
TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		14,074
DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b) )	89,495	
DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not Itemized)	18	
TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		89,513
TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		(75,439)

(May be negative figure)



**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

Form 400  
1985

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

**AND FILED**  
in the office of the Secretary of State  
of the State of California  
**MAR 24 1986**  
**MARCH FONG EU, Secretary of State**  
**A OFFICIAL USE ONLY**

Statement covers period from 1-1-86 through 3-17-86

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES:  
14

**I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <u>Wally Herger</u>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly - Third District</u>			
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>1400 Fourth Avenue</u>	<u>Rio Oso</u>	<u>CA</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>	
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>	

**II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>						I.D. NUMBER <u>790456</u>	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>P. O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95992</u>			
NAME OF TREASURER: <u>Jerry Crippen</u>							
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>320 First Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8201</u>	

NAME OF COMMITTEE:						I.D. NUMBER	
ADDRESS OF COMMITTEE: NO. AND STREET CITY STATE ZIP CODE AREA CODE PHONE NUMBER							
NAME OF TREASURER:							
PERMANENT ADDRESS OF TREASURER: NO. AND STREET CITY STATE ZIP CODE AREA CODE PHONE NUMBER							

Attach additional information on appropriately labeled continuation sheets.

**III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

a	COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?	
				YES	NO
	Wally Herger for Congress Fed #117731	P. O. Box 123 Yuba City, CA 95992	Jerry Crippen		

Attach additional information on appropriately labeled continuation sheets.

(A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

**VERIFICATION**

declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that have used all reasonable diligence in their preparation.

Executed on 3/24/86 at Marysville Calif. by Jerry Crippen  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))  
Executed on \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 3/24/86 at Sacramento, Ca. by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

or information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM THROUGH

1-1-86 3-17-86

I.D. NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE

Friends of Wally Herger for Assembly

COLUMN A  
Cumulative  
total from  
previous period \*COLUMN B  
Total this period  
from attached  
schedulesCOLUMN C  
Cumulative  
to date  
(Column A + B)

## CONTRIBUTIONS RECEIVED

1. Monetary contributions .....	\$	7,250	\$	7,250
2. Loans .....		-0-		-0-
3. Subtotal .....	\$	7,250	\$	7,250
4. Non-monetary contributions .....		-0-		-0-
5. Pledges .....		-0-		-0-
6. TOTAL CONTRIBUTIONS .....	\$	7,250	\$	7,250

## EXPENDITURES MADE

7. Payments .....	\$	11,129	\$	11,129
8. Accrued expenses (unpaid bills) .....		-0-		-0-
9. TOTAL EXPENDITURES .....	\$	11,129	\$	11,129

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$	79,318
11. Cash receipts this period (Line 3, Column B above) .....		7,250
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .....		(75,439)
13. Cash payments this period (Line 7, Column B above) .....		11,129
14. Cash on hand at closing date (Lines 10+11+12-13 above) *		-0-
15. Outstanding debts (Line 2 + Line 8 of Column C above) .....		-0-
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) .....	\$	-0-
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .....	\$	( )

\* Ending cash on hand should not be a negative amount

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:

20. EXPENDITURES MADE:

1/1 thru 6/30	7/1 to date

**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES** (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)

DATE	HID EXP.	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
12-31-85					0	0

Attach additional information on appropriately labeled continuation sheets.

• Check box if "Independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

270405100

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM  
7-1-85THROUGH  
12-31-85

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)

790456

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions . . . . .	\$ 38,389	\$ 76,640 SCHEDULE A, LINE 3	\$ 115,029
2. Loans . . . . .	0	0 SCHEDULE B, LINE 3	0
3. Subtotal . . . . .	\$ 38,389 LINES 1 + 2	\$ 76,640 LINES 1 + 2	\$ 115,029 LINES 1 + 2
4. Non-monetary contributions . . . . .	105	630 SCHEDULE C, LINE 3	735
5. Pledges . . . . .	0	0 SCHEDULE D, LINE 3	0
6. TOTAL CONTRIBUTIONS . . . . .	\$ 38,494 LINES 3 + 4 + 5	\$ 77,270 LINES 3 + 4 + 5	\$ 115,764 LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMNS A + B)
<b>EXPENDITURES MADE</b>			
7. Payments . . . . .	\$ 16,743	\$ 57,042 SCHEDULE E, LINE 3	\$ 73,785
8. Accrued expenses (unpaid bills) . . . . .	0	0 SCHEDULE F, LINE 3	0
9. TOTAL EXPENDITURES . . . . .	\$ 16,743 LINES 7 + 8	\$ 57,042 LINES 7 + 8	\$ 73,785 LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMNS A + B)

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) . . . . .	\$ 50,618
11. Cash receipts this period (Line 3, Column B above) . . . . .	76,640
12. Miscellaneous adjustments to cash (Schedule G, Line 7) . . . . .	9,102
13. Cash payments this period (Line 7, Column B above) . . . . .	57,042
14. Cash on hand at closing date (Lines 10+11+12-13 above) * . . . . .	79,318
15. Outstanding debts (Line 2 + Line 8 of Column C above) . . . . .	0
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) . . . . .	\$ 79,318
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) . . . . .	\$ ( )

\* Ending cash on hand should not be a negative amount

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse): \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

	1/1 thru 6/30	7/1 to date
19. CONTRIBUTIONS RECEIVED:		
20. EXPENDITURES MADE:		



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

				STATEMENT COVERS PERIOD	
				FROM	THROUGH
				7-1-85	12-31-85
NAME OF CANDIDATE OR COMMITTEE				I.D. NUMBER (if committee)	
FRIENDS OF WALLY HERGER FOR ASSEMBLY				790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, give its I.D. number as treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9/16	Ag. Council of Calif. ID 791092 P.O. Box 831 Sacramento CA 95804			400	750
9/10	Alliance of Motion Picture & TV Producers 14144 Venture Blvd. Sherman Oaks CA 91423			250	250
9/1	Bank Of America Dept. 3117 San Francisco CA 94137			300	300
7/23 12/31	Beer Wholesalers Comm ID 761487 1127 11th Stree, #806 Sacramento CA 95814	Affairs		1000 500	1500
9/23	J. G. Boswell Co. 4600 Security Pacific Plaza 333 So. Hope St. Los Angeles CA 90071	Plaza		500	500
9/16	CAHPAC ID 741816 1401 21st Street Sacramento CA 95814			500	850
12/2	CAL PAC ID 821455 220 East 23rd Street NY, NY 10010			200	200
<input checked="" type="checkbox"/> If more space is needed, check box at left and attach additional Schedules A.				<b>SUBTOTAL</b>	3650

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$ 60097
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) .....	16543
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....	\$ 76640



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
 FROM 7-1-85 THROUGH 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (IF COMMITTEE)**  
**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-30	CATS - State Pac ID 791058			200	200
9-16	Calif. Auto. Vendors Council ID 760934 11300 Sorrento Valley Rd, Ste. 235 San Diego CA 92121			250	600
9-1	Calif. Cable TV Assoc. ID 745932 3636 Castro Valley Blvd. Ste. 10 Sastro Valley CA 94546			250	600
10-29	Calif. Chiropractic PAC ID 742986 1225 8th St. Ste. 550 Sacramento CA 95814			200	550
10-8	Calif. Cotton Ginners 1850 N. Gateway Blvd. Ste. 144 Fresno Airport Ctr. Fresno CA 93727			500	500
11-10	Calif. Dental PAC ID 742855 1225 8th Stre. #550 Sacramento CA 95814			300	1100
11-1	Calif. Farn Bureau Fed. ID 760960 1601 Exposition Blvd. Sacramento CA 95815			200	550
9-2	Calif. Fertilizer Assoc. PAC ID 850321 701 12th Street, Ste. 110 Sacramento CA 95814			500	850
10-10	Calif. Life Underwriters PAC ID 743365 P.O. Box 4153 Oakland CA 94614			500	750
7-22	Calif. Medical PAC ID 742617 44 Gough St. San Francisco CA 94103			500	850
8-29	Calif. Radiological PAC ID 811596 1030 15th Street, Ste. 250 Sacramento CA 95814			500	850
<b>SUBTOTAL</b>				<b>3900</b>	

☒ If more space is needed, check box at left  
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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR  (if committee, I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER  (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-11	Candy PAC ID 810590 210 El Camino REal. So. San Francisco CA 94080			250	250
8-28	Cargo PAC ID 760458 1240 Bayshore Hwy Burlingame CA 94010			500	500
8-20	Chevron Cor. 225 Bush Street, Room 1706 San Francisco CA 94104			500	500
9-30	Computers Sciences Corp. 2000 Evergreen St. Sacto. CA 95815			500	1000
11-1	CREPAC ID 742276 525 So. Virgil Ave. Los Angeles CA 90020			200	200
9-16	Dow Chemical Western Div. 925 L St. Sacto CA 95814			500	850
8-20	Endless Vacation Systems Inc. P.O. Box 80073 Indianapolis, IND. 46280-0073			500	500
9-16	General Telephone of Calif. Employees ID 790703 P.O. Box 862 Santa Monica CA 90406			500	500
8-23	Farmers Group Inc. 4680 Wilshire Blvd. LA CA 90014			300	300
9-16	Federated Fire Fighters of CA. ID 744058 300 T Street Sacto. CA 95814			250	500
7-20	Firemen's Legislative Action Group ID 746229 2701 K St, Ste 1 Sacto CA 95816			500	500
<b>SUBTOTAL</b>				<b>4500</b>	

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**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-16	FIRES ID 790318 8588 Ridgecrest Drive Paradise CA 95969			250	250
9-1 12-30	Greater Anesthesia Service PAC ID 760981 100 So. Ellsworth #806 San Mateo CA 94401			500 500	1350
8-2	Hollywood Turf Club P.O. Box 369 Inlewood CA 90306			500	500
7-2	Horsemen's Benevolent & Protective Assoc. 500 N 1st Ave. Ste. 5 Arcadia CA 91006			500	750
9-13	Household Finance 10720 Atrium San Diego CA 92131			150	500
8-15	E. F. Hutton One Battery Park Plaza N.Y., NY 10004			300	300
10-20	IMPAC ID 743103 465 Calif. St., Rm. 600 San Francisco CA 94104			500	500
9-16	Independent Oil Producers Agency ID 790456 900 E. Wardlow Rd., Ste. D Long Beach CA 90807			500	500
11-15	Insurers PAC ID 830078 P.O. Box 54600 LA, CA 90054			500	1000
11-10	Irvine Company 550 Newport Circle Dr. Newport Beach CA 92660			500	500
9-16	N.R.A. Political Victory Fund 1600 Rhode Island Ave., N.W. Washington, D.C. 20036			500	500
<b>SUBTOTAL</b>				<b>5200</b>	

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**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-23	Pacific Gas & Electric Co. Employees Good Govt. Fund 77 Beale ST. San Francisco CA 94106			500	500
9-16	Pacific Lighting Corp. 810 S. Flower ST. LA, CA 90017			250	250
9-5	Peach PAC ID 744129 P.O. Box 7001 3704 Mt. Diablo Blvd. #215 Lafayette CA 94549			200	550
10-3	Pearle Vision Ctr., Inc 2534 Royal Ln Dallas, Texas 75229			1000	1000
7-30	Public Securities Assn. PAC ID 810633 P.O. Box 2531 San Francisco CA 94126			500	500
8-22	Seafund Trust Account ID 743464 2222 East 38th Street. Vernon CA 90058			500	500
9-5	Security Pacific Corp. P.O. Box 60468 Mail Code H54-7 LA, CA 90060			500	500
10-2-	Shell Oil Good Govt. Fund P.O. Box 2463 Houston TX 77001			250	600
8-1	Sony Corp. of America 9 West 57th St. N.Y., NY 10019			350	
9-16				500	
8-25	Southern Milk Producers ID 782156 P.O. Box 1296 Chino CA 91710			300	300
7-30	WesproPAC P.O. Box 60694 Sacto., CA 95860			500	500

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**SUBTOTAL**

**5350**

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee)  
 790456

NAME OF CANDIDATE OR COMMITTEE  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, list office I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-28	Western Dairymen's PAC ID 771500 1210 3rd St., Atwater CA 95301			500	500
8-20	Western Mobilehome Parks PAC ID 742422 1225 8th St., Ste. 550 Sacto. CA 95814			500	850
9-16	John Abele Box 2 Arbutle CA 95912	Farmer	Abele Farms	50	100
10-30	ABT, INC. P.O. Box 727 Maxwell CA 95955	Trucking	ABT, Inc.	243	993
12-20	Fred Montgomery 3108 Buadick Rd. Chico CA 95926	Farmer	Almont Orchards	200	500
9-22	Mel Amarel P.O. Box 1323 Yuba City CA 95992	Grain Co.	Amarel Grain Co.	1000	1000
9-18	Frank Amarel P.O. Box 67 Nevada City CA 95959			100	100
8-30	H & A Andreotti Inc. Box 298 Colusa CA 95932	Trucking Co.	H & A Andreotti, Inc.	250	500
10-30	Asby, Guth & Doughty 1095 Stafford Way Yuba city CA 95991	Attorneys	Asby, Guth & Doughty	200	200
11-1	J. W. Bamford, INC. P.O. Box 1 Challenge CA 95925	Self	J. W. Bamford, Inc.	200	200
8-25	Vern Bartram 3105 Esplanada Chico CA 95926	Doctor	Vern Bartram, MD	100	200
<b>SUBTOTAL</b>				<b>3343</b>	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, LIST I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-18	Paul Bartschi P.O. Box 756 Gridley CA 95948	Doctor	Paul Bartschi MD	100	100
11-11	Col. Otto Behunnin 204 Sheldon Ave., Gridley CA 95948	Retired		100	100
12-20	Barbara Beutler 1155 Pease Rd. Yuba city CA 95991	Homemaker		100	100
12-28	Walter Bolles 149 Acacia Ave. Oroville CA 95966			100	100
7-28 10-25	Frank M. Booth 519 D. St. Marysville CA 95901	Merchancial Contractor	Frank M. Booth Inc.	250 250	500
11-20	Ricahrd Boyer P.O. Box 667 Yuba City CA 95992	Doctor	Richard Boyer, MD	121	121
10-20	Dick Brandt 589 El Margarita Rd. Yuba City CA 95991	Rancher	Dick Brandt Ranch	100	100
7-23	Don Bransford 830 Sioc St. Colusa CA 95932	Farming	Bransford Farms	100	100
10-28	Peter Brennan 414 B Center St. Yuba City CA 95991			100	100
9-30 11-18	Arthur Bristow 2339 Franklin Rd. Yuba City CA 95991	Retired		100 100	200
7-5 11-8	Brock Smith 990 Gray Ave. Yuba City CA 95991	Owner	Brock's Ice Cream	100 120	220
SUBTOTAL				1741	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, LIST I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-27	Lewis Brogan 11181 Midway Chico CA 95926	Veterinary	Lewis Brogan Vet.	100	100
12-28	L. M. Brown 413 Second St. Yuba City CA 95991	Self	Brown's Gas	100	100
7-27 10-7	Robert Bryant 3492 Colusa Hwy Yuba City CA 95991	Farmer	Bryant Ranch	100 200	300
11-9	Newell Burtis P.O. Box 2 Sutter CA 95982	Retired		100	100
10-13	Buttes Pipe & Supply P.O. Box 1330 Yuba City CA 95992	Co.	Buttes Pipe & Supply	250	250
11-2	Marlene Bocker 100 Carriage Square Yuba City CA 95991	Owner	Career Colleges	100	100
10-5	W. A. Carleton 1004 Holden Ave. Chico CA 95926			100	100
12-15	Howard E. Carter Wild Plum Road P.O. Box 196 Sierra City CA 96125	Retired		50	100
11-11	Carter Land & Livestock 909 Oak St. Colusa CA 95932	Livestock	Carter Land & Livestock	200	200
10-22 10-30	R. B. Chambers 503 Pratter Rd. Gridley CA 95948	Farmer	Chambers Farms	443 500	943
11-19	Christoper Chandler 1510 Coats Drive Yuba city cA 95991	Attorney	Christoper Chandler Attorney	100	100
SUBTOTAL				2343	

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**MONETARY CONTRIBUTIONS RECEIVED**  
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**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 7-1-85 **THROUGH** 12-31-85

**I.D. NUMBER (if committee)**  
**790456**

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-23	James G. Changaris 1535 Richland Rd. Yuba City CA 95991	Attorney	James G. Changaris	100	100
11-19	Conant Orchards 3688 Bear Rive Dr. Rio Oso CA 59674	Ranch	Conant Orchards	200	200
11-30	Melvin J. Corry 771 Buschmann Rd. Paradise CA 95969	Doctor	Melvin J. Corry, MD	100	100
9-18	Laurence W. Cox 1010 Webster Colusa CA 95932	Farmer		50	100
11-23	Angelo Danna P.O. Box 5428 San Jose CA 95150	Grower & Packer	Danna & Danna, Inc.	200	200
8-30	Lex Daoust P.O. Box 1071 Marysville CA 95901	New Car Dealer	Daoust Chev.	100	200
11-9	Charles B. Davidson P.O. Box 604 Penn Valley CA 95946			200	200
10-17 11-19	Thomas E. DeKellis 1000 Dolphin Ct. Yuba City CA 95991	Farmer		100 100	200
12-8	Anna Demmer 735 Vermont ST. Gridley CA 95948	Retired		100	200
11-18	Joe DeValentine 555 Swanson Rd. Rio Oso CA 95674	Farmer	DeValentine	43 250	293
9-18	K. E. Dickey 10594 Combie Rd. Auburn CA 95603	Gas Business	Combie Plaza	100	200
<input checked="" type="checkbox"/> If more space is needed, check box at left and attach additional Schedules A.				<b>SUBTOTAL</b>	1643

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS FO WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-14	Gary N. Dibble P.O. Box 2361 Marysville CA 95901	Self	Gary N. Dibble, Inc.	100	100
9-20	Drake Homes P.O. Box 1448 Chico CA 95927	Self	Drake Homes	500	500
8-30	Harold S. Edwards 770 Ramirez Rd. Marysville CA 95901	Retired		125	125
11-6	Dorian Faber 571 Dale Ave., Yuba City CA 95991	Doctor	Dorian Faber, MD	50	100
11-10	Bob Porter 4425 W. Riego Rd Sacramento CA 95837	Self	Farm-Air Flying Service INC.	200	200
11-4	First Interstate Bank General Account Div. LA 600 So. Spring St., LA CA 90054	Bank	First Interstate Bank	200	200
9-20	Brooks Fiske P.O. Box 243 Marysville CA 95901	Retired		50	100
10-25	Joseph Fitzhenry 10155 Stone Arch Dr. Grass Valley CA 95945			43	193
7-22	John Forsman 2700 Plumas-Arboga Rd. Marysville CA 95901	Farmer		100	100
11-3	Fox Electric 3995 Olive Hwy Oroville CA 95965	Electric Co.	Fox Co.	100	100
11-19	Richard French 1984 Riosa Rd. Lincoln Ca 95648	Farmer Supply	Dealer	100	100

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SUBTOTAL 1568

## SCHEDULE A

## NETARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

7-1-85 12-31-85

I.D. NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE

FRIENDS FO WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNTS	
				RECEIVED	CUMULATIVE TO DATE
10-7	Gerald A. Frye 4291 Colusa Hwy Yuba City CA 95991	Farmer	Frye & Lonon	100	100
11-30	Rich Geiselhart		Bear River Farming Coop.	100	100
11-7	James Gilpatric 617 Darrrough Dr Yuba City CA 95991	Oil Dealer	Gilpatric Oil	42	292
8-25	Ted Gingrich 976 Franklin Rd. Yuba City CA 95991	Doctor	Ted Ginrich, MD	100	100
11-10	Ronald Giovannetti 733 E. Hillcrest Ave. Yuba City CA 95991	Farmer	B.E. Giovannetti & Sons	200	200
11-20	Ronald Glassgow P.O. Box 16 Princeton CA 95970	Trucker	Glassgow	200	200
11-11	Lee Gomer P.O. Box 72 Yuba City CA 95991	Title Co.		100	100
11-11	Frances Gomez Box 366 Fall River Mills CA 96028			100	100
11-2	Golden State Tractor Co P.O. Box 650 Woodland CA 95695	John Deere Dealership	Golden State Tractor Co.	243	243
11-3	Robert Graf 1601 Mitchell Ave. Oroville CA 95965	Food Processor		200	200
10-10	E. Joe Graham 909 Plumas St Yuba city CA 95991	DDS	E. Joe Grahma DDS	200	200
SUBTOTAL				1585	

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 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
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NAME OF CANDIDATE OR COMMITTEE

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				RECEIVED	CUMULATIVE TO DATE
12-20	W. A. Graham Star Rte, 580 Brownsville CA 95919	Logger		200	200
12-12	Dale Green 1548 Market St. Yuba City CA 95991	Contractor	Dale Green Contracting	100	200
11-22	W. C. Grimes 214 Upper Circle Dr Grass Valley CA 95945			43	143
9-23	H. A. Grinnell 1311 Downing Ave. Chico CA 95926	Self	H. A. Grinnell & Sons Inc.	100	100
11-9	Roy Grossman 376 Vallombrosa Ave. Chico CA 95926	Self	Chico Immediate Care Medical Center	200	200
10-5	James Hamilton 393 Del Norte Ave. Yuba City CA 95991	Doctor	James Hamilton MD, Inc.	100	200
11-13	Michael Hanns 7474 Doc Adams Rd Marysville CA 95901			100	100
9-10	Karsten Hansen P.O. Box 2 Grass Valley CA 95945	Trucking	Hansen Trucking	43	143
10-3	James L. Harrison P.O. Box 3307 Yuba City CA 95991	Self	James L. Harrison INC.	200	200
10-3 10-20	Coburn Haskell P.O. Box 1716 Yuba City CA 95992	Investments		100 50	175
11-19	Dorothy H. Hassman 10030 Grinding Rock Rd. Grass Valley CA			100	100

SUBTOTAL 1336

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FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)

790456

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				RECEIVED	CUMULATIVE TO DATE
9-18	Ernest Hatch 348 River View DR. Oroville CA 95965	Rice Grower	Butte Creek C.C.	243	341
11-11	Hi & Dry Warehouse P.O. Box 378 Sutter CA 95982	Dryer	Hi & Dry Warehouse Inc.	200	200
8-30	James W. Higgins 12225 Lakeshore Dr. So. Auburn CA 95603			100	200
11-19	Howell & Howell	Atty's	Howell & Howell	100	100
10-25	Fred T. Huntington P.O. Box 991 Oroville CA 95965	Retired		25	125
9-18	Carolyn Illerich Star Rte. Knights Landing CA 95645	Farmer	Illerich Farms	50	100
10-28	Ingram Realtors 352 Vallombrosa Chico CA 95926	Realtor	Ingram Realtors, Inc.	100	100
11-15	Leonard Bard 1618 Mangrove Ave. Chico CA 95926	Self	Inlane Valley Insurance Service	100	100
11-9 12-28	Jopson Ranch 1255 Pleasant Grove Wheatland CA 95692	Farmer	Jopson Ranch	500 129	1000
8-25	W. E. Jopson 705 Harris St. Marysville CA 95901	Farm	Jopson	500	500
9-5	M. J. Justeson 469 Block Rd Gridley CA 95948	Farmer	Justeson Ranch	600 400	1000
SUBTOTAL				3047	

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**FORM 420, 430 OR 490**

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NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF Wally Herger for Assembly**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-2	Raply Keeley 1040 9th St Colusa CA 95932	Farmer	Keeley Ranch	250	250
12-31	Keeley Ranch P.O. Box 1318 Colusa CA 95932	Farm	Keeley Ranch	100	100
7-31	King Chevrolet 1501 Mangrove Chico CA 95927	Car Dealer	King Chevrolet Inc.	100	100
11-18	Wade Kitchens 469 Littlejohn Yuba City CA 95991	Insurance		200	200
10-30	James Leathers 922 Elm St Woodland CA 95695	Farmer		100	200
9-18	Eugene H. Lonon 910 Ohleyer Rd yuba city CA 95991	Farmer	Frye & Lonon	500	500
11-19	Homer Lundberg P.O. Box 216 Richvale CA 95974	Rancher	Vandy Farms	400	400
11-19	Douglas McGeoghegan P.O. Box 729 Maxwell CA 95955	Farming		100	100
9-18 11-9	Jack Macko 150 Butte Ave. Yuba City CA 95991	Self	Macko Oil Co.	100 243	343
11-14	Danny Marona P.O. Box 1053 Yub City CA 95991	Entertainer		100	100
7-9	Bob Martin 91 Canyon Drive Oroville CA 95965	Self	Butte Land Devel. Corp.	100	00
<b>SUBTOTAL</b>				<b>2293</b>	

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**MONETARY CONTRIBUTIONS RECEIVED**  
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**FORM 420, 430 OR 490**

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STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)  
**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-16	Matthews, Crippen, Tenney & Co. P.O. Box 1672 Marysville CA 95901	CPA's	Matthews, Crippen, Tenney & Co.	129	129
10-31	George Meyers 860 Onstott Rd. Yuba City CA 95991	Farming	Brady Ranch	265	765
11-10	Glenn E. Miller P.O. Box 47 Princeton CA 95970			200	200
12-20 7-27	Henry Miller 8349 Oroville Hwy Marysville CA 95901	Tractor Business		100 100	200
10-21	Royal Miller Jr. 638 1/2 W. 8th Chico CA 95926			100	100
9-18	T.A. Miller 977 Hillcrest Ave. Yuba City CA 95991	Retured		100	100
11-30	Neill Mitchell 1900 Teather River Blvd. Marysville CA 95901	Farming	Mithcell Ranch	243	243
10-10	Moffitt Farms 2532 Lakrin Rd Biggs CA 95917	Farm	Moffitt	100	100
10-20	Warren Moffitt 2532 Lrkin Rd. Biggs CA 95917	Farmer	Moffitt Farms	100	100
10-25	John Monnot 493 Bunce Rd Yuba City CA 95991	Rancher	Monnot	100	100
11-9	A. G. Montna 678 Stewart Rd Yuba City CA 95991	Rice Farmer	Montna Farm	200	200

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

**1737**

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)  
**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OF TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-8	Frank Morgan 1901 Dayton Rd Chico CA 95926	Retired		100	100
10-25	Mitchell Morgan	Moving Business		600	1000
10-22	1049 Cam Bridge Ct. Yuba City CA 95991			400	
8-8	C. Warren Morris P.O. Box 97 Grimes CA 95950			100	100
11-30	Gayle Morrison P.O. Box 29 Yuba City CA 95991	Moulding Mfg.	Morrison's	200	300
9-22	James Moulder 965 Malick Ave. Yuba City CA 95991	Real Estate	Moulder Realtor	125	125
11-12	Geo. Murray P.O. Box 988 Yuba City CA 95991	REal Estate	Geo. Murray Corp.	243	243
10-20	Eugene Muttersback 613 Market St. Colusa CA 95932	Atty.	Muttersback	100	200
11-20	Nelson Farms, Inc. 3126 Betz Road Wheatland CA 95692	Farming	Nelson Farms Inc.	200	200
9-26	Daniel Newton 300 Nihell St. Nevada City CA 95959			100	100
10-8	Karl Nichols P.O. Box 25 Wheatland CA 95692			100	100
10-5	Norene Ranches 3629 Bear River Dr. Wheatland CA 95692	Franch	Norene Ranches	500	500

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL**

**2768**

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-8	Charlie Northrop 2891 Butte House Rd Yuba City CA 95991	Self	Stock & Bond Broker	100	100
7-12	David A. Offutt 1489 Country Club Ave. Marysville CA 95901	Atty.	David A. Offutt, Atty.	100	100
9-9	Mas Oji 8547 Sawtelle Ave. Yuba City CA 95991	Farmer	Oji Farms	1000	1000
11-10	Onstott Dusters P.O. Box 709 Yuba City CA 95991	Crop Dusters	Onstott Dusters	100	100
9-26	L. A. Otterson P.O. Box 731 Colusa CA 95932	Farmer	L.A. Otterson	100	200
10-10	David W. Galitz P.O. Box 37 Scotia CA 95565	Lumber Business	Pacific Lumber Co.	100	100
10-19	Dean Palmer 1357 Frnaklin Rd Yuba City CA 95991	Mortgagae Broker	Mason-MuDuffie	100	100
11-20	Glenn Parker 16578 McCourtney Rd Grass Valley CA			43	143
10-25	H. Earl Parker 209 E. 25th St. Marysville CA 95901	Retired		200	250
9-30	H. Earl Parker, Jr. P.O. Box 2441 Marysville CA 95901	Atty.	H. Earl Parker Atty.	200	200
11-1	Robert M. Peppercorn 367 Del Norte Ave., Ste. 4 Yuba City CA 95991	Doctor	Robert M. Peppercorn M.D. INC.	200	200
<b>SUBTOTAL</b>				<b>2243</b>	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM <b>7-1-85</b>	THROUGH <b>12-31-8</b>
I.D. NUMBER (if committee) <b>790456</b>	

NAME OF CANDIDATE OR COMMITTEE

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, list I.D. number on treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-22	Paul Peterson 1075 Woodland Ave. Chico CA 95926			25	125
11-19	Steven Rabadew P.O. Box 771 Colusa CA 95932	CPA	Steven Rabadew, CPA	200	200
7-10	John F. Rankin 819 Zion St. Nevada City CA 95959	Self	Rankins Trailer Park	100	100
11-13	Lonny L. Renfrow 1190 Civic Center Blvd Yuba City CA 95991	CPA	Chipman & Refrow	200	200
11-19	Donald Richey 564 Rio Linda Ave. Chico CA 95926	Doctor	Donald Richey MD	200	200
9-7	Henry Richter, Jr. Star Rte. Knights Landing CA 95645	Farmer	Richter Ranch	500	500
11-30	Dell Riebe 129 Idaho-Maryland Rd. Grass Valley CA	Auto. Supplies	Riebe's Supplies	250	500
11-30	G.W. Rienks, Jr. P.O. Box 988 Marysville CA 95901			100 50	150
11-18	Dr. Perry Riley 17850 LaSSO Loop Penn Valley CA 95946	Self	Nutrition Inc.	100	200
10-18	Rio Bonito Ranch, 3288 Larkin Rd Biggs CA 95917	Ranch	Rio Bonito Ranch Inc.	100	100
11-19	Edwina Robbins 926 Taber Ave. Yuba City CA 95991			100	100
<b>SUBTOTAL</b>				<b>1925</b>	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	TO
7-1-85	12-31-85
ID. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE ALL O	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, also enter ID. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-13	Robinson Const. Co. P.O. Box 1620 Oroville CA 95965	Const. Co.	Robinson Const. Co.	443	1443
11-19	Guy Robinson Grass Valley CA 95945	Self	Guy Robinson & Sons	200	200
11-10	Jerome A. Robson 1026 Buchanan Rd. Yuba City CA 95991	Doctor	Jerome A. Robson, MD Inc.	200	200
10-30	Michael E. Rue 2700 Plumas-Arboga Rd Marysville CA 95901	Farming		200	200
7-31	Pauline Russell P.O. Box 483 Chico CA 95927			100	100
9-3	Alfred Sadler 651 Cassidy Yuba City CA 95991	Self	Sadler Cleaner	300	500
8-23	Dale Sakuth 3541 Nuestro Rd Yuba City CA 95991	Rancher	Dale Sakuth	100	100
9-18	Donald Sargent 8804 Loma Rica Rd Marysville CA 95901			100	100
9-27	Kenneth Sargent 470 South Auburn St. Ste. B Grass Valley CA 95945	Doctor	Kenneth Sargent, MD Inc.	100	100
9-10 11-15	Victor Savage 664 Shasta St. Yuba City CA 95991	Dentist	Victor Savage, DDS	43 400	543
10-28	Schrader & Murphy 2250 Fifth Ave. Oroville CA 95965	Insurance	Schrader & Murphy Insurance, Corp.	100	100

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

**2286**



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-88
ID. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter ID. number of treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
8-30	Remo Scocci 1929 Trident Ct. Yuba City CA 95991	Owner	Yuba-Sutter Disposal	400	400
8-20	Beverly Seghezzi 12694 Mayflower DR. Nevada City CA 95959	Self	Amos' Bottle Shop Inc.	100	100
8-3-	F. W. Sellman P.O. Box 1299 Paradise CA 95969			50	150
10-8	Burrell Shirey 101 JoANN Way Grass Valley CA			25 50	175
11-20	Steves Carnes P.O. Box 126 Maryville CA 95901	Owner	Sierra View Mausoleum	22	2727
11-20	Signal Home Loans P.O. Box 2115 Oroville CA 95965	Loan Co.	Signal Home Loans Inc	100	100
11-19	Clifton Simmons 581 Ridge Way Yuba City CA 95991	Retired		200	200
11-17	Cary Simonds 812 4th Street Marysville CA 95901	Dentist	Cary Simons, DDS, Inc.	400	400
12-12	Bill Smith 3711 Jay St. Sacramento CA 95916	Photography	Bill Smith Photography	413	413
7-9 11-2	Marvin Snow 185 Valley Ridge Rd. Paradise CA 95969	Retired		50 300	410
11-18	Soper-Wheeler Co. Strawberry Valley CA 95981	Logging	Soper-Wheeler Co.	200	200
<b>SUBTOTAL</b>				2310	

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and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 TO 12-31-8  
 ID NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also attach ID number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-30	Clayton L. Spangler 6946 Garden Hwy. Nicolaus CA	Farmer	Spangler Bros.	200	200
11-30	Chester Spooner P.O. Box 5 Williams CA 95987	Farmer	Spooner Ranch	100	100
10-26	Williams L. Sprangler 6932 Gardens Hwy Nicolaus CA 95659	Farmer	Spangler Bros.	200	200
11-18	Robert Sproat 405 Center St., Ste. 103 Yuba City CA 95991	Dentist	Robert Sproat, DDS	100	100
11-30	Stevens, French & Wood P.O. Box S Truckee CA 95734	Attys	Stevens, French & Wood	100	100
11-30	Don Strachan 2522 Tierra Buena Rd. yuba City CA 95991	Bee Keeper	Strachan Apiaries	200	200
10-8	William Stuke 1463 Hwy 99 Gridley CA 95948	Nursery	Stuke Nursery Co.	100	100
7-27	Jack Sullivan P.O. Box 671 Yuba City CA 95991	Farmer	Sullivan Ranch	100	100
12-2	Sweco Products, Inc. P.O. Box 259 Sutter CA 95982	Hydraulic	Sweco Products, Inc.	100	100
11-19	Louis Tarke 11481 S. Butte Rd Sutter CA 95982	Farmer	Tarke Bros.	586	586
11-19	Richard Tarke 11481 So. Butte Rd. Sutter CA 95982	Farmer	Tarke Bros.	500	500

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL 2286**

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, list attention I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-20	Taylor, Hinsdale & Williamson 1289 Lincoln Rd. Yuba City CA 95991	Atty's	Taylor, Hinsdale, & Williamson, Inc.	300	300
11-11	Louis W. Tescher Gridley CA 95948	Building Contr.	Tescher Contract	100	100
11-19	Bhagat Singh Thiara P.O. Box 188 Live Oak CA 95953	Farmer	Thiara Ranch	100	100
9-11 9-18	Albert Troost 117 Scott Way Grass Valley CA			50 50	200
8-15 5-5	Ken Tucher P.O. Box 127 Gridley CA 95948	Car Dealer	Tucker Chevrolet Buick	100	100
11-18	Dorothea Van Eckhardt 1644 Jeffrey DR. Yuba City CA 95991	Interior Designer		100	100
7-10	Peter Wagenhals Star Rte. Box 325 Brownsville CA 95919	Retired		50 200	300
8-2	Maudie Walker 10426 Partridge Rd. Grass Valley CA 95945			100	100
9-20	Eleanor Welch 544 10th Street. Colusa CA 95932	Retired		200	300
9-18	George West 682 Long Bar Rd. Oroville CA 95965	Retired		50	100
11-19	David Wheeler 515 Windsor Dr. Yuba City CA 95991	Car Dealer	Wheeler Olds, Cad.	100	100
<b>SUBTOTAL</b>				1500	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-18	Deane Williams 3288 Larkin Rd. Biggs CA 95917	Retired		100	200
10-6	J. B. Wilson P.O. Box 244 Chico CA 95927		Butte Co. Credit Bureau	100	100
11-19	Craig Woods P.O. Box 2025 Kings Beach CA 95719			100	100
11-19	Johnnie Wurm 3020 Walnut Ave. Marysville CA 95901	Rancher	Wurm Ranch	200	200
9-25	Charles Yates P.O. Box 808 Colusa CA 95932	Farmer	Yates Ranch	100	100
10-19	Chas T. Yerxa Box 269 Colusa CA 95932	Farmer	Yerxa Farms	400	400
11-19	Paul D. Young 640 Crestmont Ave Yuba City CA 95991			100	100
11-15	Russell Young Jr. Meridian CA 95957	Farmer	Russell Ranch	143	143
11-18	Pete Huckins 625 Bridge Street Yuba City CA 95991	Owner	Superior Beverage	300	300
<b>SUBTOTAL</b>				<b>1543</b>	

☐ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE B  
LOANS**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
7-1-85	12-31-85
<b>I.D. NUMBER (if COMMITTEE)</b>	
790456	

**NAME OF CANDIDATE OR COMMITTEE:**  
FRIENDS OF WALLY HERGER FOR ASSEMBLY

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (if COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (if SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE

☒ If more space is needed, check box at left and attach additional Schedules B, Part 1.

**SUBTOTAL**

0

**PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	

☐ If more space is needed, check box at left and attach additional Schedules B, Part 2.

**SUBTOTAL**

**SUMMARY**

1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0	
2. LOANS UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)	0	
4. LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a))	0	
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0	
6. LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0	
7. TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)	0	
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$ 0	

(May be negative figure)



**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
July 1985	CAUSA 415 Granerney Place Los Angeles CA 90020			Airplane Fare Food & Lodging Conference in Salt Lake City, Utah	630	630
<b>SUBTOTALS</b>					<b>630</b>	

☐ If more space is needed, check box at left and attach additional Schedules C.

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD. ....	\$	630	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). ....		0	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....			\$ 630



# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:  
FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)

DATE R.C.D.	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (also enter on Schedule A)	CUMU- LATIVE PLEGGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a) 0	(b) 0	
SUBTOTALS						

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page		\$ 0

(May be  
negative figure)

**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT ACCRUED
SUBTOTAL			0

☐ If more space is needed,  
check box, and attach additional Schedules F

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

Accrued Expenses of \$100 or More This Period .....	\$ 0	
Accrued Expenses of Under \$100 This Period (Not Itemized) .....	0	
Total Accrued Expenses Incurred This Period (Line 1 + 2) .....		0
Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 .....		0
Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page .....		0

(May be  
negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
COGS 1041 County Rd Belmont CA 94002	0		6000
Hilde Swinehart 941 Richland Rd. Yuba City CA 95991	G		2170 273
Peggy L. Bristow 1590 Spencer Lane Yuba City CA 95991	G		1345
Sandra Cummings 2021 Hooper Rd. Yuba City CA 95991	G		768
Grass Valley Computers 5995 Lindhurst Ave. Marysville CA 95901	G		1510
SUBTOTAL			12066

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 55659
2. Payments under \$100 this period (not itemized)	\$ 1383
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 57042

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
0 Hall's Office Supplies P.O. Box 1271 Marysville CA 95901	G		224
5 Yuba City Florist 664 Plumas St. Yuba City CA 95991	G		636
U.S. Postmaster Yuba City CA 95901	G		532
4 Midvalley Offices Machines 300 Carriage Square 7 Yuba City CA 95991	G		814
Computer Caging Corp. 6060 Sunrise Vista Dr. Citrus Heights CA 95610	L	See E-1 (3)	2802
IRS Fresno CA 93888	g		91
Pacific Bell P.O. Box T Sacramento CA 95813	G		217
Data Mailing Systems P.O. Box 13112 Sacramento CA 95813	L		518
SUBTOTAL			5834

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

<p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p>	<p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p>
--	---

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Normart Printing Co. P.O. Box 1068 Marysville CA 95901	G		707
Bank Of America Box 37110 San Francisco CA 94137			1981
Bill Smith Photography 3711 J Sacramento CA 95816	G		413
Regents of University of Calif. University Extension University of California Davis, CA 95616	G		190
D & D Printing Consultant 5509 Ballentine #8 Sacramento CA 95826			6098
Dication Systems, Inc P.O. Box 661568 Sacramento CA 95825			528
McKenna's Bar & Grill Sacramento CA	F		264
U.S. Postmaster Marysville CA 95901	G		8208
<b>SUBTOTAL</b>			<b>18389</b>

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
N Financial Success Report 6612 Owens Drive Pleasanton CA 94566-0625	G		109
N Nicoletti Restaurant Inc. 330 1st Street Marysville CA 95901	F		4385
Anchor Mail P.O. Box 419 Sacramento CA 95802	L		1003
Dick Colby 2211 Lincoln Rd. Yuba City CA 95991	P		10000
Stapleton's Sacramento CA	G		203
Filco 1433 Fulton Ave. Sacramento CA	G		2117
See's Candy 1009 L Street Sacramento CA 95814	G		136
State of California Assembly Snack Fund State Capitol Sacramento CA	G		100
<b>SUBTOTAL</b>			<b>18053</b>

☒ If more space is needed, check box and attach additional Schedules E.



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

(CONTINUATION SHEET)  
FORM 420, 430 OR 490)

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM 7-1-85	THROUGH 12-31-85
I.D. NUMBER (IF COMMITTEE) 790456	

NAME OF CANDIDATE OR COMMITTEE:  
Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Calif. Republican Party Sacramento CA		Convention Pre-Regist.	110
Piccadilly Inn Fresno CA	T		101
SUBTOTAL			211

☒ If more space is needed, check box and attach additional Schedules E.

**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b> COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERS PERIOD</b> FROM 7/1/85 THROUGH 12/31/85
<b>NAME OF CANDIDATE OR COMMITTEE</b> FRIENDS OF WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (if committee)</b> 790456

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,    |
| "B" - BROADCAST ADVERTISING                   | DOOR-TO-DOOR SOLICITATIONS             |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "F" - FUNDRAISING EVENTS               |
| "O" - OUTSIDE ADVERTISING                     | "T" - TRAVEL, ACCOMMODATIONS AND MEALS |

<b>NAME AND ADDRESS OF PAYEE OR CREDITOR</b> (if committee, also enter I.D. number or name and address of treasurer)	<b>CODE OR</b>	<b>DESCRIPTION OF PAYMENT</b>	<b>AMOUNT PAID</b>
TEAMFOUR MAIL MARKETING, INC. 6500 EAST FLOTILLA ST. CITY OF COMMERCE, CA 90040-1787	L		184.55
<input checked="" type="checkbox"/> If more space is needed. check box and attach additional Attachment Schedules E-1			<b>TOTAL*</b>
			185

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.

**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b> COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERS PERIOD</b> FROM 7-1-85 THROUGH 12-31-85
<b>NAME OF CANDIDATE OR COMMITTEE</b> FRIENDS OF WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (if committee)</b> 790456

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |   |
|---|---|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,<br>DOOR-TO-DOOR SOLICITATIONS |
| "B" - BROADCAST ADVERTISING                   | "F" - FUNDRAISING EVENTS  |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                            |
| "O" - OUTSIDE ADVERTISING                     |   |

NAME AND ADDRESS OF PAYEE OR CREDITOR (if committee, also enter I.D. number or name and address of treasurer)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
TEAMFOUR MAIL MARKETING, INC. 6900 EAST FLOTILLA ST. CITY OF COMMERCE, CA 90040	L		257.92
<input checked="" type="checkbox"/> If more space is needed, check box and attach additional Attachment Schedules E-1			<b>TOTAL*</b> 258

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.

**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b>  COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERED PERIOD</b> FROM THROUGH 12/31/85
<b>NAME OF CANDIDATE OR COMMITTEE</b>  WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (IF COMMITTEE)</b>

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,    |
| "B" - BROADCAST ADVERTISING                   | DOOR-TO-DOOR SOLICITATIONS             |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "F" - FUNDRAISING EVENTS               |
| "O" - OUTSIDE ADVERTISING                     | "T" - TRAVEL, ACCOMMODATIONS AND MEALS |

<b>NAME AND ADDRESS OF PAYEE OR CREDITOR</b> (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	<b>CODE OR</b>	<b>DESCRIPTION OF PAYMENT</b>	<b>AMOUNT PAID</b>
TEAMFOUR MAIL MARKETING, INC. 6500 EAST FLOTILLA ST CITY OF COMMERCE, CA 90040-1787	L		663.28
<input type="checkbox"/> If more space is needed, check box and attach additional Attachment Schedules E-1			<b>TOTAL*</b>
			663

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.

**SCHEDULE F  
ACCRUED EXPENSES  
(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT ACCRUED

☐ If more space is needed,  
check box, and attach additional Schedules F

**SUBTOTAL**      0

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1. Accrued Expenses of \$100 or More This Period	\$ 0	
2. Accrued Expenses of Under \$100 This Period (Not Itemized)	0	
3. Total Accrued Expenses Incurred This Period (Line 1 + 2)		0
4. Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3		0
5. Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page		0

(May be negative figure)



Form 490  
1985

# CONSOLIDATED CAMPAIGN STATEMENT

Government Code Sections 84200-84217)

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

RECEIVED  
AND FILED  
In the office of the Secretary of State  
of the State of California

JUL 18 1985

MARCEL LONG, JR. Secretary of State  
OFFICIAL USE ONLY

Statement covers period from 5/19/85 through 6/30/85

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES:

12

## I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE: <u>Wally Herger</u>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly-Third District</u>			
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>1120 Fourth Avenue</u>	<u>Rio Oso</u>	<u>CA</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>	
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>	

## II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>						I.D. NUMBER <u>790456</u>	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>P.O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95991</u>			

NAME OF TREASURER: <u>Leonard Meyer</u>							
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>1212 F Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8869</u>	

NAME OF COMMITTEE:						I.D. NUMBER	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	

NAME OF TREASURER:

PERMANENT ADDRESS OF TREASURER: NO. AND STREET CITY STATE ZIP CODE AREA CODE PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

## III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?*	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

\* (A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

## VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 7-12-85 at Marysville, Cal. by Leonard R. Meyer  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 7-12-85 at Yuba City, Ca. by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provision of the Political Reform Act," Part X.



**IV. ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES** (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)

DATE	IND EXP *	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
6/30/85					0	0

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

9704053139

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE

Friends of Wally Herger for Assembly

COLUMN A  
Cumulative  
total from  
previous period \*

COLUMN B  
Total this period  
from attached  
schedules

COLUMN C  
Cumulative  
to date  
(Columns A + B)

## CONTRIBUTIONS RECEIVED

1. Monetary contributions .....	\$ 35,469	\$ 2,920 SCHEDULE A, LINE 3	\$ 38,389
2. Loans .....	0	0 SCHEDULE B, LINE 8	0
3. Subtotal .....	\$ 35,469 LINES 1 + 2	\$ 2,920 LINES 1 + 2	\$ 38,389 LINES 1 + 2
4. Non-monetary contributions .....	105	0 SCHEDULE C, LINE 3	105
5. Pledges .....	0	0 SCHEDULE D, LINE 7	0
6. TOTAL CONTRIBUTIONS .....	\$ 35,574 LINES 3 + 4 + 5	\$ 2,920 LINES 3 + 4 + 5	\$ 38,494 LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)

## EXPENDITURES MADE

7. Payments .....	\$ 14,470	\$ 2,273 SCHEDULE E, LINE 4	\$ 16,743
8. Accrued expenses (unpaid bills) .....	0	0 SCHEDULE F, LINE 3	0
9. TOTAL EXPENDITURES .....	\$ 14,470 LINES 7 + 8	\$ 2,273 LINES 7 + 8	\$ 16,743 LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$ 49,369
11. Cash receipts this period (Line 3, Column B above) .....	2,920
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .....	602
13. Cash payments this period (Line 7, Column B above) .....	2,273
14. Cash on hand at closing date (Lines 10+11+12-13 above) *	50,618
15. Outstanding debts (Line 2 + Line 8 of Column C above) .....	
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) .....	\$ 50,618
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .....	\$ ( )

\* Ending cash on hand should not be a negative amount.

18 CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:	1/1 thru 6/30	7/1 to date
20. EXPENDITURES MADE:		

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

				STATEMENT COVERS PERIOD	
				FROM	THROUGH
NAME OF CANDIDATE OR COMMITTEE:					
FRIENDS OF WALLY HERGER FOR ASSEMBLY				I.D. NUMBER (IF COMMITTEE)	
				790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
/20/85	Calif. Fertilizer Assn. 10 850321 701 12th St., Ste. 110 Sacramento CA 95814	PAC		350	350
/20/85	Computers Sciences Corp. 2000 Evergreen St. Sacramento CA 95815			500	500
/3/85	Insurers PAC P.O. Box 54600 Los Angeles CA 90054	PAC		500	500
/7/85	Bartram, Vern MD 3105 Esplanade Chico CA 95926	Doctor	Self	100	100
/3/85	Don Beck P.O. Box 79 Tahoe Vista CA 95732	REaltor	Self	100	100
/20/85	Anna Demmer 735 Vermont Street Gridley CA 95948	Housewife	Housewife	100	100
/3/85	Jean K. Filer 6900 Clark Road Paradise CA	Retired	Retired	100	100
SUBTOTAL				1750	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUMMARY**

1. AMOUNT RECEIVED -- CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) . . . . .	\$ 2750	
2. AMOUNT RECEIVED -- CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) . . . . .	170	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page . . . . .		\$ 2920

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** **THROUGH**  
**5/19/85** **6/30/85**

**NAME OF CANDIDATE OR COMMITTEE:**  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (IF COMMITTEE)**  
**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
120/85	John Floyd MD 2721 Olive Hwy, Ste. 3 Oroville CA 95965	Doctor	Self	100	100
16/85	Gayle Morrison P.O. Box 29 Yuba City CA 95991	Moulding Mfg	Self	100	100
120/85	John Oakes 777 Colusa Ave. Yuba City CA 95991	Banker	FEather River State Bank 777 Colusa Ave. Yuba City CA 95991	200	200
13/85	Darrell Stevens 19 Nelson Ave. Oroville CA 95965	Atty.	Self	100	100
120/85	Sierra View Mausoleum P.O. Box 126 Marysville CA 95901	Funeral Home		250	250
12/85	Sierra View Memorial Park P.O. Box 126 Marusville CA 95901	Cematery		250	250

☐ If more space is needed, check box at left and attach additional Schedules A.

**SUBTOTAL** **1000**

9170405

**SCHEDULE B  
LOANS  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

5/19/85 6/30/85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)

790456

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR CO-SIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.					<b>SUBTOTAL</b>	0

**PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a)	(b)		
<b>SUBTOTAL</b>					

**SUMMARY**

1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0	
2. LOANS UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)	0	
4. LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a))	0	
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0	
6. LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0	
7. TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)	0	
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$ 0	

(May be  
negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMU- LATIVE AMOUNT
<b>SUBTOTALS</b>					0	

☐ If more space is needed, check box at left  
and attach additional Schedules C.

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD.....	\$	0	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized).....		0	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....			\$ 0



# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 5/19/85 THROUGH 6/30/85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)  
790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (ALSO ENTER ON SCHEDULE A)	CUMU- LATIVE PLEGGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a) 0	(b) 0	
SUBTOTALS						

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.		\$ 0

(May be  
negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES  
 "I" - INDEPENDENT EXPENDITURES  
 "L" - LITERATURE  
 "B" - BROADCAST ADVERTISING  
 "N" - NEWSPAPER AND PERIODICAL ADVERTISING  
 "O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS  
 "F" - FUNDRAISING EVENTS  
 "G" - GENERAL OPERATIONS AND OVERHEAD  
 "T" - TRAVEL, ACCOMMODATIONS AND MEALS  
 "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster Marysville CA 95901	G		235 1010
Peggy L. Bristow 1590 Spencer Lane Yuba City CA 95991	G		301
Hilde Swinehart 941 Richland Road Yuba City CA 95991	G		214
Yuba Sutter Fairgrounds 442 Franklin Ave Yuba City CA 95991	F		100
K & K Insurance 3134 Auburn Blvd. Sacramento CA 95821	F		113
SUBTOTAL			1973

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 2078
2. Payments under \$100 this period (not itemized)	\$ 195
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$ 0
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 2273

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |  |   |
|--|---|
| <p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p> | <p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p> |
|--|---|

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
D & D Printing 5509 Ballentine #8 Sacramento CA 95826		L		105
			SUBTOTAL	105

☐ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE F  
ACCRUED EXPENSES  
(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYER, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT ACCRUED
<b>SUBTOTAL</b>			0

☐ If more space is needed, check box, and attach additional Schedules F

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1.	Accrued Expenses of \$100 or More This Period .....	\$ 0	
2.	Accrued Expenses of Under \$100 This Period (Not Itemized) .....	0	
3.	Total Accrued Expenses Incurred This Period (Line 1 + 2) .....		0
4.	Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 .....		0
5.	Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page .....		0

(May be negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE ALSO ENTER ID NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
5/30/85	Interest to all Bank accounts		545	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G		SUBTOTAL	(a) 545	(b)

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 545	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	77	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		622
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	0	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	20	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		20
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		\$602

(May be negative figure)

**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDER AND MEASURES** (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts must be rounded off to whole dollars.)

DATE	IND EXP.	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
3/17		Friends of Roger Canfield	X		250	250
1/8		Cong. Mem. Comm. State Fund	X		1,000	1,000

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86

**NAME OF CANDIDATE OR COMMITTEE:**  
 Friends of Wally Herger for Assembly

**I.D. NUMBER (if committee)**  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2/12	CA Grocers Assoc. PAC 1400 K St. #208 Sacramento 95814	#760914		500	500
2/12	Western United Dairymen 1620 N. Carpenter #A-5 Modesto 95351	#771500		500	500
2/12	CA Pharmacists PAC 555 Capitol Mall #635 Sacramento 95814	#741831		500	500
2/12	Indep. Oil Prod. Agency 900 E. Wardlow #D Long Beach 90807	#790456		500	500
2/12	CA Chiropractic PAC 1030 15th St. #250 Sacramento 95814	#742986		500	500
2/12	Mobilehome Parks PAC 1030 15th St. #250 Sacramento 95814	#742422		500	500
2/12	CA Financial Svs. Assoc. 1010 11th St. #210 Sacramento 95814	#742749		250	250

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL** 3,250

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$7,250	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not Itemized) .....	-0-	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....		\$7,250

**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

STATEMENT COVERS PERIOD

I.D. NUMBER (if committed)  
790456

Friends of Wally Herger for Assembly

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2/12	Beneficial Management Corp. 4817 Butternut Hollow Ln. Bonita 92002			250	250
2/12	CA Hospitals PAC 1030 15th St. #250 Sacramento 95814	#790773		500	500
2/12	CA Cable TV Assoc. P. O. Box 11080 Oakland 94611	#745932		250	250
2/12	20th Century Ins. Co. 6301 Owensmouth Ave. Woodland Hills 91367			1,000	1,000
2/12	Pearle Vision Center 2534 Royal Lane Dallas, Texas 75229			1,000	1,000
2/12	AG Council of CA PAC P. O. Box 831 Sacramento 95804	#761092		500	500
3/3	CA Medical Assoc. PAC 44 Gough St. San Francisco 94103	#742617		500	500
SUBTOTAL				4,000	

☐ If more space is needed, check box at left  
and attach additional Schedules A.

SUBTOTAL 4,000

**SCHEDULE B  
LOANS  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-186	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR CO-SIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.					<b>SUBTOTAL</b>	-0-

**PART 2 - LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
9/5/85					
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a)	(b)		
<b>SUBTOTAL</b>					

**SUMMARY**




1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1) .....	\$ -0-	
2. LOANS UNDER \$100 THIS PERIOD (Not Itemized) .....	-0-	
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2) .....		-0-
4. LOANS OF \$100 OR MORE REPAYED THIS PERIOD (Part 2, Column (a)) .....	-0-	
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b)) .....	-0-	
6. LOANS UNDER \$100 REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not Itemized) (Also enter this amount on Line 2 of Summary section of Schedule A) .....	-0-	
7. TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6) .....		-0-
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page .....		\$ -0-

(May be negative figure)

(Amounts May Be Rounded To Whole Dollars)

NAME OF CANDIDATE OR COMMITTEE:  
Friends of Wally Herger for Assembly

## SUMMARY

- |   |   |
|---|---|
| -0-   |  |
| -0-   |  |
|  | \$-0-   |

**SCHEDULE D**

**PLEDGES**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

**NAME OF CANDIDATE OR COMMITTEE:**

**Friends of Wally Herger for Assembly**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID <small>(also enter on Schedule A)</small>	CUMU- LATIVE PLEGGED UNPAID
<b>SUBTOTALS</b>				(a) -0-	(b) -0-	

☐ If more space is needed, check box at left and attach additional Schedules D.

**SUMMARY**

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ -0-	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	-0-	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)	-0-	
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	-0-	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	-0-	
6. TOTAL PLEDGES PAID (Line 4 + 5)	-0-	
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page	\$ -0-	

(May be negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Franchise Tax Board 300 Capitol Mall Sacramento 95814	G		282.00
Internal Revenue Service Cincinnati, Oh 45999	G		1,305.00
Master Shuttle Service 623 14th Marysville, Ca. 95901		Refund of Contribution	100.00
Tri-City Moving 623 14th Marysville, Ca. 95901		Refund of Contribution	300.00
Master Van & Shuttle 623 14th Marysville, Ca. 95901		Refund of Contribution	600.00

☒ If more space is needed, check box and attach additional Schedules E.

**SUBTOTAL** 2,587.00

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 9,959
2. Payments under \$100 this period (not itemized)	\$ 1,170
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$ -0-
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 11,129



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
 Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

<p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES          "I" - INDEPENDENT EXPENDITURES          "L" - LITERATURE          "B" - BROADCAST ADVERTISING          "N" - NEWSPAPER AND PERIODICAL ADVERTISING          "O" - OUTSIDE ADVERTISING</p>	<p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS          "F" - FUNDRAISING EVENTS          "G" - GENERAL OPERATIONS AND OVERHEAD          "T" - TRAVEL, ACCOMMODATIONS AND MEALS          "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p>
--	---

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Taylor, Hinsdale & Williamson 1289 Lincoln Road Yuba City, Ca. 95991		Refund of Contribution	300.00
Matthews, Crippen & Tenney 320 1st St. Marysville, Ca. 95901		Refund of Contribution	129.00
Bill Smith Photography 3211 J St. Sacramento 95816		Refund of Contribution	413.30
Frank Booth Inc. 222 3rd Marysville, Ca. 95901		Refund of Contribution	1,000.00
Egon Rackauckas 700 Civic Center Drive Santa Ana, Ca. 92701	T		158.00
Friends of Roger Canfield Sacramento Co. Supervisor Sacramento, Ca. 95814	C		250.00
Superior Beverage 625 Bridge St. Yuba City, Ca. 95991		Refund of Contribution	300.00
CA Republican Party Sacramento, Ca.		Convention	145.00
<b>Subtotal</b>			<b>2,695.00</b>

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

One of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the Information Manual on Campaign Disclosure for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Peggy Bristow 1590 Spencer Lane Yuba City, Ca. 95991	G		203.25
Cong. Mem. Comm. State Fund	C		1,000.00
Rusty Duck Restaurant Sacramento, Ca.	F		289.51
Pacific Bell P. O. Box T Sacramento, Ca. 95813	G		152.99
Yuba-Sutter Fair Yuba City, Ca. 95991	F		260.00
Peggy Bristow 1590 Spencer Lane Yuba City, Ca. 95991	G		404.88
Hall's Office Supplies P. O. Box 1271 Marysville, Ca. 95901	G		162.95
Hilde Swinehart 941 Richland Road Yuba City, Ca. 95991	G		330.88
SUBTOTAL			2,805.00

If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |  |   |
|--|---|
| <p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p> | <p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p> |
|--|---|

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
D. & D Printing Consultant 5509 Ballentine #8 Sacramento, Ca. 95826	P		822.16
Bank Americard Box 37110 San Francisco, Ca. 94137	G		464.34
Sandra Cummings 2021 Hooper Road Yuba City, Ca. 95991	G		329.10
Sandra Cummings 2021 Hooper Road Yuba City, Ca. 95991	G		101.80
Frank Peace 1521 Butte House Road Yuba City, Ca. 95991	G		154.92
SUBTOTAL			1,872

If more space is needed, check box and attach additional Schedules E.

**SCHEDULE F  
ACCRUED EXPENSES  
(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Mally Herger for Assembly

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER  
CANDIDATES OR COMMITTEES  
"I" - INDEPENDENT EXPENDITURES  
"L" - LITERATURE  
"B" - BROADCAST ADVERTISING  
"N" - NEWSPAPER AND PERIODICAL  
ADVERTISING  
"O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING,  
DOOR-TO-DOOR SOLICITATIONS  
"F" - FUNDRAISING EVENTS  
"G" - GENERAL OPERATIONS AND OVERHEAD  
"T" - TRAVEL, ACCOMMODATIONS AND MEALS  
"P" - PROFESSIONAL MANAGEMENT AND  
CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYER, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT ACCRUED
SUBTOTAL		

☐ If more space is needed,  
check box, and attach additional Schedules F

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

Accrued Expenses of \$100 or More This Period .....	\$ -0-	
Accrued Expenses of Under \$100 This Period (Not Itemized) .....	-0-	
Total Accrued Expenses Incurred This Period (Line 1 + 2) .....		-0-
Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 .....		-0-
Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page .....		-0-

(May be  
negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER ID NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
2/12	COGS 1041 County Road Belmont, Ca. 94002	Refund	3,000	
2/12	Dick Colby 2211 Lincoln Road Yuba City, Ca. 95991	Refund	10,000	
2/19	David Evans for Assembly 330 Anita Yuba City, Ca. 95991	Purchase Used Office Equipment	200	
3/11	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		59,377
3/11	The Wally Herger Committee 320 First St. Marysville, Ca. 95901	Transfer		30,118
	Interest on Bank Accounts		860	
			(a)	(b)
		<b>SUBTOTAL</b>	14,060	89,495

☐ If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 14,060	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	14	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		14,074
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	89,495	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	18	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		89,513
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		(75,439)

(May be negative figure)



Form 405  
1985

# AMENDMENT TO CAMPAIGN DISCLOSURE STATEMENT

For use by persons amending statements filed pursuant to Government Code Section 84200-84217. This form must be filed with all filing officers who received the statement being amended. NOTE: This form is not used to amend a Statement of Organization (Form 410).

(Type or Print in Ink)

RECEIVED  
AND FILED  
In the office of the Secretary of State  
of the State of California  
APR 04 1986  
MARCH FONG EU, Secretary of State

I. The information required in Section I must correspond to the information provided on the campaign statement.

A OFFICIAL USE ONLY

NAME OF FILER:

Friends of Wally Herger for Assembly

F.D. NO. (if applicable)

790456

ADDRESS OF FILER:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

P.O. Box 123

Yuba City

CA

95992

916

741-0447

NAME OF TREASURER (if applicable):

Jerry Crippen

PERMANENT ADDRESS OF TREASURER (if applicable):

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

320 First Street

Marysville

CA

95901

916

742-8201

II. The following information amends campaign disclosure statement, Form No. 490, Executed on 1/29/86  
for the period 7/1/85 to 12/31/85

III. The amended information affects items on the:

☐ Front Page

☐ Summary

☒ Schedule(s) G

IV. Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement.

Add:

Computer Caging  
6060 Sunrise Vista Drive  
Citrus Heights, CA 95610

\$6,050 Purchased Postage Stamps  
from Wally Herger.

V. Reason for amendment:

Omitted the last entry on schedule G. The Summary figures remain the same.

Include additional information on reverse side or on appropriately labeled continuation sheets. (Number of pages attached)

C

## VERIFICATION

D

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

E

Executed on 3/5/86 at Marysville Ca. by Jean B. Crippen

F

A candidate or officeholder who controls a committee must also verify the campaign statement.

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer of this committee has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on at by Wally Herger



**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS (IN SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE ALSO ENTER ID NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
7-8	Bank Of America Bank Of America Card Center San Francisco CA	Refund on Credit Balance	377	
7-8	Hendrick Stationery P.O. Box 1841 Marysville CA 95901	Refund	905	
2-31	Interest to all Bank Accounts		1813	
3-1	Computer Caging 6060 Sunrise Vista Drive Citrus Heights CA 95610	Purchased Postage stamps from Wally Herger	6050	
3-5				
3-7				
3-7				
3-7				
3-7				
			(a)	(b)
		SUBTOTAL	9145	

☐ If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 9145	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		9145
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	43	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)		
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		43
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		\$ 9102
		(May be negative figure)

CONSOLIDATED  
CAMPAIGN STATEMENT  
(Government Code Sections 84200-84217)

Form 400  
1985

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

RECEIVED  
AND FILED  
In the Office of the Secretary of State  
of the State of California  
FEB 03 1986

MARCH 10 1986, Secretary of State

Statement covers period from 7-1-85 through 12-31-85

DATE OF ELECTION (MO., DAY, YR.) (if applicable)

TOTAL PAGES:

40

P.M. 1-31-86

I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE:	OFFICE BOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)				
Wally Herger	Assembly - Third District				
RESIDENTIAL ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
1120 Fourth Avenue		Rio Oso	CA	95674	916 633-4543
BUSINESS ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
State Capitol		Sacramento	CA	95814	916 445-7298

II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF COMMITTEE:	I.D. NUMBER				
Friends of Wally Herger for Assembly	790456				
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
P.O. Box 123		Yuba City	CA	95991	

NAME OF TREASURER:	I.D. NUMBER				
Jerry Crippen	742-8201				
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
320 First Street		Marysville	CA	95901	916 742-8201

NAME OF COMMITTEE:	I.D. NUMBER				
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER

NAME OF TREASURER:	I.D. NUMBER				
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

(A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled candidate in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the action or decisions of the committee.)

VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 1/29/86 at Marysville, Ca by [Signature] (Signature of Treasurer(s))

Executed on [blank] at [blank] by [Signature] (Signature of the Treasurer(s))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that the treasurer(s) of the committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 1-31-86 at Yuba City, Ca by Wally Herger (Signature of Candidate or Officeholder)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X

6669  
RECEIVED THE FEC

HERGE, SPARKS, CHRISTOPHER & BIONDI 86 JUN 9 49:28

ATTORNEYS AT LAW  
SUITE 200  
8201 GREENSBORO DRIVE  
MCLEAN, VIRGINIA 22102

J. CURTIS HERGE  
ROBERT R. SPARKS, JR.  
A. MARK CHRISTOPHER  
GEORGE V. BIONDI  
DONNA LYNN MILLER

June 4, 1986

(703) 848-4700

36 JUN 9 11:21  
RECEIVED  
GENERAL COUNSEL

Kenneth A. Gross, Esq.  
Associate General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

Attention: Michele Brown, Esq.

RE: MUR 2178

Dear Mr. Gross:

This responds to your letters, dated May 23, 1986, to Mr. Jerry Crippen, Treasurer of Friends of Wally Herger for Assembly, and to Mr. Crippen, Treasurer of Wally Herger for Congress Committee, regarding a complaint filed with the Federal Election Commission by Mr. Don Gallino, which has been numbered MUR 2178.

Enclosed, for your records, is a Statement of Designation of Counsel, signed by Mr. Crippen, which designates the undersigned as counsel to the respondents in this matter.

We are advised by our clients that your letters were received by them on May 27, 1986, which was seven days prior to the date of the primary election in California. Because of the pre-existing demands on the time of Mr. Crippen and on the staff of the Wally Herger for Congress Committee due to the primary, we have not had an adequate opportunity to gather and analyze the information necessary to prepare a substantive response to the complaints. Therefore, we respectfully request an extension, until on or before June 23, 1986, within which to respond.

Sincerely,

  
J. Curtis Herge

:sbl  
Enclosure  
cc: Mr. Jerry Crippen

87040553165

**STATEMENT OF DESIGNATION OF COUNSEL**

**NUR** 2178

**NAME OF COUNSEL:** Mr. Curt Herge/Herge, Sparks, Christopher & Biondi

**ADDRESS:** 8201 Greensboro Drive Suite 200  
McLean, Virginia 22102

**TELEPHONE:** (703) 848-4700

The above-named individual is hereby designated as my  
counsel and is authorized to receive any notifications and other  
communications from the Commission and to act on my behalf before  
the Commission.

5/30/86  
**Date**

*Jerry B. Crippen*  
**Signature**

Treasurer, Friends of Wally Herger  
for Assembly  
Treasurer, Wally Herger for Congress  
Committee

**RESPONDENT'S NAME:** Mr. Jerry Crippen, C.P.A.

**ADDRESS:** 320 First Street  
Marysville, CA 95901

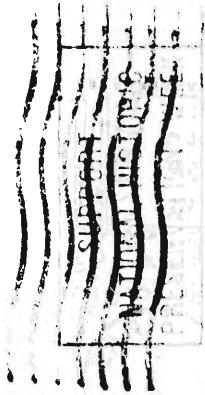
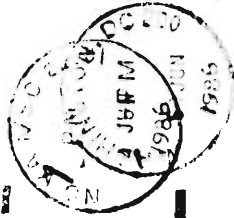
**HOME PHONE:** (916) 671-9373

**BUSINESS PHONE:** (916) 742-8201

87040353166

HERGE, SPARKS, CHRISTOPHER & Biondi 105516

SUITE 200  
8201 GREENSBORO DRIVE  
MCLEAN, VIRGINIA 22102



86 JUN 9 A9:27

Kenneth A. Gross, Esq.  
Associate General Counsel  
Federal Election Commission  
999 K Street, N.W.  
Washington, D. C. 20463

Attention: Michele Brown, Esq.



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

May 23, 1986

Jerry Crippen, Treasurer  
Friends of Wally Herger for Assembly  
P.O. 123  
Yuba City, CA 95992

Re: MUR 2178

Dear Mr. Crippen:

This letter is to notify you that the Federal Election Commission received a complaint which alleges that the Friends of Wally Herger for Assembly and you, as treasurer, may have violated certain sections of the Federal Election Campaign Act of 1971, as amended (the "Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 2178. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate in writing that no action should be taken against the Wally Herger for Assembly and you in this matter. Your response must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and §437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public.

37040553158

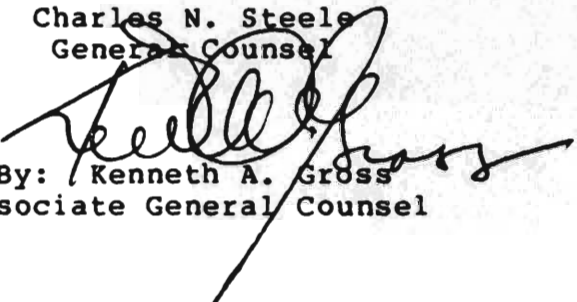


-2-

If you have any questions, please contact Michele Brown, the attorney assigned to this matter, at (202) 376-8200. For your information, we have attached a brief description of the Commission's procedures for handling complaints.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosures  
Complaint  
Procedures  
Designation of Counsel Statement

cc: Wally Herger

37040553169



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

May 23, 1986

Don Gallino  
4784 Alta Camino Drive  
Redding, CA 96002

Dear Mr. Gallino:

This letter will acknowledge receipt of a complaint filed by you which we received on May 20, 1986, which alleges possible violations of the Federal Election Campaign Act of 1971, as amended, (the "Act"), by Wally Herger, Wally Herger for Congress and Friends of Wally Herger for Assembly with Jerry Crippen, as treasurer of both. The respondents will be notified of this complaint within five days.

You will be notified as soon as the Commission takes final action on your complaint. Should you receive any additional information in this matter, please forward it to this office. We suggest that this information be sworn to in the same manner as your original complaint. For your information, we have attached a brief description of the Commission's procedures for handling complaints. We have numbered this matter under review MUR 2178. Please refer to this number in all future correspondence. If you have any questions, please contact Lorraine F. Ramos at (202) 376-3110.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosure

37040553170



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

May 23, 1986

Wally Herger  
1120 Fourth Avenue  
Rio Oso, CA 95674

Re: MUR 2178

Dear Mr. Herger:

This letter is to notify you that the Federal Election Commission received a complaint which alleges that you may have violated certain sections of the Federal Election Campaign Act of 1971, as amended (the "Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 2178. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate in writing that no action should be taken against you in this matter. Your response must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath.

This matter will remain confidential in accordance with 2 U.S.C. § 437g(a)(4)(B) and § 437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public.

87040653171

-2-

If you have any questions, please contact Michele Brown, the attorney assigned to this matter, at (202) 376-8200. For your information, we have attached a brief description of the Commission's procedures for handling complaints.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosures  
Complaint  
Procedures  
Designation of Counsel Statement

37040653172



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

May 23, 1986

Jerry Crippen, Treasurer  
Wally Herger for Congress Committee  
P.O. 123  
Yuba City, CA 95992

Re: MUR 2178

Dear Mr. Crippen:

This letter is to notify you that the Federal Election Commission received a complaint which alleges that the Wally Herger for Congress Committee and you, as treasurer, may have violated certain sections of the Federal Election Campaign Act of 1971, as amended (the "Act"). A copy of the complaint is enclosed. We have numbered this matter MUR 2178. Please refer to this number in all future correspondence.

Under the Act, you have the opportunity to demonstrate in writing that no action should be taken against the Wally Herger for Congress Committee and you in this matter. Your response must be submitted within 15 days of receipt of this letter. If no response is received within 15 days, the Commission may take further action based on the available information.

Please submit any factual or legal materials which you believe are relevant to the Commission's analysis of this matter. Where appropriate, statements should be submitted under oath.

This matter will remain confidential in accordance with 2 U.S.C. §437g(a)(4)(B) and § 437g(a)(12)(A) unless you notify the Commission in writing that you wish the matter to be made public.

97040653173

-2-

If you have any questions, please contact Michele Brown, the attorney assigned to this matter, at (202) 376-8200. For your information, we have attached a brief description of the Commission's procedures for handling complaints.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosures  
Complaint  
Procedures  
Designation of Counsel Statement

cc: Wally Herger

27040353174





FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

May 23, 1986

Don Gallino  
4784 Alta Camino Drive  
Redding, CA 96002

Dear Mr. Gallino:

This letter will acknowledge receipt of a complaint filed by you which we received on May 20, 1986, which alleges possible violations of the Federal Election Campaign Act of 1971, as amended, (the "Act"), by Wally Herger, Wally Herger for Congress and Friends of Wally Herger for Assembly with Jerry Crippen, as treasurer of both. The respondents will be notified of this complaint within five days.

You will be notified as soon as the Commission takes final action on your complaint. Should you receive any additional information in this matter, please forward it to this office. We suggest that this information be sworn to in the same manner as your original complaint. For your information, we have attached a brief description of the Commission's procedures for handling complaints. We have numbered this matter under review MUR 2178. Please refer to this number in all future correspondence. If you have any questions, please contact Lorraine F. Ramos at (202) 376-3110.

Sincerely,

Charles N. Steele  
General Counsel

  
By: Kenneth A. Gross  
Associate General Counsel

Enclosure

07040653175



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

*Ole  
Bork*  
**SENSITIVE**

MEMORANDUM TO: THE COMMISSION  
FROM: MARJORIE W. EMMONS/ ARNITA D. HESSION  
DATE: MAY 22, 1986  
SUBJECT: MUR 2178 - COMPLAINT

The attached has been circulated for your  
information.

Attachment

3704053175

May 19 1986

06 MAY 20 AM: 58

RECEIVED  
GENERAL COUNSEL

Mr. Charles Steele  
General Counsel  
Federal Election Commission  
999 E Street, N.W., Room 657  
Washington, D.C. 20563

Re: Formal Complaint Pursuant to 2 U.S.C. §437  
Gentlemen:

The undersigned complainant complains of the following persons and committees that complainant has reason to believe have violated the Federal Election Campaign Act, as amended, and requests an expedited review of the matters complained of which affect the 1986 Primary Election.

A. Persons Complained of:

- (1) Wally Herger for Congress Committee C00117731, P.O. Box 123, Yuba City, CA 95992 (CD-2 CA), Jerry Crippen, Treasurer;
- (2) Friends of Wally Herger for Assembly ("Affiliated State Committee), California State ID# 790456, same address, same Treasurer;
- (3) Candidate Wally Herger; and,
- (4) Treasurer Jerry Crippen.

B. Alleged Violations:

- (1) Possible use of impermissible non-personal funds in connection with a federal election, 2 U.S.C. § 441b, and failure to demonstrate through reasonable accounting method that the candidate's federal committee received permissible funds under the act. 11 CFR 102.5(b).
- (2) Failure of federal candidate's connected state committee to register as a federal committee resulting from transfer of \$1,000 or more. 11 CFR 102.1(d).

971415177

C. Facts:

Wally Herger for Congress Committee filed its FEC Form 1 on February 7, 1986, when Wally Herger became a candidate for the Republican nomination for the Second Congressional District California seat being vacated by Congressman Gene Chappie (Exhibit "A").

On the following dates, as reported on the committee's January 1, 1986 through March 17, 1986 report (Exhibit "B"), the committee received transfers from "Friends of Wally Herger for Assembly", a state campaign committee of the candidate:

1/13/86	\$15,066.99 */
1/24/86	6,703.00 */
2/3/86	3,568.13 -
2/4/86	634.00
2/6/86	703.00
2/14/86	751.00
2/15/86	4,000.00
3/11/86	<u>28,549.98</u>
Total	\$59,377.00

\*/ Received more than 10 days before filing of FEC Form 1.

The report indicated the receipts were "transfers from other authorized committees". However, no records indicate the "Friends of Wally Herger for Assembly" has ever filed a FEC Form 1 Statement of Organization or any report itemizing contributions, as required by 11 CFR 102.1(d), 102.2, 11 CFR 104.3 and 11 CFR 105.

Complainant has reason to believe the state committee complained of herein attempted to transfer to the federal committee campaign funds which included corporate and other non-personal dollars. The determination as to what funds were permissible contributions for federal purposes appears to have ignored the FEC's regulations and instructions concerning use of the "last in, first out" method of segregating permissible personal dollars from impermissible corporate funds for transfer into candidate Wally Herger's federal account, because the state committee's state campaign reports for the periods 1/1/86 to 3/17/86, 7/1/85 to 12/31/86, 5/19/85 to 6/30/85, 3/19/85 to 5/18/85 and 1/1/85 to 3/15/85, make clear that the proportion of corporate or impermissible funds on hand was at least \$35,500 of \$86,568.00, and perhaps more, because nearly \$16,000 in receipts were unitemized (under \$100 which is the California State law reporting threshold) and it cannot be determined what was the character of those funds.

Mr. Charles Steele  
General Counsel  
May 19, 1986  
Page 3

The foregoing is of my personal knowledge and is based on the public documents and records attached hereto, which were obtained by me from the custodians of public records. Executed under penalty of perjury this 19 day of May, 1986 at Redding, California.

Don Gallino  
Don Gallino  
4784 Alta Camino Drive  
Redding, CA

State of California  
County of Shasta

On this 19th day of May 1986, before me the undersigned, a Notary Public in and for said County and State, personally appeared DON GALLINO, personally known to me to be the person whose name subscribed to the within instrument and acknowledged that he executed the same.

Sarah L. Peters



37040553179





18778  
A. L. ...

P.O. Box ...  
City, State and Zip

Texas Class, Co. 18778

☒ This is address is different than previously reported

TYPE OF REPORT

- ☒ April 15 Quarterly Report  
☐ July 15 Quarterly Report  
☐ October 15 Quarterly Report  
☐ January 31 Year End Report  
☐ July 31 Mid Year Report (Non-election Year Only)
- ☐ Twelfth day report preceding ... (Type of Election)  
election on ... in the State of ...  
☐ Thirtieth day report following the General Election on ... in the State of ...  
☐ Termination Report

This report contains activity for - ☒ Primary Election ☐ General Election ☐ General Election ☐ Runoff Election

PERIOD		Column A This Period	Column B Same Period Last Year
6. Covering Period	1-1-55 through 3-31-55		
7. Net Contributions (other than loans)			
(a) Total Contributions (other than loans) (From Line 11 (a))		46,657.46	46,657.46
(b) Total Contribution Refunds (From Line 25 (a))		250.00	250.00
(c) Net Contributions (other than loans) (Subtract Line 6 (b) from 6 (a))		46,407.46	46,407.46
7. Net Operating Expenditures			
(a) Total Operating Expenditures (From Line 17)		65,836.60	65,836.60
(b) Total Offset to Operating Expenditures (From Line 14)		-0-	-0-
(c) Net Operating Expenditures (Subtract Line 7 (b) from 7 (a))		65,836.60	65,836.60
8. Cash on Hand at Close of Reporting Period (From Line 27)		41,101.88	
9. Substantive Disbursements Due TO The Committee			
10. Substantive Disbursements Due BY The Committee		1,000.00	

I certify that I have examined this report and the truth of my knowledge and belief is correct and true.

For further information concerning  
Federal Election Commission  
and its procedures, contact  
Local Office

JOHN E. CRIPPER  
*John E. Crippen*  
Chairman of the Committee

*John E. Crippen*  
Chairman of the Committee

NOTE: Submission of false or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

All previous versions of FEE FORM 3 and FEE FORM 3a are obsolete and should no longer be used.

# I. RECEIPTS

11. CONTRIBUTIONS (other than loans) FROM:
  - (a) Individuals/Persons Other Than Political Committees (Name Every Contributor) 5,000.00
  - (b) Political Party Committees
  - (c) Other Political Committees
  - (d) The Candidate
  - (e) TOTAL CONTRIBUTIONS (other than loans) FROM 11(a), 11(b), 11(c) and 11(d)
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES
13. LOANS:
  - (a) Made or Guaranteed by the Candidate
  - (b) All Other Loans
  - (c) TOTAL LOANS (add 13(a) and 13(b))
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Returns, etc.)
15. OTHER RECEIPTS (Grants, Interest, etc.)
16. TOTAL RECEIPTS (add 11 (a), 12, 13 (c), 14 and 15)

## II. DISBURSEMENTS

17. OPERATING EXPENDITURES
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES
19. LOAN REPAYMENTS:
  - (a) Of Loan Made or Guaranteed by the Candidate
  - (b) Of All Other Loans
  - (c) TOTAL LOAN REPAYMENTS (add 19(a) and 19(b))
20. REFUND OF CONTRIBUTIONS TO:
  - (a) Individuals/Persons Other Than Political Committees
  - (b) Political Party Committees
  - (c) Other Political Committees
  - (d) TOTAL CONTRIBUTION REFUND (add 20(a), 20(b), and 20(c))
21. OTHER DISBURSEMENTS
22. TOTAL DISBURSEMENTS (add 17, 18, 19 (c), 20 (d) and 21)

## III. SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	0	23
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	107,188.48	24
25. SUBTOTAL (add Line 23 and Line 24)	\$	107,188.48	25
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	\$	66,086.60	26
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (Subtract Line 26 from 25)	\$	41,101.88	27

STATE OF CALIFORNIA - CREDITORS			
<b>1. Debtor's Name and Address:</b> Fred Thompson 2000 Broadway St Chico, CA 95926	<b>2. Name of Employer:</b> Almont Orchards <b>Occupation:</b> Orchard	<b>3. Date (month, day, year):</b> 2/18/86	<b>4. Amount of Cash Received This Period:</b> 200.00
<b>5. Debtor's Name and Address:</b> Peter Olson 521 N. Arden Dr Beverly Hills, CA 90210	<b>6. Name of Employer:</b> <b>Occupation:</b> Average Yearly Salary - \$ 200.00	<b>7. Date (month, day, year):</b> 2/18/86	<b>8. Amount of Cash Received This Period:</b> 500.00
<b>9. Debtor's Name and Address:</b> Alberto Gilpatric 617 Barrington Dr Tuba City, AZ 95951	<b>10. Name of Employer:</b> Gilpatric Oil Co. <b>Occupation:</b> Average Yearly Salary - \$ 200.00	<b>11. Date (month, day, year):</b> 2/19/86	<b>12. Amount of Cash Received This Period:</b> 200.00
<b>13. Debtor's Name and Address:</b> Ernest Smith 348 River View Dr Oroville, CA 95965	<b>14. Name of Employer:</b> Self <b>Occupation:</b> Rancher Average Yearly Salary - \$ 250.00	<b>15. Date (month, day, year):</b> 2/19/86	<b>16. Amount of Cash Received This Period:</b> 250.00
<b>17. Debtor's Name and Address:</b> Ralph Wilson P.O. Box 216 Williams, CA 95987	<b>18. Name of Employer:</b> Self <b>Occupation:</b> Rancher Average Yearly Salary - \$ 200.00	<b>19. Date (month, day, year):</b> 2/19/86	<b>20. Amount of Cash Received This Period:</b> 200.00
<b>21. Debtor's Name and Address:</b> Alfred Sedler 628 Chaudry Tuba City, CA 95991	<b>22. Name of Employer:</b> Sedler's Cleaners <b>Occupation:</b> Average Yearly Salary - \$ 200.00	<b>23. Date (month, day, year):</b> 2/19/86	<b>24. Amount of Cash Received This Period:</b> 200.00
<b>25. Debtor's Name and Address:</b> Ralph Thompson 1405 Pennell Santa Barbara, CA 93103	<b>26. Name of Employer:</b> <b>Occupation:</b> Average Yearly Salary - \$ 200.00	<b>27. Date (month, day, year):</b> 2/19/86	<b>28. Amount of Cash Received This Period:</b> 200.00
<b>29. Subtotal of Amounts This Page (Include):</b>			1,750.00
<b>30. Total This Period (Sum of all pages, include number only):</b>			1,750.00

Any information supplied from this Report for Disbursements may not be used by any person for the purpose of making contributions or for any other purpose, other than using the name and address of any political committee to obtain contributions from such contributor.

Name of Committee in Full **VALLY WENGER FOR CONGRESS COMMITTEE** *Sch. 13*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dick Colby 2211 Lincoln Rd Yuba City, CA 95991	<b>Mailer</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/11/86	15,046.99
Grace Valley Computers 616 C St Marysville, CA 95901	<b>Computers &amp; Supplies</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/24/86 2/26/86 3/31/86	2,703.00 31.88 95.40
Busso, Watts & Ballins 770 L St, #930 Sacramento, CA 95807	<b>Consultants</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/24/86	4,000.00
Pacific Bell Sacramento, CA 95807	<b>Telephone</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/1/86 2/2/86 2/3/86 2/4/86 2/5/86	1,100.00 100.00 100.00 100.00 100.00
Christopher Melson Sugarloaf, CA 92386	<b>Consultant</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/3/86 2/21/86 3/15/86	2,000.00 3,000.00 3,000.00
National Advertising Co Bedford Park, IL 60501	<b>Billboards</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/15/86 3/12/86	4,000.00 4,018.00
Butter County Clerk County Bldg Yuba City, CA 95991	<b>Filing Fee</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/14/86	751.00
U. S. Postmaster Yuba City, CA 95991	<b>Postage</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/20/86 3/26/86	150.00 100.00
Cottrell Ad Display Co 1014 E. 10th St Long Beach, CA 90813	<b>Billboards</b> Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/21/86 3/21/86	1,347.23 35.50
SUBTOTAL of Disbursements This Page (optional) .....			42,198.40
TOTAL This Period (last page this line number only) .....			

The information on this form is to be used by the State of California to determine if the donor is a resident of the State of California. If the donor is not a resident of the State of California, the donor must provide the name and address of the donor's principal place of business or principal office in the State of California. If the donor is not a resident of the State of California, the donor must also provide the name and address of the donor's principal place of residence in the State of California.

**WALLY HARGER FOR ASSEMBLY COMMITTEE**  
 A. Full Name, Mailing Address and ZIP Code  
 Friends of Wally Harger for Assembly  
 P.O. Box 123  
 Yuba City, CA 95991  
 Donor For: ☒ Secretary ☐ General  
☐ Other (specify):

Name of Employer	Date Recd. (day, year)	Amount of Cash Receipts This Period
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 15,066.99	1/13/86	15,066.99
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 11,703.00	1/24/86	6,703.00
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 21,749.99	2/3/86	3,548.13
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 25,138.12	2/4/86	634.00
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 25,972.12	2/6/86	103.90
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 26,076.02	2/14/86	751.00
CA 0790456 Campaign Committee Amount Year-to-Date - \$ 26,827.02	2/15/86	4,000.00
<b>SUBTOTAL of Receipts This Page (include all)</b>		30,827.02
<b>TOTAL This Period (last page this line number only)</b>		

Any information concerning this form should be obtained from the Internal Revenue Service or the State Department of Taxation.

**MONTHLY REPORT FOR CHARITABLE CONTRIBUTIONS**

<b>A. Full Name, Mailing Address and ZIP Code</b> Friends of Willy Burger for Assembly P.O. Box 123 Yuba City, CA 95991		<b>Name of Employer</b> CA #790456	<b>Date (month, day, year)</b> 3/11/86	<b>Amount of Each Receipt This Period</b> 28,549.98
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Committee on Contributions Aggregate Year-to-Date—\$ 59,377.00		
<b>B. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>C. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>D. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>E. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>F. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>G. Full Name, Mailing Address and ZIP Code</b>		<b>Name of Employer</b>	<b>Date (month, day, year)</b>	<b>Amount of Each Receipt This Period</b>
<b>Receipt For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		<b>Organization</b> Aggregate Year-to-Date—\$		
<b>SUBTOTAL of Receipts This Page (optional)</b>				28,549.98
<b>TOTAL This Period (next page this line number only)</b>				59,377.00



# UNITED STATES OF AMERICA

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
James Donio P.O. Box 999 Roseville, CA 95661		Donio's Super's Market Owner	2/21/86	200.00
Recd. For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$200.00		
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Gladys Justesen 469 Block Rd Gridley, CA 95948		Self	2/26/86	300.00
Recd. For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$300.00		
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Jocelin Hume 333 Kearny, #1800 San Francisco, CA 94108			2/28/86	500.00
Recd. For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$500.00		
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Mr. Mel Amarel P.O. Box 1323 Yuba City, CA 95991		Amarel Grain Co	3/4/86	1000.00
Recd. For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$1000.00		
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Mrs. Mel Amarel P.O. Box 1323 Yuba City, CA 95991		N/A	3/8/86	1000.00
Recd. For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$1000.00		
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Janet Lonon 910 Chleyer Yuba City, CA 95991		Self	3/4/86	1000.00
Recd. For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$1000.00		
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date Recd., day, year	Amount of Cash Receipts This Period
Rory Poundstone P.O. Box 887 Colusa, CA 95932		Self	3/4/86	1000.00
Recd. For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Average Year-to-Date - \$1000.00		
SUBTOTAL of Receipts This Page (optional)				5200.00
TOTAL This Period (omit page this line number only)				

3704015-137

WILLIAMS FOR CINCINNATI CHARTER			
<b>A. Full Name, Mailing Address and ZIP Code</b> Dennis Robinson P.O. Box 1620 Oroville, CA 95965		<b>Company</b> Robinson Construction <b>Occupation</b> Owner Amount Year-to-Date \$1000.00	<b>Date Recd.</b> day, year 3/4/86 <b>Amount of Cash Received This Period</b> 1000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>B. Full Name, Mailing Address and ZIP Code</b> Betty Tarke 11481 S. Butte Rd Sutter, CA 95982		<b>Name of Employer</b> Tarke Brothers <b>Occupation</b> Owner Amount Year-to-Date \$500.00	<b>Date Recd.</b> day, year 3/4/86 <b>Amount of Cash Received This Period</b> 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>C. Full Name, Mailing Address and ZIP Code</b> Mitchell Morgan P.O. Box 991 Marysville, CA 95901		<b>Name of Employer</b> Morgan & Shaden <b>Occupation</b> Owner Amount Year-to-Date \$500.00	<b>Date Recd.</b> day, year 3/4/86 <b>Amount of Cash Received This Period</b> 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>D. Full Name, Mailing Address and ZIP Code</b> Eugene Penne 1940 Jefferson Ave Red Bluff, CA 96080		<b>Name of Employer</b> Penne Lane Building <b>Occupation</b> Owner Amount Year-to-Date \$1000.00	<b>Date Recd.</b> day, year 3/4/86 <b>Amount of Cash Received This Period</b> 1000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>E. Full Name, Mailing Address and ZIP Code</b> Marsha Bamford P.O. Box 309 Challenge, CA 95925		<b>Name of Employer</b> N/A <b>Occupation</b> Homemaker Amount Year-to-Date \$500.00	<b>Date Recd.</b> day, year 3/7/86 3/21/86 <b>Amount of Cash Received This Period</b> 500.00 500.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>F. Full Name, Mailing Address and ZIP Code</b> A. A. Emerson 280 E. 12th Arcata, CA 95521		<b>Name of Employer</b> Emerson <b>Occupation</b> Owner Amount Year-to-Date \$1000.00	<b>Date Recd.</b> day, year 3/7/86 <b>Amount of Cash Received This Period</b> 1000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>G. Full Name, Mailing Address and ZIP Code</b> David Westcott P.O. Box 45, St Et Brownsville, CA 95919		<b>Name of Employer</b> Super-Choice <b>Occupation</b> President Amount Year-to-Date \$1000.00	<b>Date Recd.</b> day, year 3/7/86 <b>Amount of Cash Received This Period</b> 1000.00
<b>Receipt For:</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
<b>SUBTOTAL of Receipts This Page (optional)</b>			6000.00
<b>TOTAL This Period (last page this line number only)</b>			

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Cash Receipts This Period
Frank Annede 9416 2nd Ave Hill Grove, CA 95624		Four Star Electric President Amount Ver-ified - \$ 200.00	3/10/86	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
B. Full Name, Mailing Address and ZIP Code Wesley Jopson 1255 Pleasant Grove Rd Wheatland, CA 95692		Self Reception Amount Ver-ified - \$ 750.00	3/10/86	750.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
C. Full Name, Mailing Address and ZIP Code Stephen Cole 94642 Florin Rd Sacramento, CA 95823		Cole, Cross & Calbreth Reception Amount Ver-ified - \$ 200.00	3/13/86	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
D. Full Name, Mailing Address and ZIP Code Jim Jarrett Rt 1, Box 93 Williams, CA 95987		Self Reception Amount Ver-ified - \$ 200.00	3/13/86	200.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
E. Full Name, Mailing Address and ZIP Code Motorcycle Manufacturer's PAC 3151 Airway Ave, #P-1 Costa Mesa, CA 92626		926017 Reception Amount Ver-ified - \$ 250.00	3/13/86	250.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
F. Full Name, Mailing Address and ZIP Code Renee Snider 5305 Dinot Circle Fair Oaks, CA 95628		N/A Reception Amount Ver-ified - \$ 1000.00	3/13/86	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
G. Full Name, Mailing Address and ZIP Code Paul Snider 5150 Madison Ave Sacramento, CA 95841		Snider Club Car Membership Reception Amount Ver-ified - \$ 1000.00	3/13/86	1000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):				
SUBTOTAL of Receipts This Page (optional)				3900.00
TOTAL This Period (last page this line number only)				

# UNITED STATES POST OFFICE COMMITTEE

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Karl Christopherson 1341 Henn Rd Yuba City, CA 95991</p>		<p>Name of Employer</p> <p>Hease Van &amp; Storage</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>5000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>John Drake P.O. Box 1448 Chico, CA 95927</p>		<p>Name of Employer</p> <p>None</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>John Kocher 2830 W. Main St. #7 Red Bluff, CA 96080</p>		<p>Name of Employer</p> <p>CA Gas Services</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>1000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Jack Macko 150 Butte Ave Yuba City, CA 95991</p>		<p>Name of Employer</p> <p>Macko Oil Co</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>500.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Robert Peppercorn 367 Del Norte, #4 Yuba City, CA 95991</p>		<p>Name of Employer</p> <p>Self</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>1000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Propane PAC 1301 W. 22nd St. #610 Oak Brook, IL 60521</p>		<p>Name of Employer</p> <p>PC00079681</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>1000.00</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>N/A</p>			
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>William Smith 3711 J St Sacramento, CA 95816</p>		<p>Name of Employer</p> <p>Smith Photography</p>		<p>Date Recd. 3/17/86</p>	<p>Amount of Cash Receipts This Period</p> <p>413.30</p>
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General</p> <p><input type="checkbox"/> Other (specify):</p>		<p>Competition</p> <p>None</p>			
<p>SUBTOTAL of Receipts This Page (optional) .....</p>					<p>5413.30</p>
<p>TOTAL This Period (Sum page this line number only) .....</p>					

<b>Victor Verillo</b> 95 Huntington Circle Marlboro, MA 01752		Date Recd. 3/21/86	Amount of Cash Received This Period 300.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/21/86	Amount of Cash Received This Period 200.00
<b>Victor Verillo</b> Rt. 5, Box 952 Chico, CA 95926		Date Recd. 3/21/86	Amount of Cash Received This Period 200.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/21/86	Amount of Cash Received This Period 300.00
<b>Richard Beyer</b> P.O. Box 62 Fort Jones, CA 95632		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
<b>Stanley Friden</b> 8809 Oro Fino Rd Fort Jones, CA 95632		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
<b>Wile Evans</b> 2809 Bear River Dr Westland, CA 95692		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/25/86	Amount of Cash Received This Period 200.00
<b>Steve Carson</b> P.O. Box 126 Marysville, CA 95901		Date Recd. 3/28/86	Amount of Cash Received This Period 300.00
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/28/86	Amount of Cash Received This Period 722.22
<b>Frank Booth</b> P.O. Box 3 Marysville, CA 95901		Date Recd. 3/28/86	Amount of Cash Received This Period 722.22
Recd. For: <input type="checkbox"/> Salary <input type="checkbox"/> Other <input type="checkbox"/> Other Specify:		Date Recd. 3/28/86	Amount of Cash Received This Period 722.22
APPROVAL of Receipts This Page (optional)			2922.22
TOTAL This Period (Sum page this line number only)			

<p>For the purpose of collecting information on the  of the following information, please fill in the following information.</p>			
<p>SELF-EMPLOYED FOR CURRENT PERIOD</p>			
<p>A. Full Name, Mailing Address and ZIP Code  L. R. Booth  2204 Sacramento, #383  San Francisco, CA 94115</p>	<p>Name of Employer  Valley Sheet Metal</p>	<p>Date (month, day, year)  1/28/86</p>	<p>Amount of Cash Received This Period  722.22</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Vice President  Aggregate Year-to-Date-\$ 722.22</p>		
<p>B. Full Name, Mailing Address and ZIP Code  Frances Booth  P.O. Box 5  Marysville, CA 95901</p>	<p>Name of Employer  Frank Booth, Inc.</p>	<p>Date (month, day, year)  1/28/86</p>	<p>Amount of Cash Received This Period  722.22</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Chairman of the Board  Aggregate Year-to-Date-\$ 722.22</p>		
<p>C. Full Name, Mailing Address and ZIP Code  Roberta Andreotti  Rt 1, Box 185  Williams, CA 95987</p>	<p>Name of Employer  N/A</p>	<p>Date (month, day, year)  3/31/86</p>	<p>Amount of Cash Received This Period  371.50</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Homemaker  Aggregate Year-to-Date-\$ 371.50</p>		
<p>D. Full Name, Mailing Address and ZIP Code  M. P. Clay  P.O. Box 173  Colusa, CA 95932</p>	<p>Name of Employer  Andreotti Bros Trucking</p>	<p>Date (month, day, year)  3/31/86</p>	<p>Amount of Cash Received This Period  371.50</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Owner  Aggregate Year-to-Date-\$ 371.50</p>		
<p>E. Full Name, Mailing Address and ZIP Code  Eugene Belquedo  3245 Rio Dr, #1003  Falls Church, VA 22041</p>	<p>Name of Employer  Public Advocate</p>	<p>Date (month, day, year)  3/31/86</p>	<p>Amount of Cash Received This Period  580.00</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Executive Director  Aggregate Year-to-Date-\$ 500.00</p>		
<p>F. Full Name, Mailing Address and ZIP Code  Vincent Hamilton  969 Plumas, #206  Yuba City, CA 95991</p>	<p>Name of Employer  Self</p>	<p>Date (month, day, year)  3/31/86</p>	<p>Amount of Cash Received This Period  1000.00</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Doctor  Aggregate Year-to-Date-\$ 1000.00</p>		
<p>G. Full Name, Mailing Address and ZIP Code  A. W. Eashman  9330 Moore Rd  Pleasant Grove, CA 95668</p>	<p>Name of Employer  Self</p>	<p>Date (month, day, year)  2/28/86  3/31/86</p>	<p>Amount of Cash Received This Period  25.00  500.00</p>
<p>Residence For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Occupation  Teacher  Aggregate Year-to-Date-\$ 525.00</p>		
<p>SUBTOTAL of Receipts This Page (appendix) .....</p>			<p>4212.44</p>
<p>TOTAL This Period (last page this line number only) .....</p>			



<b>A. Full Name, Mailing Address and ZIP Code</b> Amb. V. Alexis 3133 Cayn Ave, NW Washington, D.C. 20008	<b>Name of Employer</b>  <b>Occupation</b> Teacher	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 500.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Aggregate Year-to-Date</b> 4,500.00		
<b>B. Full Name, Mailing Address and ZIP Code</b> CBS Properties 419 9th St, SA Marysville, CA 95901	<b>Name of Employer</b> N/A	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 400.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> N/A		
	<b>Aggregate Year-to-Date</b> 4,400.00		
<b>C. Full Name, Mailing Address and ZIP Code</b> John Guth 1141 Robert Dr John City, CA 95808	<b>Name of Employer</b> Ashby, Guth & Doughty	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 200.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Attorney		
	<b>Aggregate Year-to-Date</b> 4,200.00		
<b>D. Full Name, Mailing Address and ZIP Code</b> Roy Lamm P.O. Box 591 Marysville, CA 95901	<b>Name of Employer</b> East Bros	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 600.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Owner		
	<b>Aggregate Year-to-Date</b> 4,600.00		
<b>E. Full Name, Mailing Address and ZIP Code</b> Judy Robinson P.O. Box 2306 Oroville, CA 95965	<b>Name of Employer</b> N/A	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 481.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Housewife		
	<b>Aggregate Year-to-Date</b> 4,481.00		
<b>F. Full Name, Mailing Address and ZIP Code</b> Cynthia Robinson 5344 Treasure Hill Dr Oroville, CA 95965	<b>Name of Employer</b> N/A	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 481.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Homemaker		
	<b>Aggregate Year-to-Date</b> 4,481.00		
<b>G. Full Name, Mailing Address and ZIP Code</b> Renee Robinson 1560 Glen Ellen Dr Gridley, CA 95948	<b>Name of Employer</b> N/A	<b>Date (month, day, year)</b> 3/31/86	<b>Amount of Cash Received This Period</b> 481.00
<b>Receipts For:</b> <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> Homemaker		
	<b>Aggregate Year-to-Date</b> 4,481.00		
<b>SUBTOTAL of Receipts This Page (optional)</b>			3143.00
<b>TOTAL This Period (Sum page this line number only)</b>			

Name of Recipient		Amount of Cash Receipts This Period	Amount of Cash Receipts This Period
Charles M. Bridges P.O. Box 1425 Yuba City, CA 95991		Office Equipment In-Kind 1/24/86	247.00 In-Kind
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 247.00	
A. Full Name, Mailing Address and ZIP Code Walter H. Christensen P.O. Box 1388 Yuba City, CA 95991		Name of Employer Baker Pipe & Supply Date Month, day, year 2/24/86 3/31/86	Amount of Cash Receipts This Period 150.00 300.00
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 450.00	
B. Full Name, Mailing Address and ZIP Code Ellis Matthews 320 1st St Marysville, CA 95901		Name of Employer Matthews, Crippen & Tenney Date Month, day, year 2/28/86 3/31/86	Amount of Cash Receipts This Period 40.00 40.00 In-Kind Rent
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 80.00	
C. Full Name, Mailing Address and ZIP Code Jerry Crippen 320 1st St Marysville, CA 95901		Name of Employer Matthews, Crippen & Tenney Date Month, day, year 2/28/86 3/31/86	Amount of Cash Receipts This Period 40.00 40.00 In-Kind Rent
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 80.00	
D. Full Name, Mailing Address and ZIP Code Jerry Tenney 320 1st St Marysville, CA 95901		Name of Employer Matthews, Crippen & Tenney Date Month, day, year 2/28/86 3/31/86	Amount of Cash Receipts This Period 40.00 40.00 In-Kind Rent
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 80.00	
E. Full Name, Mailing Address and ZIP Code Bob Gallagher 3999 Bear River Dr. Rio Oso, CA 95674		Name of Employer Self Date Month, day, year 3/31/86	Amount of Cash Receipts This Period 247.00 In-Kind
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 247.00	
F. Full Name, Mailing Address and ZIP Code Jan Leal P.O. Box 1338 Chico, CA 95927		Name of Employer Self Date Month, day, year 3/31/86	Amount of Cash Receipts This Period 200.00
Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):		Amount Due to Recipient: \$ 200.00	
SUBTOTAL of Receipts This Page (rounded)			1045.50
TOTAL This Period (see page 4 for this line number only)			

# MAKING RECORD FOR THE CONSUMER

A. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)	Amount of Cash Receipts This Period
Gayle Morrison P.O. Box 29 Yuba City, CA 95992		S&L	1/11/88	100.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u>Manufacturing</u> Average Year-to-Year: <u>100.00</u>		
B. Full Name, Mailing Address and ZIP Code Peter Beckins 625 Bridge St Yuba City, CA 95991		Name of Employer: <u>Superior Beverage</u> Occupation: <u></u>	Date (month, day, year): <u>1/21/88</u>	Amount of Cash Receipts This Period: <u>110.00</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u>100.00</u>		
C. Full Name, Mailing Address and ZIP Code Wayne Hoblit P.O. Box 489 Modesto, CA 95932		Name of Employer: <u>Golden Gate Auto Auction</u> Occupation: <u>Pilot</u>	Date (month, day, year): <u>3/29/88</u>	Amount of Cash Receipts This Period: <u>142.50 in-kind</u>
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u>142.50</u>		
D. Full Name, Mailing Address and ZIP Code - -		Name of Employer: <u></u> Occupation: <u></u>	Date (month, day, year): <u></u>	Amount of Cash Receipts This Period: <u></u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u></u>		
E. Full Name, Mailing Address and ZIP Code - -		Name of Employer: <u></u> Occupation: <u></u>	Date (month, day, year): <u></u>	Amount of Cash Receipts This Period: <u></u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u></u>		
F. Full Name, Mailing Address and ZIP Code - -		Name of Employer: <u></u> Occupation: <u></u>	Date (month, day, year): <u></u>	Amount of Cash Receipts This Period: <u></u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u></u>		
G. Full Name, Mailing Address and ZIP Code - -		Name of Employer: <u></u> Occupation: <u></u>	Date (month, day, year): <u></u>	Amount of Cash Receipts This Period: <u></u>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: <u></u> Average Year-to-Year: <u></u>		
SUBTOTAL of Receipts This Page (optional)				942.50
TOTAL This Period (next page this line number only)				34,528.96

Any information supplied from each Receipt is to be used only for the purpose of obtaining contributions or for financial purposes, after that time the information is to be used for no other purpose in which contribution was not received.

# **RECEIPT FOR CONGRESS COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> Boyce for Congress P.O. Box 6765 Fullerton, CA 92634	<b>Name of Employer</b> N/A Loan	<b>Date (month, day, year)</b> 7/10/76	<b>Amount of Cash Received This Period</b> 1,000.00
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b> N/A	<b>Aggregate Year-to-Date—\$</b> 1,000.00	
<b>B. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>C. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>D. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>E. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>F. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>G. Full Name, Mailing Address and ZIP Code</b>  	<b>Name of Employer</b>  	<b>Date (month, day, year)</b>  	<b>Amount of Cash Received This Period</b>  
<b>Receipt For:</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	<b>Occupation</b>  	<b>Aggregate Year-to-Date—\$</b>	
<b>SUBTOTAL of Receipts This Page (optional)</b> .....			1,000.00
<b>TOTAL This Period (list page this line number only)</b> .....			1,000.00

Any information furnished on this form is for the use of the Commission only and is not to be distributed outside the Commission. The Commission will not be held responsible for any loss or damage to the information furnished on this form.

Name of Candidate for Public Office: **WALLY WERNER FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Cash Disbursement This Period
PIP Printing 753 Butler St Yuba City, CA 95991	Printing	2/26/86	58.84
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	3/24/86	403.27
	<input type="checkbox"/> Other (specify):	3/25/86	79.18
Hilde Steinboert 941 Richmond Rd Yuba City, CA 95991	Employee	3/3/86	761.51
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Sandra Cummings Hooper Rd Yuba City, CA 95991	Employee	3/3/86	478.20
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Bernart P.O. Box 1088 Marysville, CA 95901	Printing	3/6/86	325.53
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Brad Zerbo 320 1st St Marysville, CA 95901	Campaign Manager	3/7/86	400.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General	3/10/86	2,994.56
	<input type="checkbox"/> Other (specify):	3/28/86	296.40
Valley Rose Printing 421 Center St Yuba City, CA 95991	Mailers	3/10/86	500.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Bank of America 619 E St Marysville, CA 95901	Travel Expenses (VISA)	3/11/86	987.53
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Jay Stott P.O. Box 214 Chico, CA 95927	Billboards	3/16/86	2,530.00
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
Peggy Bristow 1540 Spencer Ln Yuba City, CA 95991	Employee	3/3/86	201.76
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General		
SUBTOTAL of Disbursements This Page (optional) .....			10,006.88
TOTAL This Period (See page two line number only) .....			

Any information provided hereon is to be used by any person for the purpose of collecting contributions or for any other purpose. The use of this information for any other purpose is prohibited. The use of this information for any other purpose is prohibited.

NAME OF CONTRIBUTOR TO POLY: **WALLY WILSON FOR CHAIRMAN COMMITTEE**

A. Full Name, Mailing Address and ZIP Code Pine Print 849 Via de La Paz, Suite B Pacific Palisades, CA 90872	Purpose of Disbursement <b>Type Setting</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/20/86	906.94
B. Full Name, Mailing Address and ZIP Code D & D Printing Consultant 3509 Ballentine #8 Sacramento, CA 95826	Purpose of Disbursement <b>Signs</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	1/22/86	450.50
C. Full Name, Mailing Address and ZIP Code Candidates Outdoor Graphics Svc 1041 Old County Rd Belmont, CA 94002	Purpose of Disbursement <b>Signs</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/28/86	9,306.00
D. Full Name, Mailing Address and ZIP Code Charles-Elle Bridges P.O. Box 1425 Tuba City, CA 95991	Purpose of Disbursement <b>Office Equipment</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/3/86	108.50 In-Kind
E. Full Name, Mailing Address and ZIP Code Ellis Matthews 320-1st St Marysville, CA 95901	Purpose of Disbursement <b>Office Rent</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
F. Full Name, Mailing Address and ZIP Code Jerry Crippen 320-1st St Marysville, CA 95901	Purpose of Disbursement <b>Office Rent</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
G. Full Name, Mailing Address and ZIP Code Jerry Tenny 320-1st St Marysville, CA 95901	Purpose of Disbursement <b>Office Rent</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	2/28/86 3/31/86	40.00 40.00 In-Kind
H. Full Name, Mailing Address and ZIP Code Bob Gallagher 3999 Bear River Dr Rio Oso, CA 93674	Purpose of Disbursement <b>Transportation</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/31/86	247.00 In-Kind
I. Full Name, Mailing Address and ZIP Code Wayne Hublit P.O. Box 489 Woodland, CA 95932	Purpose of Disbursement <b>Transportation</b>	Date (month, day, year)	Amount of Cash Disbursement This Period
	Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	3/29/86	142.50 In-Kind
SUBTOTAL of Disbursements This Page (optional) .....			11,001.44
TOTAL This Period (see page this line number only) .....			

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Any information furnished hereon is to be used for the purpose of certifying contributions of the congressional campaign, and shall not be used for any other purpose. It is the policy of the committee to certify contributions from such sources.

Name of Committee in Full

# **NALLY HERDER FOR CONGRESS COMMITTEE**

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Christopher Nelson Sugarloaf, Ca. 92306</p>	<p>Purpose of Disbursement</p> <p>Re-imburse Travel &amp; Telephone Expenses</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p> <p>2/3/86 3/16/86</p>	<p>Amount of Each Disbursement This Period</p> <p>1,568.12 82.21</p>
<p>B. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>C. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>D. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>E. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>H. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p>I. Full Name, Mailing Address and ZIP Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Disbursement This Period</p>
<p><b>SUBTOTAL of Disbursements This Page (optional)</b></p>			<p>1,650.34</p>
<p><b>TOTAL This Period (sum page this line number only)</b></p>			<p>4,857.06</p>

3704035-123

Any information derived from mail responses to this questionnaire shall be used for the purpose of determining the need for and the amount of assistance to be provided to the respondent. This information shall not be used for any other purpose. The respondent shall be notified of the results of the survey.

**VALLY WENGER FOR CONGRESS COMMITTEE**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Refund of Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Motorcycle Manufacturing, PkC 3151 Airway Ave., #F-1 Costa Mesa, Ca. 92626	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	7/19/86	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		
SUBTOTAL of Disbursements This Page (optional) .....			250.00
TOTAL This Period (last page this line number only) .....			250.00

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<b>A. Full Name, Mailing Address and ZIP Code</b> Repes for Congress P.O. Box 6765 Fullerton, CA 92634		<b>Original Amount of Loan</b> 1,000.00	<b>Interest Rate</b> -0-	<b>Balance Outstanding at Close of This Period</b> 1,000.00
Terms: Date Insured <u>1/1/82</u> Date Due <u>1/1/82</u> Interest Rate <u>0%</u> <input type="checkbox"/> Secured				
List All Endorsers or Guarantors (if any) to Item A				
1. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
<b>B. Full Name, Mailing Address and ZIP Code of Loan Source</b>		<b>Original Amount of Loan</b>	<b>Interest Rate</b>	<b>Balance Outstanding at Close of This Period</b>
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Terms: Date Insured Date Due Interest Rate <input type="checkbox"/> Secured		
List All Endorsers or Guarantors (if any) to Item B				
1. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
2. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
3. Full Name, Mailing Address and ZIP Code		Name of Employer Occupation Amount Guaranteed Outstanding		
<b>SUBTOTALS This Period This Page (optional)</b>				1,000.00
<b>TOTALS This Period (Run page in this box only)</b>				1,000.00
Carry outstanding balance only to LINE 2, Schedule D, for this loan. If no Schedule D, carry forward to appropriate line of Summary.				

Any information supplied hereon is for the use of the Internal Revenue Service and is not to be furnished to any other person or organization.

NAME OF CONTRIBUTOR TO FUND: **VALLY HERGER FOR CONGRESS COMMITTEE**

<b>A. Full Name, Mailing Address and ZIP Code</b> Frank Hill for Assembly Committee P.O. Box 9246 Whittier, CA 92608 Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer <b>ID #030-144</b> Occupation	Date (month, day, year) <b>3/6/86</b>	Amount of Cash Received This Period <b>1,000.00</b>
<b>Aggregate Year-to-Date-\$</b> 1000.00			
<b>B. Full Name, Mailing Address and ZIP Code</b> Friends of Drenenberg 1629 Columbia St San Diego, CA 92101 Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) <b>3/10/86</b>	Amount of Cash Received This Period <b>1,000.00</b>
<b>Aggregate Year-to-Date-\$</b> 1000.00			
<b>C. Full Name, Mailing Address and ZIP Code</b> Lewis for Assembly - Federal P.O. Box 665 Yorba Linda, CA 92686 Recipient For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) <b>3/10/86</b>	Amount of Cash Received This Period <b>1,000.00</b>
<b>Aggregate Year-to-Date-\$</b> 2000.00			
<b>D. Full Name, Mailing Address and ZIP Code</b> — Recipient For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year) <b>3/10/86</b>	Amount of Cash Received This Period
<b>Aggregate Year-to-Date-\$</b>			
<b>E. Full Name, Mailing Address and ZIP Code</b> — Recipient For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Cash Received This Period
<b>Aggregate Year-to-Date-\$</b>			
<b>F. Full Name, Mailing Address and ZIP Code</b> — Recipient For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation	Date (month, day, year)	Amount of Cash Received This Period
<b>Aggregate Year-to-Date-\$</b>			
<b>SUBTOTAL of Receipts This Page (optional)</b>			<b>3,000.00</b>
<b>TOTAL This Period (use page this line number only)</b>			<b>3,000.00</b>



FEDERAL ELECTION COMMISSION

WASHINGTON, D.C. 20463

April 24, 1986

Memorandum

TO: John Surina, Staff Director

FROM: Louise Wides, Assistant Staff Director, Information *fu*

SUBJECT: Materials: Contributions from State Account  
to Federal Committee; Selected Court Case Abstracts

Per your request, attached are several documents:

1. Selected Court Case Abstracts 1976-1985  
This document contains abstracts of pertinent FECA related court cases, compiled by this office.  
Note the Table of Contents on p. iii.
2. Materials Pertaining to Contributions (and transfers) from State Committees (accounts) to Federal Committees
  - Recent Record article on Transfers of Candidate Funds from State to Federal Committee.  
This deals with virtually all the issues raised by any type of state/Federal transfer.
  - Three AOs.  
Each one is preceded by the summary which appeared in the Record.

87040653203

REGULAR MAIL  
MAR 14 1986

# Wally Herger for Congress

Wally Herger for Congress • P.O. Box 123, Yuba City, CA 95901 • (916) 741-0447

535 MAR 20 14 8 23

March 14, 1986

Clerk of the House  
1000 Longworth House Office Building  
Washington, D.C. 20540

Gentlemen:

Please remove "Friends of Wally Herger for Assembly"  
as an affiliated committee with "The Wally Herger  
for Congress Committee."

Our identification number is 117731.

Due to a misunderstanding of FEC and recommendation  
of FEC counsel we are removing this committee as an  
affiliated committee with our main congressional  
campaign committee.

Thank you for your help.

Sincerely,

  
Jerry Crippen  
Treasurer

PAID FOR BY WALLY HERGER FOR CONGRESS COMMITTEE



**RECEIVED  
FEB 19 1986**

**STATEMENT OF ORGANIZATION**

(See reverse side for instructions)

1. (a) Name of Committee (in full) **Wally Herger for Congress Committee**  
 (b) Address (Number and Street) **P.O. Box 123**  
 (c) City, State and Zip **Yuba City CA 95992**  
 2. Date **February 18, 1986**  
 3. FPC Registration Number **11773**  
 4. Is this an organized committee? **YES**

5. TYPE OF COMMITTEE  
 (a) Is this committee a committee of one candidate? **NO**  
 (b) Is this committee a committee of more than one candidate? **YES**  
 (c) Name of Candidate **Walter William Herger, Jr. (Wally)**  
 (d) Candidate Party Affiliation **Republican**  
 (e) Congressional District **CA 2**  
 (f) Is this committee supporting only one candidate? **NO**  
 (g) Is this committee a committee of the Party? **NO**  
 (h) Is this committee a separate segregated fund? **NO**  
 (i) Is this committee supporting more than one Federal candidate? **NO**

6. Name of Any Connected Organization or Affiliated Committee **Friends of Wally Herger for Assembly**  
 Mailing Address and ZIP Code **P.O. Box 123 Yuba City CA 95992**  
 Relationship **Affiliated Committee**

7. If the registering political committee has identified a "connected organization" above, please indicate type of organization:  
☐ Corporation ☐ Corporation with Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

8. Custodian of Records (Identify by name, address (phone number optional) and position; the person in charge of the books and records)

Full Name **Hilde Swinehart** Mailing Address and ZIP Code **941 Richland Road, Yuba City, Ca. 95991** Title or Position **Bookkeeper**

9. Treasurer: List the name and address (phone number optional) of the treasurer of the committee and the name and address of any designated agent (e.g., assistant treasurer)

Full Name **Jerry Crippen** Mailing Address and ZIP Code **320 1st Street, Marysville CA 95901** Title or Position **Treasurer**

10. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, or has deposits on hand or maintains funds.

Name of Bank, Depository, etc. **Great Western Savings** Mailing Address and ZIP Code **800 Flumas St., Yuba City CA 95991**  
**Bank of America** **1100 Buttehouse Road, Yuba City CA 95991**

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Treasurer **Jerry Crippen** Date **2/18/86**  
 Type or Print Name of Treasurer **Jerry Crippen**

NOTE: Submission of false, erroneous, or misleading information may subject the person signifying this Statement to the penalties of 2 U.S.C. 1901.

For further information contact: Federal Election Commission, Tel: Free 800-426-6820, Local 202-633-6800

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FEC FORM 1-1 86

APR 1

1/1/86 to 3/17/86	7/1/85 to 12/31/85	5/19/85 to 6/30/85	3/19/85 to 5/18/85	1/1/85 to 3/17/85	10/21/84 to 12/31/84
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ITEMIZED CORPORATE & PAC  
CONTRIBUTIONS (APPROXIMATE)

\$ 7,250.00	\$25,625.00	\$ 2,650.00	\$12,949.00	\$11,400.00	\$17,725.00
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ITEMIZED INDIVIDUAL  
CONTRIBUTIONS (APPROXIMATE)

\$ -0-	\$25,373.00	\$ 600.00	\$ 3,450.00	\$ 3,100.00	\$ 4,688.00
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UNITEMIZED CONTRIBUTIONS  
(APPROXIMATE)

\$ N/A	\$16,000.00	\$ -0-	\$ 4,500.00	\$ -0-	\$ 1,500.00
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CASH ON HAND

\$ N/A	\$79,318.00	\$50,618.00	\$49,369.00	\$28,547.00	\$14,350.00
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8 7 0 4 0 5 5 2 0 6



Form 405  
1985

# AMENDMENT TO CAMPAIGN DISCLOSURE STATEMENT

For use by persons amending statements filed pursuant to Government Code Section 84200-84217. This form must be filed with all filing officers who received the statement being amended. NOTE: This form is not used to amend a Statement of Organization (Form 410).

(Type or Print in Ink)

RECEIVED  
AND FILED  
in the office of the Secretary of State  
of the State of California  
APR 04 1986  
MARCH FONG EU, Secretary of State

I. The information required in Section I must correspond to the information provided on the campaign statement.

A OFFICIAL USE ONLY

NAME OF FILER:

Friends of Wally Herger for Assembly

F.D. NO. (if applicable)

790456

ADDRESS OF FILER:

P.O. Box 123

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

Yuba City

CA

95992

916

741-0447

NAME OF TREASURER (if applicable):

Jerry Crippen

PERMANENT ADDRESS OF TREASURER (if applicable):

320 First Street

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

Marysville

CA

95901

916

742-8201

II. The following information amends campaign disclosure statement, Form No. 490, Executed on 1/29/86 for the period 7/1/85 to 12/31/85.

III. The amended information affects items on the:

☐ Front Page

☐ Summary

☒ Schedule(s) G

IV. Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement.

Add:

Computer Caging  
6060 Sunrise Vista Drive  
Citrus Heights, CA 95610

\$6,050

Purchased Postage Stamps  
from Wally Herger.

V. Reason for amendment:

Omitted the last entry on schedule G. The Summary figures remain the same.

Include additional information on reverse side or on appropriately labeled continuation sheets. (Number of pages attached)

C

## VERIFICATION

D

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

E

Executed on 3/5/86 at Marysville, Ca. by Jerry Crippen

F

A candidate or officeholder who controls a committee must also verify the campaign statement.

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer of this committee has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on \_\_\_\_\_ at \_\_\_\_\_ by Wally Herger

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.

8704053207

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS (IN SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE ALSO ENTERED NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
7-8	Bank Of America Bank Of America Card Center San Francisco CA	Refund on Credit Balance	377	
7-8	Hendrick Stationery P.O. Box 1841 Marysville CA 95901	Refund	905	
2-31	Interest to all Bank Accounts		1813	
	Computer Caging 6060 Sunrise Vista Drive Citrus Heights CA 95610	Purchased Postage stamps from Wally Herger	6050	
			(a)	(b)
		<b>SUBTOTAL</b>	<b>9145</b>	

☐ If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 9145	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		9145
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	43	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)		
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		43
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		\$ 9102

(May be negative figure)



Form 405  
1986

# AMENDMENT TO CAMPAIGN DISCLOSURE STATEMENT

For use by persons amending statements filed pursuant to Government Code Section 84200-84217. This form must be filed with all filing offices which received the statement being amended. NOTE: This form is not used to amend a Statement of Organization (Form 410).

(Type or Print in Ink) In the office of the Secretary of State of the State of California

APR 07 1986

RECEIVED  
AND FILED

Office of the Secretary of State  
of the State of California

MARCH FONG EU, Secretary of State

The information required in Section I must correspond to the information provided on the campaign statement.

A OFFICIAL USE ONLY

NAME OF FILER:

Friends of Wally Herger for Assembly

I.D. NO. (IF APPLICABLE)

790456

ADDRESS OF FILER:

P.O. Box 123

NO. AND STREET

CITY

STATE

ZIP CODE

Yuba City

CA

95991

AREA CODE

PHONE NUMBER

916

741-

NAME OF TREASURER (IF APPLICABLE):

Jerry Crippen

PERMANENT ADDRESS OF TREASURER (IF APPLICABLE):

370 First Street

NO. AND STREET

CITY

STATE

ZIP CODE

Marysville

CA

95901

AREA CODE

PHONE NUMBER

916

742-8201

- I. The following information amends campaign disclosure statement, Form No. 490, Executed on 1/26/86 for the period July 1, 1985 to December 31, 1985.

- II. The amended information affects items on the:

☐ Front Page

☐ Summary

☐ Schedule(s)

A

- V. Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement.

Added Occupations and employers to contributors.

- V. Reason for amendment:

Secretary of State Requested additional information.

Include additional information on reverse side or on appropriately labeled continuation sheets. (Number of pages attached     )

## VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

3-26-86  
(DATE)

at Marysville Calif.  
(CITY AND STATE)

by

Jerry B Crippen  
(SIGNATURE OF TREASURER)

A candidate or officeholder who controls a committee must also verify the campaign statement.

I have used all reasonable diligence, and to the best of my knowledge, the treasurer has used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on

      
(DATE)

at

      
(CITY AND STATE)

by

Wally Herger  
(SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

**SCHEDULE A**  
**MONEY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE) 290456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, LIST WHICH I.D. NUMBER OF TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
-28	Western Dairymen's PAC ID 771500 1210 3rd St., Atwater CA 95301			500	500
-20	Western Mobilehome Parks PAC ID 742422 1225 8th St., Ste. 550 Sacramento CA 95814			500	850
-16	John Abele Box 2 Arbutle CA 95912	Farmer	Abele Farms	50	100
0-30	ABT, Inc. P.O. Box 727 Maxwell CA 95955	Trucking	ABT, Inc.	243	993
2-20	Fred Montgomery 3108 Burdick Rd. Chico CA 95926	Farmer	Almont Orchards	200	500
-22	Mel Amarel P.O. Box 1323 Yuba City CA 95992	Grain Co.	Amarel Grain Co.	1000	1000
-18	Frank Amarel P.O. Box 67 Nevada City CA 95959	Retired		100	100
-30	H & A Andreotti Inc. Box 298 Colusa CA 95932	Trucking Co.	H & A Andreotti, Inc.	250	500
0-30	Asby, Guth & Doughty 1095 Stafford Way Yuba city CA 95991	Attorneys	Asby, Guth & Doughty	200	200
1-1	J. W. Bamford, Inc. P.O. Box 1 Challenge CA 95925	Self	J. W. Bamford, Inc.	200	200
-25	Vern Bartram 3105 Esplanada Chico CA 95926	Doctor	Vern Bartram, MD	100	200

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL**

**3343**

9704053210



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 NET TOTAL CONTRIBUTIONS  
 \$790450

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

9704053211

DATE RECD	FULL NAME AND ADDRESS OF CONTRIBUTOR  (Include P.O. Box and Address)	OCCUPATION	EMPLOYER  (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
1-18	Paul Bartschi P.O. Box 756 Gridley CA 95948	Doctor	Paul Bartschi MD	100	100
1-11	Col. Otto Behunnin 204 Sheldon Ave., Gridley CA 95948	Retired		100	100
2-20	Barbara Beutler 1155 Poase Rd. Yuba city CA 95991	Homemaker		100	100
2-28	Walter Bolles 149 Acacia Ave. Oroville CA 95966	Retired		100	100
5-28 0-25	Frank M. Booth 519 D. St. Marysville CA 95901	Merchancial Contractor	Frank M. Booth Inc.	250 250	500
1-20	Richard Boyer P.O. Box 667 Yuba City CA 95992	Doctor	Richard Boyer, MD	121	121
0-20	Dick Brandt 589 El Margarita Rd. Yuba City CA 95991	Rancher	Dick Brandt Ranch	100	100
-23	Don Bransford 830 Sioc St. Colusa CA 95932	Farming	Bransford Farms	100	100
0-28	Peter Brennan 414 B Center St. Yuba City CA 95991	Appraiser	Peter Brennan MAI	100	100
-30 1-18	Arthur Bristow 2339 Franklin Rd. Yuba City CA 95991	Retired		100 100	200
-5 1-8	Brock Smith 990 Gray Ave. Yuba City CA 95991	Owner	Brock's Ice Cream	100 120	220
SUBTOTAL				1741	

☒ If more space is needed, check box at left  
 and attach additional Schedules A

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 ID NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF VALLEY HERGER FOR ASSEMBLY

DATE	NAME AND ADDRESS OF CONTRIBUTOR (If contributor is a corporation, give name and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	CUMULATIVE TOTAL
-27	Lewis Brogan 11181 Midway Chico CA 95926	Veterinary	Lewis Brogan Vet.	100	100
2-28	L. M. Brown 413 Second St. Yuba City CA 95991	Self	Brown's Gas	100	100
-27 0-7	Robert Bryant 3492 Colusa Hwy Yuba City CA 95991	Farmer	Bryant Ranch	100 200	300
1-9	Newell Burtis P.O. Box 2 Sutter CA 95982	Retired		100	100
0-13	Buttes Pipe & Supply P.O. Box 1330 Yuba City CA 95992	Co.	Buttes Pipe & Supply	250	250
1-2	Marlene Bocker 100 Carriage Square Yuba City CA 95991	Owner	Career Colleges	100	100
0-5	W. A. Carleton 1004 Holden Ave. Chico CA 95926	Retired		100	100
2-15	Howard E. Carter Wild Plum Road P.O. Box 196 Sierra City CA 96125	Retired		50	100
1-11	Carter Land & Livestock 909 Oak St. Colusa CA 95932	Livestock	Carter Land & Livestock	200	200
0-22 0-30	R. B. Chambers 503 Pratter Rd. Gridley CA 95948	Farmer	Chambers Farms	447 500	947
1-19	Christopher Chandler 1510 Coats Drive Yuba city CA 95991	Attorney	Christopher Chandler Attorney	100	100

SUBTOTAL

2343

☒

If more space is needed, check box at left  
 and attach additional Schedules A

9704053212

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 TO 12-31-85  
 ID NUMBER (IF COMMITTEE) 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY BERGER FOR ASSEMBLY

DATE	FULL NAME AND ADDRESS OF CONTRIBUTOR (Include street and city)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-23	James G. Changaris 1535 Richland Rd. Yuba City CA 95991	Attorney	James G. Changaris	100	100
11-19	Conant Orchards 3688 Bear Rive Dr. Rio Oso CA 95674	Ranch	Conant Orchards	200	200
11-30	Melvin J. Corry 771 Buschmann Rd. Paradise CA 95969	Doctor	Melvin J. Corry, MD	100	100
9-18	Laurence W. Cox 1010 Webster Colusa CA 95932	Farmer		50	100
11-23	Angelo Danna P.O. Box 5428 San Jose CA 95150	Grower & Packer	Danna & Danna, Inc.	200	200
8-30	Lex Daoust P.O. Box 1071 Marysville CA 95901	New Car Dealer	Daoust Chev.	100	200
11-9	Charles B. Davidson P.O. Box 604 Penn Valley CA 95946	Requested		200	200
10-17 11-10	Thomas E. DeKellis 1000 Dolphin Ct. Yuba City CA 95991	Farmer		100 100	200
12-6	Anna Demmer 735 Vermont ST. Gridley CA 95948	Retired		100	200
11-18	Joe DeValentine 555 Swanson Rd. Rio Oso CA 95674	Farmer	DeValentine	43 250	293
9-18	K. E. Dickey 10594 Combie Rd. Auburn CA 95603	Gas Business	Combie Plaza	100	200
SUBTOTAL				1643	

☒ If more space is needed, check box at left and attach additional Schedules A

3704053213

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 ID NUMBER 790456

NAME OF CANDIDATE OR COMMITTEE

FRIENDS FO WALLY HERGER FOR ASSEMBLY

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If contributor is a corporation or partnership, give name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT RECEIVED	CUMULATIVE TO DATE
11-14	Gary N. Dibble P.O. Box 2361 Marysville CA 95901	Self	Gary N. Dibble, Inc.	100	100
1-20	Drake Homes P.O. Box 1448 Chico CA 95927	Self	Drake Homes	500	500
4-30	Harold S. Edwards 770 Ramirez Rd. Marysville CA 95901	Retired		125	125
11-6	Dorian Faber 571 Dale Ave., Yuba City CA 95991	Doctor	Dorian Faber, MD	50	100
11-10	Bob Porter 4425 W. Riego Rd Sacramento CA 95837	SELF	Farm-Air Flying Service INC.	200	200
11-4	First Interstate Bank General Account Div. LA 600 So. Spring St., LA CA 90054	Bank	First Interstate Bank	200	200
1-20	Brooks Fiske P.O. Box 243 Marysville CA 95901	Retired		50	100
0-25	Joseph Fitzhenry 10155 Stone Arch Dr. Grass Valley CA 95945	Retired		43	193
1-22	John Forsman 2700 Plumas-Arboga Rd. Marysville CA 95901	Farmer		100	100
1-3	Fox Electric 1995 Olive Hwy Oroville CA 95965	Electric Co.	Fox Co.	100	100
1-19	Richard French 1984 Riosa Rd. Lincoln Ca 95648	Farmer Supply Dealer		100	100
<b>SUBTOTAL</b>				<b>1568</b>	

☒ If more space is needed, check box at left and attach additional Schedules A

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 7-1-85 12-31-85  
 ID. NUMBER (if committee)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS FO WALLY HERGER FOR ASSEMBLY

DATE MM DD	FULL NAME AND ADDRESS OF CONTRIBUTOR (If contributor is a corporation, give the name of the corporation and its principal office address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CURRENTLY PAID
10-7	Gerald A. Frye 4291 Colusa Hwy Yuba City CA 95991	Farmer	Frye & Lonon	100	100
11-30	Pich Weisshart P.O. Box 1103 Whetstone CA 95992		Bear River Farming Coop.	100	100
11-7	James Gilpatric 617 Darrough Dr Yuba City CA 95991	Oil Dealer	Gilpatric Oil	42	292
1-25	Ted Gingrich 976 Franklin Rd. Yuba City CA 95991	Doctor	Ted Ginrich, MD	100	100
11-10	Ronald Giovannetti 733 E. Hillcrest Ave. Yuba City CA 95991	Farmer	B.E. Giovannetti & Sons	200	200
11-20	Ronald Glassgow P.O. Box 16 Princeton CA 95970	Trucker	Glassgow	200	200
11-11	Lee Gomer P.O. Box 72 Yuba City CA 95991	Title Co.	First American Title 565 2nd Street Yuba City CA 95991	100	100
11-11	Frances Gomez Box 366 Fall River Mills CA 96028	Requested		100	100
11-2	Golden State Tractor Co P.O. Box 650 Woodland CA 95695	John Deere Dealership	Golden State Tractor Co.	243	243
11-3	Robert Graf 1601 Mitchell Ave. Oroville CA 95965	Food Processor		200	200
10-10	E. Joe Graham 909 Plumas St Yuba city CA 95991	DDS	E. Joe Grahma DDS	200	200

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

SUBTOTAL

1585

8704053215



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 ID NUMBER (if committed)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (Include zip code and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2-20	W. A. Graham Star Rte, 580 Brownsville CA 95919	Logger		200	200
2-12	Dale Green 1548 Market St. Yuba City CA 95991	Contractor	Dale Green Contracting	100	200
1-22	W. C. Grimes 214 Upper Circle Dr Grass Valley CA 95945	Retired		43	143
1-23	H. A. Grinnell 1311 Downing Ave. Chico CA 95926	Self	H. A. Grinnell & Sons Inc.	100	100
1-9	Roy Grossman 376 Vallombrosa Ave. Chico CA 95926	Self	Chico Immediate Care Medical Center	200	200
0-5	James Hamilton 193 Del Norte Ave. Yuba City CA 95991	Doctor	James Hamilton MD, Inc.	100	200
1-13	Michael Hanns 7474 Doc Adams Rd Marysville CA 95901	Salesman	Superior Beverage Co 625 Bridge Street Yuba city CA 95991	100	100
1-10	Karsten Hansen P.O. Box 2 Grass Valley CA 95945	Trucking	Hansen Trucking	43	143
0-3	James L. Harrison P.O. Box 3307 Yuba City CA 95991	Self	James L. Harrison Inc.	200	200
0-3 0-20	Coburn Haskell P.O. Box 1716 Yuba City CA 95992	Investments	Haskell Investments	100 50	175
1-19	Dorothy H. Hassman 10010 Grinding Rock Rd. Grass Valley CA	Housewife		100	100
<b>SUBTOTAL</b>				<b>1336</b>	

☒ If more space is needed, check box at left and attach additional Schedules A

8704053216



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 7-1-85 **THROUGH** 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (if committee)**

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, also attach I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
-18	Ernest Hatch 348 River View DR. Oroville CA 95965	Rice Grower	Butte Creek C.C.	243	343
1-11	Hi & Dry Warehouse P.O. Box 378 Sutter CA 95982	Dryer	Hi & Dry Warehouse Inc.	200	200
-30	James W. Higgins 12225 Lakeshore Dr. So. Auburn CA 95603	Requested		100	200
1-19	Howell & Howell	Atty's	Howell & Howell	100	100
0-25	Fred T. Huntington P.O. Box 991 Oroville CA 95965	Retired		25	125
-18	Carolyn Illerich Star Rte. Knights Landing CA 95645	Farmer	Illerich Farms	50	100
0-28	Ingram Realtors 352 Vallombrosa Chico CA 95926	Realtor	Ingram Realtors, Inc.	100	100
1-15	Leonard Bard 1618 Mangrove Ave. Chico CA 95926	Self	Inlane Valley Insurance Service	100	100
1-9 1-28	Jopson RANCh 1255 Pleasant Grove Wheatland CA 95692	Farmer	Jopson Ranch	500 129	1000
-25	W. E. Jopson 705 Harris St. Marysville CA 95901	Farm	Jopson	500	500
-5	M. J. Justeson 469 Block Rd Gridley CA 95948	Farmer	Justeson RANCh	600 400	1000

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

**3047**

8734053217

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF Wally Herger for Assembly

DATE RECD	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, full name, I.D. number as taxpayer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-2	Raply Keeley 1040 9th St Colusa CA 95932	Farmer	Keeley Ranch	250	250
12-31	Keeley Ranch P.O. Box 1318 Colusa CA 95932	Farm	Keeley Ranch	100	100
7-31	King Chevrolet 1501 Mangrove Chico CA 95927	Car Dealer	King Chevrolet Inc.	100	100
1-18	Wade Kitchens 469 Littlejohn Yuba City CA 95991	Insurance	Stanfield & Assoc. 1229 D Street Marsyville CA 95901	200	200
0-30	James Leathers 922 Elm St Woodland CA 95695	Farmer		100	200
1-18	Eugene H. Lonon 910 Ohleyer Rd yuba city CA 95991	Farmer	Frye & Lonon	500	500
1-19	Homer Lundberg P.O. Box 216 Richvale CA 95974	Rancher	Vandy Farms	400	400
1-19	Douglas McGeoghegan P.O. Box 729 Maxwell CA 95955	Farming		100	100
1-18 1-9	Jack Macko 150 Butte Ave. Yuba City CA 95991	Self	Macko Oil Co.	100 243	343
1-14	Danny Marona P.O. Box 1053 Yub City CA 95991	Entertainer		100	100
-8	Bob Martin 91 Canyon Drive Oroville CA 95965	Self	Butte Land Devel. Corp.	100	00

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**      2293

3704053218

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 7-1-85 **THROUGH** 12-31-85

**ID NUMBER (if committee)**  
790456

**NAME OF CANDIDATE OR COMMITTEE**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, also enter ID number on contributor's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-16	Matthews, Crippen, Tenney & Co. P.O. Box 1672 Marysville CA 95901	CPA's	Matthews, Crippen, Tenney & Co.	129	129
10-31	George Meyers 860 Onstott Rd. Yuba City CA 95991	Farming	Brady Ranch	265	765
11-10	Glenn E. Miller P.O. Box 47 Princeton CA 95970	Farming		200	200
12-20 7-27	Henry Miller 8349 Oroville Hwy Marysville CA 95901	Tractor Business		100 100	200
10-21	Royal Miller Jr. 638 1/2 W. 8th Chico CA 95926	Self	Miller Oldsmobile (Auto Dealer)	100	100
9-18	T.A. Miller 977 Hillcrest Ave. Yuba City CA 95991	Retured		100	100
11-30	Neill Mitchell 1900 Teather River Blvd. Marysville CA 95901	Farming	Mithcell Ranch	243	243
10-10	Moffitt Farms 2532 Larkin Rd Biggs CA 95917	Farm	Moffitt	100	100
10-20	Warren Moffitt 2532 Larkin Rd. Biggs CA 95917	Farmer	Moffitt Farms	100	100
10-25	John Monnot 191 Bunce Rd Yuba City CA 95991	Rancher	Monnot	100	100
11-9	A. G. Montna 678 Stewart Rd Yuba City CA 95991	Rice Farmer	Montna Farm	200	200

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

1737

8704053219

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If Committee, List Officer's Name and Address)</small>	OCCUPATION	EMPLOYER <small>(If Self Employed, Enter Name of Business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
-8	Frank Morgan 1901 Dayton Rd Chico CA 95926	Retired		100	100
0-25 0-22	Mitchell Morgan 1049 Cam Bridge Ct. Yuba City CA 95991	Moving Business		600 400	1000
-8	C. Warren Morris P.O. Box 97 Grimes CA 95950	Farming		100	100
1-30	Gayle Morrison P.O. Box 29 Yuba City CA 95991	Moulding Mfg.	Morrison's	200	300
-22	James Moulder 965 Malick Ave. Yuba City CA 95991	Real Estate	Moulder Realtor	125	125
1-12	Geo. Murray P.O. Box 988 Yuba City CA 95991	Real Estate	Geo. Murray Corp.	243	243
0-20	Eugene Muttersback 613 Market St. Colusa CA 95932	Atty.	Muttersback	100	200
1-20	Nelson Farms, Inc. 3126 Betz Road Wheatland CA 95692	Farming	Nelson Farms Inc.	200	200
-20	Daniel Newton 100 Nihell St. Nevada City CA 95959	Retired		100	100
0-8	Karl Nichols P.O. Box 25 Wheatland CA 95692	Self	Nichols Point Mobile Home Park	100	100
0-5	Norene Ranches 3629 Bear River Dr. Wheatland CA 95692	Franch	Norene Ranches	500	500

**SUBTOTAL** 2768

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

8704053220

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 TO 12-31-85  
 OF 1985  
 OF 1985

NAME OF CANDIDATE OR COMMITTEE

WALLY HERGER FOR ASSEMBLY

790450

870405321

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (If contributor is a corporation, give the name of the corporation and the name and address of the person who made the contribution)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CONTRIBUTING TO DATE
7-8	Charlie Northrop 2891 Butte House Rd Yuba City CA 95991	Self	Stock & Bond Broker	100	100
7-12	David A. Offutt 1489 Country Club Ave. Marysville CA 95901	Atty.	David A. Offutt, Atty.	100	100
7-9	Nas Oji 8547 Sawtelle Ave. Yuba City CA 95991	Farmer	Oji Farms	1000	1000
11-10	Onstott Dusters P.O. Box 709 Yuba City CA 95991	Crop Dusters	Onstott Dusters	100	100
7-26	L. A. Otterson P.O. Box 731 Colusa CA 95932	Farmer	L.A. Otterson	100	200
10-10	David W. Galitz P.O. Box 37 Scotia CA 95565	Lumber Business	Pacific Lumber Co.	100	100
10-19	Dean Palmer 1357 Franklin Rd Yuba City CA 95991	Mortgage Broker	Mason-MuDuffie	100	100
11-20	Glenn Parker 16578 McCourtney Rd Grass Valley CA	Retired		43	143
10-25	H. Earl Parker 209 E. 25th St. Marysville CA 95901	Retired		200	250
9-30	H. Earl Parker, Jr. P.O. Box 2441 Marysville CA 95901	Atty.	H. Earl Parker Atty.	200	200
11-1	Robert M. Peppercorn 367 Del Norte Ave., Ste. 4 Yuba City CA 95991	Doctor	Robert M. Peppercorn M.D. INC.	200	200
SUBTOTAL				2243	

☒ If more space is needed, check box at left and attach additional Schedules A



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**NAME OF CANDIDATE OR COMMITTEE**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**STATEMENT COVERED PERIOD**  
 FROM 7-1-85 TO 12-31-85  
 (If different, give dates)

**790450**

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (If contributor, add street, P.O. number, city and state)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	ESTIMATED TO DATE
0-22	Paul Peterson 1075 Woodland Ave. Chico CA 95926	Self	Peterson's Painting Service	25	125
11-19	Steven Rabedew P.O. Box 771 Colusa CA 95932	CPA	Steven Rabedew, CPA	200	200
7-10	John F. Rankin 819 Zion St. Nevada City CA 95959	Self	Rankins Trailer Park	100	100
11-13	Lonny L. Renfrow 1190 Civic Center Blvd Yuba City CA 95991	CPA	Chipman & Refrow	200	200
11-19	Donald Richey 564 Rio Linda Ave. Chico CA 95926	Doctor	Donald Richey MD	200	200
9-7	Henry Richter, Jr. Star Rte. Knights Landing CA 95645	Farmer	Richter Ranch	500	500
11-30	Dell Riebe 129 Idaho-Maryland Rd. Grass Valley CA	Auto. Supplies	Riebe's Supplies	250	500
8-1 11-30	G.W. Rienks, Jr. P.O. Box 988 Marysville CA 95901	Retired		100 50	150
11-18	Dr. Perry Riley 17850 LaSSO Loop Penn Valley CA 95946	Self	Nutrition Inc.	100	200
10-18	Rio Bonito Ranch, 1288 Larkin Rd Biggs CA 95917	Ranch	Rio Bonito Ranch Inc.	100	100
11-19	Edwina Robbins 926 Taber Ave. Yuba City CA 95991	Retired		100	100

☒ If more space is needed, check box at left and attach additional Schedules A

**SUBTOTAL**

**1925**

8704053222



**SCHEDULE A**  
**MONEY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD FROM 7-1-85 TO 12-31-85  
 790150

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (If committee, give name of person or organization to which contributed)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-13	Robinson Const. Co. P.O. Box 1620 Oroville CA 95965	Const. Co.	Robinson Const. Co.	443	1443
11-19	Guy Robinson Grass Valley CA 95945	Self	Guy Robinson & Sons	200	200
11-10	Jerome A. Robson 1026 Buchanan Rd. Yuba City CA 95991	Doctor	Jerome A. Robson, MD Inc.	200	200
10-30	Michael E. Rue 2700 Plumas-Arboga Rd Marysville CA 95901	Farming	2640 Hoffman Rd Wheatland	200	200
7-31	Pauline Russell P.O. Box 483 Chico CA 95927	Retired		100	100
9-3	Alfred Sadler 651 Cassidy Yuba City CA 95991	Self	Sadler Cleaner	300	500
12-23	Dale Sakuth 3541 Nuestro Rd Yuba City CA 95991	Rancher	Dale Sakuth	100	100
9-18	Donald Sargent 8804 Loma Rica Rd Marysville CA 95901	Retired		100	100
9-27	Kenneth Sargent 470 South Auburn St. Ste. B Grass Valley CA 95945	Doctor	Kenneth Sargent, MD Inc.	100	100
9-10 11-15	Victor Savage 664 Shasta St. Yuba City CA 95991	Dentist	Victor Savage, DDS	43 400	543
10-28	Schrader & Murphy 2250 Fifth Ave. Oroville CA 95965	Insurance	Schrader & Murphy Insurance, Corp.	100	100

☒ If more space is needed, check box at left and attach additional Schedules A

SUBTOTAL

2286

8704053223

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

NAME OF CANDIDATE OR COMMITTEE

STATEMENT COVERS PERIOD  
 FROM 7-1-85 TO 12-31-85  
 790450

NAME OF CONTRIBUTOR

DATE RECEIVED	NAME OF CONTRIBUTOR	OCCUPATION	AMOUNT RECEIVED	AMOUNT PAID
-30	Remo Scosci 1929 Trident Ct. Yuba City CA 95991	Owner	Yuba-Sutter Disposal 400	400
-20	Beverly Seghezzi 12694 Mayflower DR. Nevada City CA 95959	Self	Amos' Bottle Shop Inc. 100	100
-3-	F. W. Sellman P.O. Box 1299 Paradise CA 95969	Requested	50	150
0-8	Burrell Shirey 101 JoANN Way Grass Valley CA	Retired	25 50	175
1-20	Steves Carnes P.O. Box 126 Maryville CA 95901	Owner	Sierra View Mausoleum 22	2727
1-20	Signal Home Loans P.O. Box 2115 Oroville CA 95965	Loan Co.	Signal Home Loans Inc 100	100
1-19	Clifton Simmons 581 Ridge Way Yuba City CA 95991	Retired	200	200
11-17	Cary Simonds 812 4th Street Marysville CA 95901	Dentist	Cary Simons, DDS, Inc. 400	400
12-12	Bill Smith 3711 Jay St. Sacramento CA 95916	Photography	Bill Smith Photography 413	413
7-9 11-2	Marvin Snow 185 Valley Ridge Rd. Paradise CA 95969	Retired	50 300	410
11-18	Soper-Wheeler Co. Strawberry Valley CA 95981	Logging	Soper-Wheeler Co. 200	200

☒ If more space is needed, check box at left and attach additional Schedules A

**SUBTOTAL 2310**

3704056224

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD:  
 FROM 7-1-85 TO 12-31-85  
 OF NUMBER (in thousands)

220456

NAME OF CANDIDATE OR COMMITTEE

PHILIPPS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, give street &amp; P.O. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
0-30	Clayton L. Spangler 6946 Garden Hwy. Nicolaus CA	Farmer	Spangler Bros.	200	200
1-30	Chester Spooner P.O. Box 5 Williams CA 95987	Farmer	Spooner Ranch	100	100
0-26	Williams L. Sprangler 6932 Gardens Hwy Nicolaus CA 95659	Farmer	Spangler Bros.	200	200
11-18	Robert Sproat 405 Center St., Ste. 103 Yuba City CA 95991	Dentist	Robert Sproat, DDS	100	100
1-30	Stevens, French & Wood P.O. Box S Truckee CA 95734	Attys	Stevens, French & Wood	100	100
11-30	Don Strachan 2522 Tierra Buena Rd. yuba City CA 95991	Bee Keeper	Strachan Apiaries	200	200
0-8	William Stuke 1463 Hwy 99 Gridley CA 95948	Nursery	Stuke Nursery Co.	100	100
7-27	Jack Sullivan P.O. Box 671 Yuba City CA 95991	Farmer	Sullivan Ranch	100	100
12-2	Sweco Products, Inc. P.O. Box 259 Sutter CA 95982	Hydraulic	Sweco Products, Inc.	100	100
11-19	Louis Tarke 11481 S. Butte Rd Sutter CA 95982	Farmer	Tarke Bros.	586	586
11-19	Richard Tarke 11481 So. Butte Rd. Sutter CA 95982	Farmer	Tarke Bros.	500	500
SUBTOTAL				2286	

☒ If more space is needed, check box at left  
 and attach additional Schedules A

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 IN NUMBER OF CONTRIBUTIONS

290456

FRIENDS OF WALLY BERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, give street ID number or registered name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT RECEIVED	CUMULATIVE TO DATE
0-20	Taylor, Hinsdale & Williamson 1289 Lincoln Rd. Yuba City CA 95991	Atty's	Taylor, Hinsdale, & Williamson, INC.	300	300
1-11	Louis W. Tescher Gridley CA 95948	Building Contr.	Tescher Contract	100	100
1-19	Bhagat Singh Thiara P.O. Box 188 Live Oak CA 95953	Farmer	Thiara Ranch	100	100
2-11	Albert Troost 117 Scott Way Grass Valley CA	Retired		50	200
2-18				50	
5-5	Ken Tucher P.O. Box 127 Gridley CA 95948	Car Dealer	Tucker Chevrolet Buick	100	100
9-18	Dorothea Van Eckhardt 1644 Jeffrey DR. Yuba City CA 95991	Interior Designer		100	100
9-10	Peter Wagenhals Star Rte. Box 325 Brownsville CA 95919	Retired		50 200	300
11-2	Maudie Walker 10426 Partridge Rd. Grass Valley CA 95945	Retired		100	100
9-20	Eleanor Welch 544 10th Street. Colusa CA 95932	Retired		200	300
9-18	George West 682 Long Bar Rd. Oroville CA 95965	Retired		50	100
11-19	David Wheeler 515 Windsor Dr. Yuba City CA 95991	Car Dealer	Wheeler Olds, Cad.	100	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A

SUBTOTAL

1500

(Amounts May Be Rounded To Whole Dollars)

## FRIENDS OF WALLY HERGER FOR ASSEMBLY

790456

1543





**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

Form 470  
1985

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

**RECEIVED  
AND FILED**  
In the office of the Secretary of State  
of the State of California  
**FEB 03 1986**

MARCH 10, 1986, Secretary of State

Statement covers period from 7-1-85 through 12-31-85

DATE OF ELECTION (MO., DAY, YR.) (if applicable)

TOTAL PAGES:

40

P.M. 1-31-86

**I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <b>Wally Herger</b>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <b>Assembly - Third District</b>		
RESIDENTIAL ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
1120 Fourth Avenue		Rio Oso	CA	95674	916	633-4543
BUSINESS ADDRESS	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
State Capitol		Sacramento	CA	95814	916	445-7298

**II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <b>Friends of Wally Herger for Assembly</b>						I.D. NUMBER <b>790456</b>
ADDRESS OF COMMITTEE	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
P.O. Box 123		Yuba City	CA	95991		

NAME OF TREASURER: <b>Jerry Crippen</b>						
PERMANENT ADDRESS OF TREASURER	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
320 First Street		Marysville	CA	95901	916	742-8201

NAME OF COMMITTEE:						I.D. NUMBER
ADDRESS OF COMMITTEE	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER

NAME OF TREASURER:						
PERMANENT ADDRESS OF TREASURER	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

**III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

COMMITTEE NAME AND OFFICEHOLDER	COMMITTEE ADDRESS	TREASURER	Controlled Committee**	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

\* (A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled candidate in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has a significant influence on the actions or decisions of the committee.)

**VERIFICATION**

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 1/29/86 at Marysville, Ca by Jerry B. Crippen  
(Signature of Treasurer) (Date and State) (Signature of Treasurer)

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that the treasurer of this committee has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 1-31-86 at Yuba City, Ca by Wally Herger  
(Signature of Candidate or Officeholder) (Date and State) (Signature of Candidate or Officeholder)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X



**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)**

DATE	HID EXP.	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
12-31-85					0	0

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

8704053229

# CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)

790456

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions . . . . .	\$ 38,389	\$ 76,640 <small>SCHEDULE A, LINE 3</small>	\$ 115,029
2. Loans . . . . .	0	0 <small>SCHEDULE B, LINE 6</small>	0
3. Subtotal . . . . .	\$ 38,389 <small>LINES 1 + 2</small>	\$ 76,640 <small>LINES 1 + 2</small>	\$ 115,029 <small>LINES 1 + 2</small>
4. Non-monetary contributions . . . . .	105	630 <small>SCHEDULE C, LINE 3</small>	735
5. Pledges . . . . .	0	0 <small>SCHEDULE D, LINE 7</small>	0
6. TOTAL CONTRIBUTIONS . . . . .	\$ 38,494 <small>LINES 3 + 4 + 5</small>	\$ 77,270 <small>LINES 3 + 4 + 5</small>	\$ 115,764 <small>LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)</small>
<b>EXPENDITURES MADE</b>			
7. Payments . . . . .	\$ 16,743	\$ 57,042 <small>SCHEDULE E, LINE 4</small>	\$ 73,785
8. Accrued expenses (unpaid bills) . . . . .	0	0 <small>SCHEDULE F, LINE 3</small>	0
9. TOTAL EXPENDITURES . . . . .	\$ 16,743 <small>LINES 7 + 8</small>	\$ 57,042 <small>LINES 7 + 8</small>	\$ 73,785 <small>LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)</small>

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) . . . . .	\$ 50,618
11. Cash receipts this period (Line 3, Column B above) . . . . .	76,640
12. Miscellaneous adjustments to cash (Schedule G, Line 7) . . . . .	9,102
13. Cash payments this period (Line 7, Column B above) . . . . .	57,042
14. Cash on hand at closing date (Lines 10+11+12-13 above) * . . . . .	79,318
15. Outstanding debts (Line 2 + Line 8 of Column C above) . . . . .	0
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) . . . . .	\$ 79,318
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) . . . . .	\$ ( )

\* Ending cash on hand should not be a negative amount.

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:

20. EXPENDITURES MADE:

1/1 thru 6/30	7/1 to date

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

				STATEMENT COVERS PERIOD	
				FROM	THROUGH
				7-1-85	12-31-85
NAME OF CANDIDATE OR COMMITTEE				I.D. NUMBER (IF COMMITTEE)	
FRIENDS OF WALLY HERGER FOR ASSEMBLY				790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, give full name and address of treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9/16	Ag. Council of Calif. ID 791092 P.O. Box 831 Sacramento CA 95804			400	750
9/10	Alliance of Motion Picture & TV Producers 14144 Venture Blvd. Sherman Oaks CA 91423			250	250
9/1	Bank Of America Dept. 3117 San Francisco CA 94137			300	300
7/23 12/31	Beer Wholesalers Comm Affairs ID 761487 1127 11th Stree, #806 Sacramento CA 95814			1000 500	1500
5/23	J. G. Boswell Co. 4600 Security Pacific Plaza 333 So. Hope St. Los Angeles CA 90071			500	500
9/16	CAHFPAC ID 741816 1401 21st Street Sacramento CA 95814			500	850
12/2	CAL PAC ID 821455 220 East 23rd Street NY, NY 10010			200	200
<b>SUBTOTAL</b>				3650	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$ 60097	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) .....	16543	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....		\$ 76640

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
 FROM 7-1-85 THROUGH 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (IF COMMITTEE)**  
 790456

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-30	CATS - State Pac ID 791058			200	200
9-16	Calif. Auto. Vendors Council ID 760934 11300 Sorrento Valley Rd, Ste. 235 San Diego CA 92121			250	600
9-1	Calif. Cable TV Assoc. ID 745932 3636 Castro Valley Blvd. Ste. 10 Sastro Valley CA 94546			250	600
10-29	Calif. Chiropractic PAC ID 742986 1225 8th St. Ste. 550 Sacramento CA 95814			200	550
10-8	Calif. Cotton Ginners 1850 N. Gateway Blvd. Ste. 144 Fresno Airport Ctr. Fresno CA 93727			500	500
11-10	Calif. Dental PAC ID 742855 1225 8th Stre. #550 Sacramento CA 95814			300	1100
11-1	Calif. Farn Bureau Fed. ID 760960 1601 Exposition Blvd. Sacramento CA 95815			200	550
9-2	Calif. Fertilizer Assoc. PAC ID 850321 701 12th Street, Ste. 110 Sacramento CA 95814			500	850
10-10	Calif. Life Underwriters PAC ID 743365 P.O. Box 4153 Oakland CA 94614			500	750
7-22	Calif. Medical PAC ID 742617 44 Gough St. San Francisco CA 94103			500	850
8-29	Calif. Radiological PAC ID 811596 1030 15th Street, Ste. 250 Sacramento CA 95814			500	850
<b>SUBTOTAL</b>				3900	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (If contributor is not listed, enter I.D. number on Treasurer's name and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-11	Candy PAC ID 810590 210 El Camino REal. So. San Francisco CA 94080			250	250
8-28	Cargo PAC ID 760458 1240 Bayshore Hwy Burlingame CA 94010			500	500
8-20	Chevron Cor. 225 Bush Street, Room 1706 San Francisco CA 94104			500	500
9-30	Computers Sciences Corp. 2000 Evergreen St. Sacto. CA 95815			500	1000
11-1	CREPAC ID 742276 525 So. Virgil Ave. Los Angeles CA 90020			200	200
9-16	Dow Chemical Western Div. 925 L St. Sacto CA 95814			500	850
8-20	Endless Vacation Systems Inc. P.O. Box 80073 Indianapolis, IND. 46280-0073			500	500
9-16	General Telephone of Calif. Employees ID 790703 P.O. Box 862 Santa Monica CA 90406			500	500
3-23	Farmers Group Inc. 4680 Wilshire Blvd. LA CA 90014			300	300
9-16	Federated Fire Fighters of CA. ID 744058 300 T Street Sacto. CA 95814			250	500
7-20	Firemen's Legislative Action Group ID 746229 2701 K St, Ste 1 Sacto CA 95816			500	500
<b>SUBTOTAL</b>				<b>4500</b>	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)

790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (If committee, enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-16	FIRES ID 790318 8588 Ridgecrest Drive Paradise CA 95969			250	250
9-1 12-30	Greater Anesthesia Service PAC ID 760981 100 So. Ellsworth #806 San Mateo CA 94401			500 500	1350
8-2	Hollywood Turf Club P.O. Box 369 Inlewood CA 90306			500	500
7-2	Horsemen's Benevolent & Protective Assoc. 500 N1st Ave. Ste. 5 Arcadia CA 91006			500	750
9-3	Hosehold Finance 10720 Atrium San Diego CA 92131			150	500
8-15	E. F. Hutton One Battery Park Plaza N.Y., NY 10004			300	300
10-20	IMPAC ID 743103 465 Calif. St., Rm. 600 San Francisco CA 94104			500	500
8-16	Independent Oil Producers Agency ID 790456 900 E. Wardlow Rd., Ste. D Long BEach CA 90807			500	500
11-15	Insurers PAC ID 830078 P.O. Box 54600 LA, CA 90054			500	1000
11-10	Irvine Company 550 Newport Circle Dr. Newport Beach CA 92660			500	500
9-16	N.R.A. Political Victory Fund 1600 Rhode Island Ave., N.W. Washington, D.C. 20036			500	500
SUBTOTAL				5200	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee)  
 790456

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-23	Pacific Gas & Electric Co. Employees Good Govt. Fund 77 Beale ST. San Francisco CA 94106			500	500
9-16	Pacific Lighting Corp. 810 S. Flower ST. LA, CA 90017			250	250
9-5	Peach PAC ID 744129 P.O. Box 7001 3704 Mt. Diablo Blvd. #215 Lafayette CA 94549			200	550
10-3	Pearle Vision Ctr., Inc 2534 Royal Ln Dallas, Texas 75229			1000	1000
7-30	Public Securities Assn. PAC ID 810633 P.O. Box 2531 San Francisco CA 94126			500	500
9-22	Seafund Trust Account ID 743464 2222 East 38th Street. Vernon CA 90058			500	500
9-5	Security Pacific Corp. P.O. Box 60468 Mail Code H54-7 LA, CA 90060			500	500
12-2-	Shell Oil Good Govt. Fund P.O. Box 2463 Houston TX 77001			250	600
8-1 9-16	Sony Corp. of America 9 West 57th St. N.Y., NY 10019			350 500	
8-25	Southern Milk Producers ID 782156 P.O. Box 1296 Chino CA 91710			300	300
7-30	WesproPAC P.O. Box 60694 Sacto., CA 95860			500	500
SUBTOTAL				5350	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

7-1-85 12-31-85

I.D. NUMBER (IF COMMITTEE)

790456

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER ON TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-28	Western Dairymen's PAC ID 771500 1210 3rd St., Atwater CA 95301			500	500
8-20	Western Mobilehome Parks PAC ID 742422 1225 8th St., Ste. 550 Sacto. CA 95814			500	850
9-16	John Abele Box 2 Arbuckle CA 95912	Farmer	Abele Farms	50	100
10-30	ABT, Inc. P.O. Box 727 Maxwell CA 95955	Trucking	ABT, Inc.	243	993
12-20	Fred Montgomery 3108 Buedick Rd. Chico CA 95926	Farmer	Almont Orchards	200	500
9-22	Mel Amarel P.O. Box 1323 Yuba City CA 95992	Grain Co.	Amarel Grain Co.	1000	1000
9-18	Frank Amarel P.O. Box 67 Nevada City CA 95959			100	100
8-30	H & A Andreotti Inc. Box 298 Colusa CA 95932	Trucking Co.	H & A Andreotti, Inc.	250	500
10-30	Asby, Guth & Doughty 1095 Stafford Way Yuba city CA 95991	Attorneys	Asby, Guth & Doughty	200	200
11-1	J. W. Bamford, INC. P.O. Box 1 Challenge CA 95925	Self	J. W. Bamford, Inc.	200	200
8-25	Vern Bartram 3105 Esplanada Chico CA 95926	Doctor	Vern Bartram, MD	100	200
SUBTOTAL				3343	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, enter I.D. number on treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-18	Paul Bartschi P.O. Box 756 Gridley CA 95948	Doctor	Paul Bartschi MD	100	100
11-11	Col. Otto Behunnin 204 Sheldon Ave., Gridley CA 95948	Retired		100	100
12-20	Barbara Beutler 1155 Pease Rd. Yuba city CA 95991	Homemaker		100	100
12-28	Walter Bolles 149 Acacia Ave. Oroville CA 95966			100	100
10-28 10-25	Frank M. Booth 519 D. St. Marysville CA 95901	Merchancial Contractor	Frank M. Booth Inc.	250 250	500
11-20	Ricahrd Boyer P.O. Box 667 Yuba City CA 95992	Doctor	Richard Boyer, MD	121	121
10-20	Dick Brandt 589 El Margarita Rd. Yuba City CA 95991	Rancher	Dick Brandt Ranch	100	100
9-23	Don Bransford 830 Sioc St. Colusa CA 95932	Farming	Bransford Farms	100	100
10-28	Peter Brennan 414 B Center St. Yuba City CA 95991			100	100
9-30 11-18	Arthur Bristow 2339 Franklin Rd. Yuba City CA 95991	Retired		100 100	200
7-5 11-8	Brock Smith 990 Gray Ave. Yuba City CA 95991	Owner	Brock's Ice Cream	100 120	220

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SUBTOTAL 1741

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-27	Lewis Brogan 11181 Midway Chico CA 95926	Veterinary	Lewis Brogan Vet.	100	100
12-28	L. M. Brown 413 Second St. Yuba City CA 95991	Self	Brown's Gas	100	100
7-27 10-7	Robert Bryant 3492 Colusa Hwy Yuba City CA 95991	Farmer	Bryant Ranch	100 200	300
11-9	Newell Burtis P.O. Box 2 Sutter CA 95982	Retired		100	100
10-13	Buttes Pipe & Supply P.O. Box 1330 Yuba City CA 95992	Co.	Buttes Pipe & Supply	250	250
11-2	Marlene Bocker 100 Carriage Square Yuba City CA 95991	Owner	Career Colleges	100	100
10-5	W. A. Carleton 1004 Holden Ave. Chico CA 95926			100	100
12-15	Howard E. Carter Wild Plum Road P.O. Box 196 Sierra City CA 96125	Retired		50	100
11-11	Carter Land & Livestock 909 Oak St. Colusa CA 95932	Livestock	Carter Land & Livestock	200	200
10-22 10-30	R. B. Chambers 503 Pratter Rd. Gridley CA 95948	Farmer	Chambers Farms	443 500	943
11-19	Christopher Chandler 1510 Coats Drive Yuba city ca 95991	Attorney	Christopher Chandler Attorney	100	100
SUBTOTAL				2343	

☒ If more space is needed, check box at left  
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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, attach I.D. number on treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-23	James G. Changaris 1535 Richland Rd. Yuba City CA 95991	Attorney	James G. Changaris	100	100
11-19	Conant Orchards 3688 Bear Rive Dr. Rio Oso CA 59674	Ranch	Conant Orchards	200	200
11-30	Melvin J. Corry 771 Buschmann Rd. Paradise CA 95969	Doctor	Melvin J. Corry, MD	100	100
9-18	Laurence W. Cox 1010 Webster Colusa CA 95932	Farmer		50	100
11-23	Angelo Danna P.O. Box 5428 San Jose CA 95150	Grower & Packer	Danna & Danna, Inc.	200	200
8-30	Lex Daoust P.O. Box 1071 Marysville CA 95901	New Car Dealer	Daoust Chev.	100	200
11-9	Charles B. Davidson P.O. Box 604 Penn Valley CA 95946			200	200
10-17	Thomas E. DeKellis 1000 Dolphin Ct. Yuba City CA 95991	Farmer		100	200
11-19				100	
12-8	Anna Demmer 735 Vermont ST. Gridley CA 95948	Retired		100	200
11-18	Joe DeValentine 555 Swanson Rd. Rio Oso CA 95674	Farmer	DeValentine	43 250	293
9-18	K. E. Dickey 10594 Combie Rd. Auburn CA 95603	Gas Business	Combie Plaza	100	200
SUBTOTAL				1643	

☒ If more space is needed, check box at left  
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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS FO WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-14	Gary N. Dibble P.O. Box 2361 Marysville CA 95901	Self	Gary N. Dibble, Inc.	100	100
9-20	Drake Homes P.O. Box 1448 Chico CA 95927	Self	Drake Homes	500	500
8-30	Harold S. Edwards 770 Ramirez Rd. Marysville CA 95901	Retired		125	125
11-6	Dorian Faber 571 Dale Ave., Yuba City CA 95991	Doctor	Dorian Faber, MD	50	100
11-10	Bob Porter 4425 W. Riego Rd Sacramento CA 95837	Self	Farm-Air Flying Service Inc.	200	200
11-4	First Interstate Bank General Account Div. LA 600 So. Spring St., LA CA 90054	Bank	First Interstate Bank	200	200
9-20	Brooks Fiske P.O. Box 243 Marysville CA 95901	Retired		50	100
10-25	Joseph Fitzhenry 10155 Stone Arch Dr. Grass Valley CA 95945			43	193
7-22	John Forsman 2700 Plumas-Arboga Rd. Marysville CA 95901	Farmer		100	100
11-3	Fox Electric 3995 Olive Hwy Oroville CA 95965	Electric Co.	Fox Co.	100	100
11-19	Richard French 1984 Riosa Rd. Lincoln Ca 95648	Farmer Supply Dealer		100	100
SUBTOTAL				1568	

☒ If more space is needed, check box at left  
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**SCHEDULE A**  
**MONEY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

I.D. NUMBER (if committee)  
 790456

NAME OF CANDIDATE OR COMMITTEE:  
 FRIENDS FO WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number on contributor's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNTS	
				RECEIVED	CUMULATIVE TO DATE
10-7	Gerald A. Frye 4291 Colusa Hwy Yuba City CA 95991	Farmer	Frye & Lonon	100	100
11-30	Rich Geiselhart		Bear River Farming Coop.	100	100
11-7	James Gilpatric 617 Darrough Dr Yuba City CA 95991	Oil Dealer	Gilpatric Oil	42	292
11-25	Ted Gingrich 976 Franklin Rd. Yuba City CA 95991	Doctor	Ted Ginrich, MD	100	100
11-10	Ronald Giovannetti 733 E. Hillcrest Ave. Yuba City CA 95991	Farmer	B.E. Giovannetti & Sons	200	200
11-20	Ronald Glassgow P.O. Box 16 Princeton CA 95970	Trucker	Glassgow	200	200
11-11	Lee Gomer P.O. Box 72 Yuba City CA 95991	Title Co.		100	100
11-11	Frances Gomez Box 366 Fall River Mills CA 96028			100	100
11-2	Golden State Tractor Co P.O. Box 650 Woodland CA 95695	John Deere Dealership	Golden State Tractor Co.	243	243
11-3	Robert Graf 1601 Mitchell Ave. Oroville CA 95965	Food Processor		200	200
10-10	E. Joe Graham 909 Plumas St Yuba city CA 95991	DDS	E. Joe Grahma DDS	200	200
SUBTOTAL				1585	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85  
 I.D. NUMBER (if committee) 790456

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (If committee, add which I.D. number or committee's name and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
12-20	W. A. Graham Star Rte, 580 Brownsville CA 95919	Logger		200	200
12-12	Dale Green 1548 Market St. Yuba City CA 95991	Contractor	Dale Green Contracting	100	200
11-22	W. C. Grimes 214 Upper Circle Dr Grass Valley CA 95945			43	143
4-23	H. A. Grinnell 1311 Downing Ave. Chico CA 95926	Self	H. A. Grinnell & Sons Inc.	100	100
11-9	Roy Grossman 376 Vallombrosa Ave. Chico CA 95926	Self	Chico Immediate Care Medical Center	200	200
10-5	James Hamilton 393 Del Norte Ave. Yuba City CA 95991	Doctor	James Hamilton MD, Inc.	100	200
11-13	Michael Hanns 7474 Doc Adams Rd Marysville CA 95901			100	100
9-10	Karsten Hansen P.O. Box 2 Grass Valley CA 95945	Trucking	Hansen Trucking	43	143
10-3	James L. Harrison P.O. Box 3307 Yuba City CA 95991	Self	James L. Harrison INC.	200	200
10-3 10-20	Coburn Haskell P.O. Box 1716 Yuba City CA 95992	Investments		100 50	175
11-19	Dorothy H. Hassman 10030 Grinding Rock Rd. Grass Valley CA			100	100
SUBTOTAL				1336	

X

If more space is needed, check box at left  
 and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 7-1-85 **THROUGH** 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (IF COMMITTEE)**

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-18	Ernest Hatch 348 River View DR. Oroville CA 95965	Rice Grower	Butte Creek C.C.	211	311
11-11	Hi & Dry Warehouse P.O. Box 378 Sutter CA 95982	Dryer	Hi & Dry Warehouse Inc.	200	200
8-30	James W. Higgins 12225 Lakeshore Dr. So. Auburn CA 95603			100	200
11-19	Howell & Howell	Atty's	Howell & Howell	100	100
10-25	Fred T. Huntington P.O. Box 991 Oroville CA 95965	Retired		25	125
8-18	Carolyn Illerich Star Rte. Knights Landing CA 95645	Farmer	Illerich Farms	50	100
10-28	Ingram Realtors 352 Vallombrosa Chico CA 95926	Realtor	Ingram Realtors, Inc.	100	100
11-15	Leonard Bard 1618 Mangrove Ave. Chico CA 95926	Self	Inlane Valley Insurance Service	100	100
11-9 2-28	Jopson Ranch 1255 Pleasant Grove Wheatland CA 95692	Farmer	Jopson Ranch	500 129	1000
3-25	W. E. Jopson 705 Harris St. Marysville CA 95901	Farm	Jopson	500	500
3-5	M. J. Justeson 469 Block Rd Gridley CA 95948	Farmer	Justeson Ranch	600 400	1000
<b>SUBTOTAL</b>				<b>3047</b>	

☐ If more space is needed, check box at left  
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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF Wally Herger for Assembly**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-2	Raply Keeley 1040 9th St Colusa CA 95932	Farmer	Keeley Ranch	250	250
12-31	Keeley Ranch P.O. Box 1318 Colusa CA 95932	Farm	Keeley Ranch	100	100
7-31	King Chevrolet 1501 Mangrove Chico CA 95927	Car Dealer	King Chevrolet Inc.	100	100
1-18	Wade Kitchens 469 Littlejohn Yuba City CA 95991	Insurance		200	200
10-30	James Leathers 922 Elm St Woodland CA 95695	Farmer		100	200
9-18	Eugene H. Lonon 910 Ohleyer Rd yuba city CA 95991	Farmer	Frye & Lonon	500	500
11-19	Homer Lundberg P.O. Box 216 Richvale CA 95974	Rancher	Vandy Farms	400	400
11-19	Douglas McGeoghegan P.O. Box 729 Maxwell CA 95955	Farming		100	100
9-18 11-9	Jack Macko 150 Butte Ave. Yuba City CA 95991	Self	Macko Oil Co.	100 243	343
11-14	Danny Marona P.O. Box 1053 Yub City CA 95991	Entertainer		100	100
7-9	Bob Martin 91 Canyon Drive Oroville CA 95965	Self	Butte Land Devel. Corp.	100	00
<b>SUBTOTAL</b>				<b>2293</b>	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 7-1-85 **THROUGH** 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (IF COMMITTEE)**  
 790456

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-16	Matthews, Crippen, Tenney & Co. P.O. Box 1672 Marysville CA 95901	CPA's	Matthews, Crippen, Tenney & Co.	129	129
10-31	George Meyers 860 Onstott Rd. Yuba City CA 95991	Farming	Brady Ranch	265	765
11-10	Glenn E. Miller P.O. Box 47 Princeton CA 95970			200	200
11-20	Henry Miller 8349 Oroville Hwy Marysville CA 95901	Tractor Business		100	200
10-21	Royal Miller Jr. 638 1/2 W. 8th Chico CA 95926			100	100
9-18	T.A. Miller 977 Hillcrest Ave. Yuba City CA 95991	Retured		100	100
11-30	Neill Mitchell 1900 Teather River Blvd. Marysville CA 95901	Farming	Mithcell Ranch	243	243
10-10	Moffitt Farms 2532 Lakrin Rd Biggs CA 95917	Farm	Moffitt	100	100
10-20	Warren Moffitt 2532 Lrkin Rd. Biggs CA 95917	Farmer	Moffitt Farms	100	100
10-25	John Monnot 493 Bunce Rd Yuba City CA 95991	Rancher	Monnot	100	100
11-9	A. G. Montna 678 Stewart Rd Yuba City CA 95991	Rice Farmer	Montna Farm	200	200
<b>SUBTOTAL</b>				1737	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE: **FRIENDS OF WALLY HERGER FOR ASSEMBLY** I.D. NUMBER (IF COMMITTEE) **790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-8	Frank Morgan 1901 Dayton Rd Chico CA 95926	Retired		100	100
10-25	Mitchell Morgan	Moving Business		600	1000
10-22	1049 Cam Bridge Ct. Yuba City CA 95991			400	
8-8	C. Warren Morris P.O. Box 97 Grimes CA 95950			100	100
11-30	Gayle Morrison P.O. Box 29 Yuba City CA 95991	Moulding Mfg.	Morrison's	200	300
9-22	James Moulder 965 Malick Ave. Yuba City CA 95991	Real Estate	Moulder Realtor	125	125
11-12	Geo. Murray P.O. Box 988 Yuba City CA 95991	REal Estate	Geo. Murray Corp.	243	243
10-20	Eugene Muttersback 613 Market St. Colusa CA 95932	Atty.	Muttersback	100	200
11-20	Nelson Farms, Inc. 3126 Betz Road Wheatland CA 95692	Farming	Nelson Farms Inc.	200	200
9-26	Daniel Newton 300 Nihell St. Nevada City CA 95959			100	100
10-8	Karl Nichols P.O. Box 25 Wheatland CA 95692			100	100
10-5	Norene Ranches 3629 Bear River Dr. Wheatland CA 95692	Franch	Norene Ranches	500	500

☒ If more space is needed, check box at left  
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**SUBTOTAL**

**2768**



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)

790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7-8	Charlie Northrop 2891 Butte House Rd Yuba City CA 95991	Self	Stock & Bond Broker	100	100
7-12	David A. Offutt 1489 Country Club Ave. Marysville CA 95901	Atty.	David A. Offutt, Atty.	100	100
9-9	Mas Oji 8547 Sawtelle Ave. Yuba City CA 95991	Farmer	Oji Farms	1000	1000
11-10	Onstott Dusters P.O. Box 709 Yuba City CA 95991	Crop Dusters	Onstott Dusters	100	100
3-26	L. A. Otterson P.O. Box 731 Colusa CA 95932	Farmer	L.A. Otterson	100	200
10-10	David W. Galitz P.O. Box 37 Scotia CA 95565	Lumber Business	Pacific Lumber Co.	100	100
10-19	Dean Palmer 1357 Frnaklin Rd Yuba City CA 95991	Mortgagae Broker	Mason-MuDuffie	100	100
11-20	Glenn Parker 16578 McCourtney Rd Grass Valley CA			43	143
10-25	H. Earl Parker 209 E. 25th St. Marysville CA 95901	Retired		200	250
9-30	H. Earl Parker, Jr. P.O. Box 2441 Marysville CA 95901	Atty.	H. Earl Parker Atty.	200	200
11-1	Robert M. Peppercorn 367 Del Norte Ave., Ste. 4 Yuba City CA 95991	Doctor	Robert M. Peppercorn M.D. INC.	200	200
SUBTOTAL				2243	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, list chair I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-22	Paul Peterson 1075 Woodland Ave. Chico CA 95926			25	125
11-19	Steven Rabedew P.O. Box 771 Colusa CA 95932	CPA	Steven Rabedew, CPA	200	200
7-10	John F. Rankin 819 Zion St. Nevada City CA 95959	Self	Rankins Trailer Park	100	100
11-13	Lonny L. Renfrow 1190 Civic Center Blvd Yuba City CA 95991	CPA	Chipman & Refrow	200	200
11-19	Donald Richey 564 Rio Linda Ave. Chico CA 95926	Doctor	Donald Richey MD	200	200
9-7	Henry Richter, Jr. Star Rte. Knights Landing CA 95645	Farmer	Richter Ranch	500	500
11-30	Dell Riebe 129 Idaho-Maryland Rd. Grass Valley CA	Auto. Supplies	Riebe's Supplies	250	500
8-1 11-30	G.W. Rienks, Jr. P.O. Box 988 Marysville CA 95901			100 50	150
11-18	Dr. Perry Riley 17850 LaSSO Loop Penn Valley CA 95946	Self	Nutrition Inc.	100	200
10-18	Rio Bonito Ranch, 3288 Larkin Rd Biggs CA 95917	Ranch	Rio Bonito Ranch Inc.	100	100
11-19	Edwina Robbins 926 Taber Ave. Yuba City CA 95991			100	100

☒ If more space is needed, check box at left  
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**SUBTOTAL**

1925

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 7-1-85 TO 12-31-88  
 ID. NUMBER (if submitted)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE ALL O	FULL NAME AND ADDRESS OF CONTRIBUTOR (If committee, also enter ID. number on treasurer's name and address)	OCCUPATION	EMPLOYER (If self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-13	Robinson Const. Co. P.O. Box 1620 Oroville CA 95965	Const. Co.	Robinson Const. Co.	443	1443
11-19	Guy Robinson Grass Valley CA 95945	Self	Guy Robinson & Sons	200	200
11-10	Jerome A. Robson 1026 Buchanan Rd. Yuba City CA 95991	Doctor	Jerome A. Robson, MD Inc.	200	200
10-30	Michael E. Rue 2700 Plumas-Arboga Rd Marysville CA 95901	Farming		200	200
7-31	Pauline Russell P.O. Box 483 Chico CA 95927			100	100
9-3	Alfred Sadler 651 Cassidy Yuba City CA 95991	Self	Sadler Cleaner	300	500
12-23	Dale Sakuth 3541 Nuestro Rd Yuba City CA 95991	Rancher	Dale Sakuth	100	100
9-18	Donald Sargent 8804 Loma Rica Rd Marysville CA 95901			100	100
9-27	Kenneth Sargent 470 South Auburn St. Ste. B Grass Valley CA 95945	Doctor	Kenneth Sargent, MD Inc.	100	100
9-10 11-15	Victor Savage 664 Shasta St. Yuba City CA 95991	Dentist	Victor Savage, DDS	43 400	543
10-28	Schrader & Murphy 2250 Fifth Ave. Oroville CA 95965	Insurance	Schrader & Murphy Insurance, Corp.	100	100

☒ If more space is needed, check box at left and attach additional Schedules A.

SUBTOTAL

2286

8704053249

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(If committee, add street I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(If self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
8-30	Remo Scocci 1929 Trident Ct. Yuba City CA 95991	Owner	Yuba-Sutter Disposal	400	400
8-20	Beverly Seghezzi 12694 Mayflower DR. Nevada City CA 95959	Self	Amos' Bottle Shop Inc.	100	100
7-3-	F. W. Sellman P.O. Box 1299 Paradise CA 95969			50	150
10-8	Burrell Shirey 101 JoANN Way Grass Valley CA			25 50	175
11-20	Steves Carnes P.O. Box 126 Maryville CA 95901	Owner	Sierra View Mausoleum	22	2727
11-20	Signal Home Loans P.O. Box 2115 Oroville CA 95965	Loan Co.	Signal Jome Loans Inc	100	100
11-19	Clifton Simmons 581 Ridge Way Yuba City cA 95991	Retired		200	200
11-17	Cary Simonds 812 4th Street Marysville CA 95901	Dentist	Cary Simons, DDS, Inc.	400	400
12-12	Bill Smith 3711 Jay St. Sacramento CA 95916	Photography	Bill Smith Photography	413	413
7-9 11-2	Marvin Snow 185 Valley Ridge Rd. Paradise CA 95969	Retired		50 300	410
11-18	Soper-Wheeler Co. Strawberry Valley CA 95981	Logging	Soper-Wheeler Co.	200	200
SUBTOTAL				2310	

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**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
ID NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, LISTED ID NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-30	Clayton L. Spangler 6946 Garden Hwy. Nicolaus CA	Farmer	Spangler Bros.	200	200
11-30	Chester Spooner P.O. Box 5 Williams CA 95987	Farmer	Spooner Ranch	100	100
10-26	Williams L. Sprangler 6932 Gardens Hwy Nicolaus CA 95659	Farmer	Spangler Bros.	200	200
11-18	Robert Sproat 405 Center St., Ste. 103 Yuba City CA 95991	Dentist	Robert Sproat, DDS	100	100
11-30	Stevens, French & Wood P.O. Box S Truckee CA 95734	Attys	Stevens, French & Wood	100	100
11-30	Don Strachan 2522 Tierra Buena Rd. yuba City CA 95991	Bee Keeper	Strachan Apiaries	200	200
10-8	William Stuke 1463 Hwy 99 Gridley CA 95948	Nursery	Stuke Nursery Co.	100	100
7-27	Jack Sullivan P.O. Box 671 Yuba City CA 95991	Farmer	Sullivan Ranch	100	100
12-2	Sweco Products, Inc. P.O. Box 259 Sutter CA 95982	Hydraulic	Sweco Products, Inc.	100	100
11-19	Louis Tarke 11481 S. Butte Rd Sutter CA 95982	Farmer	Tarke Bros.	586	586
11-19	Richard Tarke 11481 So. Butte Rd. Sutter CA 95982	Farmer	Tarke Bros.	500	500

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

**2286**



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-8
I.D. NUMBER (if committee)	
790456	

NAMES OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, LIST AS ENTERED I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
10-20	Taylor, Hinsdale & Williamson 1289 Lincoln Rd. Yuba City CA 95991	Atty's	Taylor, Hinsdale, & Williamson, INC.	300	300
11-11	Louis W. Tescher Gridley CA 95948	Building Contr.	Tescher Contract	100	100
11-19	Bhagat Singh Thiara P.O. Box 188 Live Oak CA 95953	Farmer	Thiara Ranch	100	100
11-11	Albert Troost 117 Scott Way Grass Valley CA			50	200
11-18	Ken Tucher P.O. Box 127 Gridley CA 95948	Car Dealer	Tucker Chevrolet Buick	100	100
11-18	Dorothea Van Eckhardt 1644 Jeffrey DR. Yuba City CA 95991	Interior Designer		100	100
9-10	Peter Wagenhals Star Rte. Box 325 Brownsville CA 95919	Retired		50 200	300
11-2	Maudie Walker 10426 Partridge Rd. Grass Valley CA 95945			100	100
9-20	Eleanor Welch 544 10th Street. Colusa CA 95932	Retired		200	300
9-18	George West 682 Long Bar Rd. Oroville CA 95965	Retired		50	100
11-19	David Wheeler 515 Windsor Dr. Yuba City CA 95991	Car Dealer	Wheeler Olds, Cad.	100	100

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**SUBTOTAL**

**1500**



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	TO DATE
7-1-85	12-31-8
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
9-18	Deane Williams 3288 Larkin Rd. Biggs CA 95917	Retired		100	200
10-6	J. B. Wilson P.O. Box 244 Chico CA 95927		Butte Co. Credit Bureau	100	100
11-19	Craig Woods P.O. Box 2025 Kings Beach CA 95719			100	100
11-19	Johnnie Wurm 3020 Walnut Ave. Marysville CA 95901	Rancher	Wurm Ranch	200	200
11-25	Charles Yates P.O. Box 808 Colusa CA 95932	Farmer	Yates Ranch	100	100
11-19	Chas T. Yerxa Box 269 Colusa CA 95932	Farmer	Yerxa Farms	400	400
11-19	Paul D. Young 640 Crestmont Ave Yuba City CA 95991			100	100
11-15	Russell Young Jr. Meridian CA 95957	Farmer	Russell Ranch	143	143
11-18	Pete Huckins 625 Bridge Street Yuba City CA 95991	Owner	Superior Beverage	300	300
SUBTOTAL				1543	

☐ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE B  
LOANS  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
FROM 7-1-85 THROUGH 12-31-85

**NAME OF CANDIDATE OR COMMITTEE:**  
FRIENDS OF WALLY HERGER FOR ASSEMBLY

**I.D. NUMBER (IF COMMITTEE)**  
790456

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OF TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE

☐ If more space is needed, check box at left and attach additional Schedules B, Part 1.

**SUBTOTAL**

0

**PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	

☐ If more space is needed, check box at left and attach additional Schedules B, Part 2.

**SUBTOTAL**

**SUMMARY**

1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0	
2. LOANS UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)	0	
4. LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a))	0	
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0	
6. LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0	
7. TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)	0	
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$ 0	

(May be negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
July 1985	CAUSA 415 Granercy Place Los Angeles CA 90020			Airplane Fare Food & Lodging Conference in Salt Lake City, Utah	630	630

☐

If more space is needed, check box at left and attach additional Schedules C.

**SUBTOTALS**

**630**

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD . . . . .	\$ 630	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). . . . .	0	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page . . . . .		\$ 630

# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 7-1-85 THROUGH 12-31-85

NAME OF CANDIDATE OR COMMITTEE:  
FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (if committee)

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (also enter on Schedule A)	CUMU- LATIVE PLEDGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a) 0	(b) 0	
SUBTOTALS				0	0	

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.		\$ 0

(May be  
negative figure)

**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

I.D. NUMBER (IF COMMITTEE)

790456

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES  
 "I" - INDEPENDENT EXPENDITURES  
 "L" - LITERATURE  
 "B" - BROADCAST ADVERTISING  
 "N" - NEWSPAPER AND PERIODICAL ADVERTISING  
 "O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS  
 "F" - FUNDRAISING EVENTS  
 "G" - GENERAL OPERATIONS AND OVERHEAD  
 "T" - TRAVEL, ACCOMMODATIONS AND MEALS  
 "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT ACCRUED

☐ If more space is needed, check box, and attach additional Schedules F

**SUBTOTAL**      0

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

Accrued Expenses of \$100 or More This Period	0	
Accrued Expenses of Under \$100 This Period (Not Itemized)	0	
Total Accrued Expenses Incurred This Period (Line 1 + 2)		0
Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3		0
Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page		0

(May be negative figure)



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
COGS 1041 County Rd Belmont CA 94002	0		6000
Hilde Swinehart 941 Richland Rd. Yuba City CA 95991	G		2170 273
Peggy L. Bristow 1590 Spencer Lane Yuba City CA 95991	G		1345
Sandra Cummings 2021 Hooper Rd. Yuba City CA 95991	G		768
Grass Valley Computers 5995 Lindhurst Ave. Marysville CA 95901	G		1510
SUBTOTAL			12066

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 55659
2. Payments under \$100 this period (not itemized)	\$ 1383
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 57042



**SCHEDULE E  
PAYMENTS AND CONTRIBUTIONS MADE**

**(CONTINUATION SHEET)  
FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
9 5 3 0 4 7 0 8 Hall's Office Supplies P.O. Box 1271 Marysville CA 95901	G		224
5 3 5 Yuba City Florist 664 Plumas St. Yuba City CA 95991	G		636
0 4 0 U.S. Postmaster Yuba City CA 95901	G		532
7 0 4 Midvalley Offices Machines 300 Carriage Square Yuba City CA 95991	G		814
8 Computer Caging Corp. 6060 Sunrise Vista Dr. Citrus Heights CA 95610	L	See E-1 (3)	2802
IRS Fresno CA 93888	g		91
Pacific Bell P.O. Box T Sacramento CA 95813	G		217
Data Mailing Systems P.O. Box 13112 Sacramento CA 95813	L		518
SUBTOTAL			5834

☐ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |  |   |
|--|---|
| <p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p> | <p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p> |
|--|---|

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Normart Printing Co. P.O. Box 1068 Marysville CA 95901	G		707
Bank Of America Box 37110 San Francisco CA 94137			1981
Bill Smith Photography 3711 J Sacramento CA 95816	G		413
Regents of University of Calif. University Extension University of California Davis, CA 95616	G		190
D & D Printing Consultant 5509 Ballentine #8 Sacramento CA 95826			6098
Dication Systems, Inc P.O. Box 661568 Sacramento CA 95825			528
McKenna's Bar & Grill Sacramento CA	F		264
U.S. Postmaster Marysville CA 95901	G		8208
<b>SUBTOTAL</b>			<b>18389</b>

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E  
PAYMENTS AND CONTRIBUTIONS MADE**

**(CONTINUATION SHEET)  
FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85

NAME OF CANDIDATE OR COMMITTEE:  
**Friends of Wally Herger for Assembly**

I.D. NUMBER (if committee)  
**790456**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
1 5 2 Financial Success Report 6612 Owens Drive Pleasanton CA 94566-0625	G		109
5 Nicoletti Restaurant Inc. 330 1st Street Marysville CA 95901	F		4385
5 Anchor Mail P.O. Box 419 Sacramento CA 95802	L		1003
7 Dick Colby 2211 Lincoln Rd. Yuba City CA 95991	P		10000
8 Stapleton's  Sacramento CA	G		203
Filco 1433 Fulton Ave. Sacramento CA	G		2117
See's Candy 1009 L Street Sacramento CA 95814	G		136
State of California Assembly Snack Fund State Capitol Sacramento CA	G		100
SUBTOTAL			18053

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

(CONTINUATION SHEET)  
FORM 420, 430 OR 490)

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM 7-1-85	THROUGH 12-31-85
I.D. NUMBER (IF COMMITTEE) 790456	

NAME OF CANDIDATE OR COMMITTEE:  
Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Calif. Republican Party Sacramento CA		Convention Pre-Regist.	110
Piccadilly Inn Fresno CA	T		101
SUBTOTAL			211

☒ If more space is needed, check box and attach additional Schedules E.

**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b> COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERS PERIOD</b> FROM 7/1/85 THROUGH 12/31/85
<b>NAME OF CANDIDATE OR COMMITTEE</b> FRIENDS OF WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (if committee)</b> 790456

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |   |
|---|---|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,<br>DOOR-TO-DOOR SOLICITATIONS |
| "B" - BROADCAST ADVERTISING                   | "F" - FUNDRAISING EVENTS  |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                            |
| "O" - OUTSIDE ADVERTISING                     |   |

NAME AND ADDRESS OF PAYEE OR CREDITOR (if committee, also enter I.D. number or name and address of treasurer)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
TEAMFOUR MAIL MARKETING, INC. 6500 EAST FLOTILLA ST. CITY OF COMMERCE, CA 90040-1787	L		184.55
<input checked="" type="checkbox"/> If more space is needed. check box and attach additional Attachment Schedules E-1			<b>TOTAL</b> 185

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.

**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b> COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERS PERIOD</b> FROM 7-1-85 THROUGH 12-31-85
<b>NAME OF CANDIDATE OR COMMITTEE</b> FRIENDS OF WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (if committee)</b> 790456

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |   |
|---|---|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,<br>DOOR-TO-DOOR SOLICITATIONS |
| "B" - BROADCAST ADVERTISING                   | "F" - FUNDRAISING EVENTS  |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                            |
| "O" - OUTSIDE ADVERTISING                     |   |

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
TEAMFOUR MAIL MARKETING, INC. 6500 EAST FLOTILLA ST. CITY OF COMMERCE, CA 90040	L	257.92

☒ If more space is needed,  
check box and attach additional Attachment Schedules E-1

**TOTAL\***

258

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.



**ATTACHMENT SCHEDULE E-1  
PAYMENTS MADE BY AN AGENT OR INDEPENDENT CONTRACTOR  
ON BEHALF OF A CANDIDATE OR COMMITTEE**

**FOR USE AS AN ATTACHMENT TO SCHEDULE E OF  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>NAME OF AGENT OR INDEPENDENT CONTRACTOR</b>  COMPUTER CAGING CORPORATION	<b>SCHEDULE COVERS PERIOD</b> FROM THROUGH 12/31/85
<b>NAME OF CANDIDATE OR COMMITTEE</b>  WALLY HERGER FOR ASSEMBLY	<b>I.D. NUMBER (IF COMMITTEE)</b>

**CODES FOR CLASSIFYING EXPENDITURES**

If codes are used, no entry is required in the "Description of Payment" column. Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "L" - LITERATURE                              | "S" - SURVEYS, SIGNATURE GATHERING,    |
| "B" - BROADCAST ADVERTISING                   | DOOR-TO-DOOR SOLICITATIONS             |
| "N" - NEWSPAPER AND PERIODICAL<br>ADVERTISING | "F" - FUNDRAISING EVENTS               |
| "O" - OUTSIDE ADVERTISING                     | "T" - TRAVEL, ACCOMMODATIONS AND MEALS |

5  
3  
2  
6  
6  
5  
3  
7  
0  
4  
0  
5

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
TEAMFOUR MAIL MARKETING, INC. 6500 EAST FLOTILLA ST CITY OF COMMERCE, CA 90040-1787	L		663.28
<input type="checkbox"/> If more space is needed, check box and attach additional Attachment Schedules E-1			TOTAL* 663

\*Do not transfer total to any other schedule. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E by the candidate or committee.

**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
7-1-85	12-31-85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT ACCRUED

☐ If more space is needed, check box, and attach additional Schedules F

SUBTOTAL 0

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1. Accrued Expenses of \$100 or More This Period	\$ 0	
2. Accrued Expenses of Under \$100 This Period (Not Itemized)	0	
3. Total Accrued Expenses Incurred This Period (Line 1 + 2)		0
4. Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3		0
5. Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column 8 of Summary Page		0

(May be negative figure)



Form 490  
1985

**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

**RECEIVED  
AND FILED**  
in the office of the Secretary of State  
of the State of California  
**MAR 24 1986**  
**MARCH FONG EU, Secretary of State**  
**A OFFICIAL USE ONLY**

Statement covers period from 1-1-86 through 3-17-86

DATE OF ELECTION (MO., DAY, YR.) (if applicable):	TOTAL PAGES: 14	
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**I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <u>Wally Herger</u>					OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly - Third District</u>		
RESIDENTIAL ADDRESS: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		
<u>1100 Fourth Avenue</u>	<u>Rio Oso</u>	<u>CA</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>		
BUSINESS ADDRESS: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		
<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>		

**II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>						I.D. NUMBER <u>790456</u>	
ADDRESS OF COMMITTEE: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		
<u>P. O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95992</u>				

NAME OF TREASURER: <u>Jerry Crippen</u>							
PERMANENT ADDRESS OF TREASURER: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		
<u>220 First Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8201</u>		

NAME OF COMMITTEE:						I.D. NUMBER	
ADDRESS OF COMMITTEE: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		

NAME OF TREASURER:							
PERMANENT ADDRESS OF TREASURER: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		

NAME OF TREASURER:							
PERMANENT ADDRESS OF TREASURER: NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER		

Attach additional information on appropriately labeled continuation sheets.

**CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?	
			YES	NO
Wally Herger for Congress Fed #117731	P. O. Box 123 Yuba City, CA 95992	Jerry Crippen		

Attach additional information on appropriately labeled continuation sheets.

(A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

**VERIFICATION**

declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that have used all reasonable diligence in their preparation.

Executed on 3/21/86 at Marysville Calif. by Jerry Crippen  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 3/21/86 at Sacramento Ca by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

or information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM THROUGH

1-1-86 3-17-86

I.D. NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE

Friends of Wally Herger for Assembly

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions . . . . .	\$ 7,250	\$ 7,250	\$ 7,250
	SCHEDULE A, LINE 1		
2. Loans . . . . .	-0-	-0-	-0-
	SCHEDULE B, LINE 1		
3. Subtotal . . . . .	\$ 7,250	\$ 7,250	\$ 7,250
	LINE 1 + 2		
4. Non-monetary contributions . . . . .	-0-	-0-	-0-
	SCHEDULE C, LINE 1		
5. Pledges . . . . .	-0-	-0-	-0-
	SCHEDULE D, LINE 1		
6. TOTAL CONTRIBUTIONS . . . . .	\$ 7,250	\$ 7,250	\$ 7,250
	LINE 3 + 4 + 5		LINE 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)
<b>EXPENDITURES MADE</b>			
7. Payments . . . . .	\$ 11,129	\$ 11,129	\$ 11,129
	SCHEDULE E, LINE 1		
8. Accrued expenses (unpaid bills) . . . . .	-0-	-0-	-0-
	SCHEDULE F, LINE 1		
9. TOTAL EXPENDITURES . . . . .	\$ 11,129	\$ 11,129	\$ 11,129
	LINE 7 + 8		LINE 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) . . . . .	\$ 79,318
11. Cash receipts this period (Line 3, Column B above) . . . . .	7,250
12. Miscellaneous adjustments to cash (Schedule G, Line 7) . . . . .	(75,439)
13. Cash payments this period (Line 7, Column B above) . . . . .	11,129
14. Cash on hand at closing date (Lines 10 + 11 + 12 - 13 above) * . . . . .	-0-
15. Outstanding debts (Line 2 + Line 8 of Column C above) . . . . .	-0-
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) . . . . .	\$ -0-
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) . . . . .	\$ ( )

\* Ending cash on hand should not be a negative amount

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:

20. EXPENDITURES MADE:

1/1 thru 6/30	7/1 to date

**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)**

DATE	IND EXP.	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
3/17		Friends of Roger Canfield	X		250	250
1/8		Cong. Mem. Comm. State Fund	X		1,000	1,000

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 1-1-86 THROUGH 3-17-86

NAME OF CANDIDATE OR COMMITTEE:  
 Friends of Wally Herger for Assembly

I.D. NUMBER (IF COMMITTEE)  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2/12	CA Grocers Assoc. PAC 1400 K St. #208 Sacramento 95814	#760914		500	500
2/12	Western United Dairymen 1620 N. Carpenter #A-5 Modesto 95351	#771500		500	500
2/12	CA Pharmacists PAC 555 Capitol Mall #635 Sacramento 95814	#741831		500	500
2/12	Indep. Oil Prod. Agency 900 E. Wardlow #D Long Beach 90807	#790456		500	500
2/12	CA Chiropractic PAC 1030 15th St. #250 Sacramento 95814	#742986		500	500
2/12	Mobilehome Parks PAC 1030 15th St. #250 Sacramento 95814	#742422		500	500
2/12	CA Financial Svs. Assoc. 1010 11th St. #210 Sacramento 95814	#742749		250	250

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL** 3,250

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$7,250	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not Itemized) .....	-0-	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....		\$7,250



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 1-1-86 THROUGH 3-17-86

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

I.D. NUMBER (IF COMMITTEE)  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2/12	Beneficial Management Corp. 4817 Butternut Hollow Ln. Bonita 92002			250	250
2/12	CA Hospitals PAC 1030 15th St. #250 Sacramento 95814	#790773		500	500
2/12	CA Cable TV Assoc. P. O. Box 11080 Oakland 94611	#745932		250	250
2/12	20th Century Ins. Co. 6301 Owensmouth Ave. Woodland Hills 91367			1,000	1,000
2/12	Pearle Vision Center 2534 Royal Lane Dallas, Texas 75229			1,000	1,000
2/12	AG Council of CA PAC P. O. Box 831 Sacramento 95804	#761092		500	500
3/3	CA Medical Assoc. PAC 44 Gough St. San Francisco 94103	#742617		500	500
SUBTOTAL				4,000	

☐ If more space is needed, check box at left  
 and attach additional Schedules A.

9704053271

**SCHEDULE B**

**LOANS**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM THROUGH

1-186 3-17-86

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

I.D. NUMBER (IF COMMITTEE)

790456

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.					<b>SUBTOTAL</b>	-0-

**PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a)	(b)		
<b>SUBTOTAL</b>					

**SUMMARY**

1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$	-0-
2. LOANS UNDER \$100 THIS PERIOD (Not Itemized)		-0-
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)		-0-
4. LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a))		-0-
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))		-0-
6. LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)		-0-
7. TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)		-0-
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$	-0-

(May be  
negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Hally Herger for Assembly

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules C.					SUBTOTALS	-0-

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD.....	\$	-0-	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not Itemized).....		-0-	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....			\$-0-

# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 1-1-86 THROUGH 3-17-86

I.D. NUMBER (IF COMMITTEE)  
790456

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (ALSO ENTER ON SCHEDULE A)	CUMU- LATIVE PLEGGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a) SUBTOTALS -0-	(b) -0-	

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ -0-	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	-0-	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		-0-
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	-0-	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	-0-	
6. TOTAL PLEDGES PAID (Line 4 + 5)		-0-
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page		\$ -0-

(May be  
negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Franchise Tax Board 300 Capitol Mall Sacramento 95814	G		282.00
Internal Revenue Service Cincinnati, Oh 45999	G		1,305.00
Master Shuttle Service 623 14th Marysville, Ca. 95901		Refund of Contribution	100.00
Tri-City Moving 623 14th Marysville, Ca. 95901		Refund of Contribution	300.00
Master Van & Shuttle 623 14th Marysville, Ca. 95901		Refund of Contribution	600.00
SUBTOTAL			2,587.00

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 9,959
2. Payments under \$100 this period (not itemized)	\$ 1,170
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$ -0-
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 11,129



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
 Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Taylor, Hinsdale & Williamson 1289 Lincoln Road Yuba City, Ca. 95991		Refund of Contribution	300.00
Matthews, Crippen & Tenney 320 1st St. Marysville, Ca. 95901		Refund of Contribution	129.00
Bill Smith Photography 3711 J St. Sacramento 95816		Refund of Contribution	413.30
Frank Booth Inc. 222 3rd Marysville, Ca. 95901		Refund of Contribution	1,000.00
Iggy Rackauckas 700 Civic Center Drive Santa Ana, Ca. 92701	T		158.00
Friends of Roger Canfield Sacramento Co. Supervisor Sacramento, Ca. 95814	C		250.00
Superior Beverage 625 Bridge St. Yuba City, Ca. 95991		Refund of Contribution	300.00
CA Republican Party Sacramento, Ca.		Convention	145.00
SUBTOTAL			2,695.00

☒ If more space is needed, check box and attach additional Schedules E.



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

One of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual* Campaign Disclosure for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
1 Peggy Bristow 1590 Spencer Lane Yuba City, Ca. 95991	G		203.25
3 Cong. Mem. Comm. State Fund	C		1,000.00
5 Rusty Duck Restaurant Sacramento, Ca.	F		289.51
7 Pacific Bell P. O. Box T Sacramento, Ca. 95813	G		152.99
9 Yuba-Sutter Fair Yuba City, Ca. 95991	F		260.00
Peggy Bristow 1590 Spencer Lane Yuba City, Ca. 95991	G		404.88
Hall's Office Supplies P. O. Box 1271 Marysville, Ca. 95901	G		162.95
Hilde Swinehart 941 Richland Road Yuba City, Ca. 95991	G		330.88
If more space is needed, check box and attach additional Schedules E.			
SUBTOTAL			2,805.00

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<input checked="" type="checkbox"/> D & D Printing Consultant <input checked="" type="checkbox"/> 5509 Ballentine #8 <input checked="" type="checkbox"/> Sacramento, Ca. 95826	P		822.16
<input checked="" type="checkbox"/> Bank Americard <input checked="" type="checkbox"/> Box 37110 <input checked="" type="checkbox"/> San Francisco, Ca. 94137	G		464.34
<input checked="" type="checkbox"/> Sandra Cummings <input checked="" type="checkbox"/> 2021 Hooper Road <input checked="" type="checkbox"/> Yuba City, Ca. 95991	G		329.10
<input checked="" type="checkbox"/> Sandra Cummings <input checked="" type="checkbox"/> 2021 Hooper Road <input checked="" type="checkbox"/> Yuba City, Ca. 95991	G		101.80
<input checked="" type="checkbox"/> Fran Peace <input checked="" type="checkbox"/> 1521 Butte House Road <input checked="" type="checkbox"/> Yuba City, Ca. 95991	G		154.92
If more space is needed, check box and attach additional Schedules E.			<b>SUBTOTAL</b> 1,872

**SCHEDULE F  
ACCRUED EXPENSES  
(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER  
CANDIDATES OR COMMITTEES  
"I" - INDEPENDENT EXPENDITURES  
"L" - LITERATURE  
"B" - BROADCAST ADVERTISING  
"N" - NEWSPAPER AND PERIODICAL  
ADVERTISING  
"O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING,  
DOOR-TO-DOOR SOLICITATIONS  
"F" - FUNDRAISING EVENTS  
"G" - GENERAL OPERATIONS AND OVERHEAD  
"T" - TRAVEL, ACCOMMODATIONS AND MEALS  
"P" - PROFESSIONAL MANAGEMENT AND  
CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT ACCRUED
<input type="checkbox"/> If more space is needed, check box, and attach additional Schedules F			SUBTOTAL

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

Accrued Expenses of \$100 or More This Period .....	\$ -0-	
Accrued Expenses of Under \$100 This Period (Not Itemized) .....	-0-	
Total Accrued Expenses Incurred This Period (Line 1 + 2) .....		-0-
Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 .....		-0-
Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page .....		-0-

(May be  
negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

Friends of Wally Herger for Assembly

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
2/12	COGS 1041 County Road Belmont, Ca. 94002	Refund	3,000	
2/12	Dick Colby 2211 Lincoln Road Yuba City, Ca. 95991	Refund	10,000	
2/19	David Evans for Assembly 330 Anita Yuba City, Ca. 95991	Purchase Used Office Equipment	200	
2/11	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		59,377
3/11	The Wally Herger Committee 320 First St. Marysville, Ca. 95901	Transfer		30,118
	Interest on Bank Accounts		860	
			(a)	(b)
		SUBTOTAL	14,060	89,495

☐ If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

1.	INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 14,060	
2.	INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	14	
3.	TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		14,074
4.	DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	89,495	
5.	DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	18	
6.	TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		89,513
7.	TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		(75,439)

(May be negative figure)



**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

Form 490  
1985

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

**RECEIVED  
AND FILED**  
In the office of the Secretary of State  
of the State of California  
**MAR 24 1986**  
MARCH-FORWARD ONLY  
Secretary of State

Statement covers period from 1-1-86 through 3-17-86

DATE OF ELECTION (MO., DAY, YR.) (if applicable):	TOTAL PAGES: 10
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**CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <u>Wally Herger</u>		OFFICE SOUGHT OR HELD (include location and district number if applicable) <u>Assembly - Third District</u>			
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
	<u>180 Fourth Avenue</u>	<u>Rio Oso</u>	<u>CA</u>	<u>95674</u>	<u>916 633-4543</u>
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE PHONE NUMBER
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916 445-7298</u>

**CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <u>The Wally Herger Committee</u>					I.D. NUMBER <u>Pending</u>	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>320 First St.</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>		
NAME OF TREASURER: <u>Jerry Crippen</u>						
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>320 First Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8201</u>
NAME OF COMMITTEE:					I.D. NUMBER	
ADDRESS OF COMMITTEE: NO. AND STREET CITY STATE ZIP CODE AREA CODE PHONE NUMBER						
NAME OF TREASURER:						
PERMANENT ADDRESS OF TREASURER: NO. AND STREET CITY STATE ZIP CODE AREA CODE PHONE NUMBER						

Attach additional information on appropriately labeled continuation sheets.

**CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?	
			YES	NO
Wally Herger for Congress #117731	P. O. Box 123 Yuba City, CA 95992	Jerry Crippen		

Attach additional information on appropriately labeled continuation sheets.

A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.

**VERIFICATION**

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

executed on 3/21/86 at Marysville Calif by Joann B. Crippen  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))  
executed on \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

executed on 3/21/86 at Sacramento Ca by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

Information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

1-1-86 3-17-86

I.D. NUMBER (if committee)

Pending

NAME OF CANDIDATE OR COMMITTEE

The Wally Herger Committee

COLUMN A  
Cumulative  
total from  
previous period \*COLUMN B  
Total this period  
from attached  
schedulesCOLUMN C  
Cumulative  
to date  
(Column A + B)

## CONTRIBUTIONS RECEIVED

1. Monetary contributions .....	\$ _____	\$ 30,118 SCHEDULE A, LINE 1	\$ 30,118
2. Loans .....	_____	-0- SCHEDULE B, LINE 1	-0-
3. Subtotal .....	\$ _____ LINES 1 + 2	\$ 30,118 LINES 1 + 2	\$ 30,118 LINES 1 + 2
4. Non-monetary contributions .....	_____	-0- SCHEDULE C, LINE 1	-0-
5. Pledges .....	_____	-0- SCHEDULE D, LINE 1	-0-
6. TOTAL CONTRIBUTIONS .....	\$ _____ LINES 3 + 4 + 5	\$ 30,118 LINES 3 + 4 + 5	\$ 30,118 LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)

## EXPENDITURES MADE

7. Payments .....	\$ _____	\$ -0- SCHEDULE E, LINE 1	\$ -0-
8. Accrued expenses (unpaid bills) .....	_____	-0- SCHEDULE F, LINE 1	-0-
9. TOTAL EXPENDITURES .....	\$ _____ LINES 7 + 8	\$ -0- LINES 7 + 8	\$ -0- LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$ -0-
11. Cash receipts this period (Line 3, Column B above) .....	30,118
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .....	-0-
13. Cash payments this period (Line 7, Column B above) .....	-0-
14. Cash on hand at closing date (Lines 10+11+12-13 above) *	30,118
15. Outstanding debts (Line 2 + Line 8 of Column C above) .....	-0-
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) .....	\$ 30,118
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .....	\$ ( )

\* Ending cash on hand should not be a negative amount

## 18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:

20. EXPENDITURES MADE:

	1/1 thru 6/30	7/1 to date
19. CONTRIBUTIONS RECEIVED:		
20. EXPENDITURES MADE:		



**CANDIDATES, OFFICEHOLDERS AND MEASURES** (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)

DATE	IND EXP	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
						-0-

Attach and label these items on appropriately labeled continuation sheets.

Check box if "independent expenditure" (See Instructions below.)

### INSTRUCTIONS FOR PREPARING COVER PAGE CONSOLIDATED CAMPAIGN STATEMENT FORM 490

#### PERIOD COVERED BY STATEMENT:

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

#### DATE OF ELECTION:

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

#### PART I:

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

#### PART II:

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

#### PART III:

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

#### VERIFICATION:

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

#### ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure, if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

**SCHEDULE A**

**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
FROM 1-1-86 THROUGH 3-17-86  
I.D. NUMBER (if committee)

NAME OF CANDIDATE OR COMMITTEE:

The Wally Herger Committee

Pending

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
3/11	Friends of Wally Herger P. O. Box 123 Yuba City, Ca. 95992	for Assembly		30,118	30,118
SUBTOTAL				30,118	

☐ If more space is needed, check box at left  
and attach additional Schedules A.

**SUMMARY**

AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals)	\$ 30,118	
AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized)	-0-	
TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page		\$ 30,118

**LOANS**  
**FORM 420, 430 OR 490**  
 (Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
Pending	

NAME OF CANDIDATE OR COMMITTEE:  
 The Wally Herger Committee

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE
If more space is needed, check box at left and attach additional Schedules B, Part 1.				<b>SUBTOTAL</b>	-0-	

**PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a) -0-	(b) -0-		
<b>SUBTOTAL</b>					

**SUMMARY**

LOANS OF \$100 OR MORE THIS PERIOD (Part 1) .....	\$ -0-	
LOANS UNDER \$100 THIS PERIOD (Not Itemized) .....	-0-	
TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2) .....		-0-
LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a)) .....	-0-	
LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b)) .....	-0-	
LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not Itemized) Also enter this amount on Line 2 of Summary section of Schedule A) .....	-0-	
TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6) .....		-0-
NET CHANGE THIS PERIOD .....		-0-
Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page .....		
		(May be negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 1-1-86 THROUGH 3-17-86  
 THE NUMBER OF CONTRIBUTIONS: Pending

NAME OF CANDIDATE OR COMMITTEE:

The Wally Herger Committee

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (If Committee, Also enter I.D. Number or Treasurer's Name and Address)	OCCUPATION	EMPLOYER (If Self-Employed, Enter Name of Business)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT

8704053295

☐ If more space is needed, check box at left and attach additional Schedules C. SUBTOTALS -0-

**SUMMARY**

NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD .....	\$ -0-
NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized) .....	-0-
TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....	\$ -0-

**SCHEDULE D**

**PLEDGES**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86

NAME OF CANDIDATE OR COMMITTEE:  
**The Wally Herger Committee**

I.D. NUMBER (if committee)  
**Pending**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID <small>(also enter on Schedule A)</small>	CUMU- LATIVE PLEGGED UNPAID
SUBTOTALS				(a) -0-	(b) -0-	

7  
0  
4  
0  
5  
3  
2  
8  
7

☐ If more space is needed, check box at left  
and attach additional Schedules D.

**SUMMARY**

PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a) )	\$ -0-	
PLEDGES UNDER \$100 THIS PERIOD (Not Itemized)	-0-	
TOTAL PLEDGES RECEIVED (Line 1 + 2)		-0-
PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b) )	-0-	
PLEDGES UNDER \$100 PAID THIS PERIOD (Not Itemized) (Also enter on Line 2 of the summary section of Schedule A)	-0-	
TOTAL PLEDGES PAID (Line 4 + 5)		-0-
NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.		-0-
		\$

(May be  
negative figure)



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
Pending	

NAME OF CANDIDATE OR COMMITTEE:  
**The Wally Herger Committee**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
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| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

8 7 6 5 4 3 2 1	NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
	SUBTOTAL				-0-

☐ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1.	Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$	-0-
2.	Payments under \$100 this period (not itemized)	\$	-0-
3.	Total Accrued Expenses paid this period (Schedule F, Line 4)	\$	-0-
4.	Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$	-0-



**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1-1-86	3-17-86
I.D. NUMBER (if committee)	
Pending	

NAME OF CANDIDATE OR COMMITTEE:  
**The Wally Herger Committee**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. number or name and address of treasurer)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT ACCRUED

☐ If more space is needed, check box, and attach additional Schedules F

**SUBTOTAL**      **-0-**

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1. Accrued Expenses of \$100 or More This Period	\$ -0-
2. Accrued Expenses of Under \$100 This Period (Not Itemized)	-0-
3. Total Accrued Expenses Incurred This Period (Line 1 + 2)	-0-
4. Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3	-0-
5. Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page	-0-

(May be negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
1-1-86	3-17-86
I.B. NUMBER (IF COMMITTEE)	
Pending	

NAME OF CANDIDATE OR COMMITTEE:

The Wally Herger Committee

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER ID NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G			SUBTOTAL	
			(a)	(b)
			-0-	-0-

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ -0-	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not Itemized)	-0-	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)	-0-	
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	-0-	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not Itemized)	-0-	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)	-0-	
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page	\$ -0-	
		(May be negative figure)



Form 405  
1986

# AMENDMENT CAMPAIGN DISCLOSURE STATEMENT

For use by persons amending statements filed pursuant to Government Code Section 84200-84217. This form must be filed with all filing officers who received the statement being amended. NOTE: This form is not used to amend a Statement of Organization (Form 410).

(Type or Print in Ink)

RECEIVED  
AND FILED

In the office of the Secretary of State  
of the State of California

APR 17 1986

MARCH FONG EU, Secretary of State

A OFFICIAL USE ONLY

The information required in Section I must correspond to the information provided on the campaign statement.

NAME OF FILER:

Friends of Wally Herger for Assembly

I.D. NO. (IF APPLICABLE)

790456

ADDRESS OF FILER:

P. O. Box 123

NO. AND STREET

CITY

STATE

ZIP CODE

Yuba City, Ca. 95992

AREA CODE

PHONE NUMBER

916/741-0447

NAME OF TREASURER (IF APPLICABLE):

Jerry Crippen

PERMANENT ADDRESS OF TREASURER (IF APPLICABLE):

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

320 First Street

Marysville, CA 95901

916/742-8201

The following information amends campaign disclosure statement, Form No. 490, Executed on 3/21/86

(MO., DAY, YR.)

for the period Jan. 1, 1986 to March 17, 1986.

The amended information affects items on the:

☐ Front Page

☐ Summary

☒ Schedule(s) G

Describe the changes below. Include in detail all information you wish to become a part of your official campaign statement.

Transfer of Contributions to Wally Herger for Congress Committee broken down into more detailed summary.

Reason for amendment:

Accounting Mistake

Include additional information on reverse side or on appropriately labeled continuation sheets. (Number of pages attached 2)

## VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 4/14/86 at Marysville Calif by George B. Crippen

(DATE)

(CITY AND STATE)

(SIGNATURE OF TREASURER)

A candidate or officeholder who controls a committee must also verify the campaign statement.

I have used all reasonable diligence, and to the best of my knowledge, the treasurer has used all reasonable diligence in preparing this Statement. I have reviewed the Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 4/13/86 at Marysville, Ca. by Wally Herger

(DATE)

(CITY AND STATE)

(SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

			STATEMENT COVERS PERIOD	
			FROM	THROUGH
			1-1-86	3-17-86
NAME OF CANDIDATE OR COMMITTEE			I.D. NUMBER (IF COMMITTEE)	
Friends of Wally Herger for Assembly			790456	
DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
2/12	COGS 1041 County Road Belmont, Ca. 94002	Refund	3,000	
2/12	Dick Colby 2211 Lincoln Road Yuba City, Ca. 95991	Refund	10,000	
2/19	David Evans for Assembly 330 Anita Yuba City, Ca. 95991	Purchase Used Office Equipment	200	
3/11	The Wally Herger Committee 320 First St. Marysville, Ca. 95901	Transfer		30,118
	Interest on Bank Accounts		860	
1/13	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		15,067
1/24	Wally Herger for Congress Committee P. O. Box 123 Yuba City, Ca. 95992	Transfer Indiv. Contributions		6,703
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G		SUBTOTAL	(a)	(b)

**SUMMARY**

1.	INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a) ) .....	\$	
2.	INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized) .....		
3.	TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2) .....		
4.	DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b) ) .....		
5.	DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized) .....		
6.	TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5) .....		
7.	TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page .....	\$	

(May be negative figure)

(Amounts May Be Rounded To Whole Dollars)

## SUMMARY

(May be  
negative figure)





# CONSOLIDATED CAMPAIGN STATEMENT

(Government Code Sections 84200-84217)

Form 490  
1985

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

RECEIVED  
AND FILED  
In the office of the Secretary of State  
of the State of California

JUL 18 1985

MARCH FONG RU  
OFFICIAL USE ONLY

Statement covers period from 5/19/85 through 6/30/85

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES: 1

## I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE: <u>Wally Herger</u>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly-Third District</u>		
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>1120 Fourth Avenue</u>	<u>Rio Oso</u>	<u>CA</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>

## II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>						I.D. NUMBER <u>790456</u>	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>P.O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95991</u>			
NAME OF TREASURER: <u>Leonard Meyer</u>							
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER	
	<u>1212 F Street</u>	<u>Marvsville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8869</u>	
NAME OF COMMITTEE:						I.D. NUMBER	
ADDRESS OF COMMITTEE:						PHONE NUMBER	
NAME OF TREASURER:							
PERMANENT ADDRESS OF TREASURER:						PHONE NUMBER	

Attach additional information on appropriately labeled continuation sheets.

## III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THE CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?*	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

\* (A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

## VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 7-12-85 at Marvsville, Cal. by Leonard R. Meyer  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

Executed on \_\_\_\_\_ at \_\_\_\_\_ by \_\_\_\_\_  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 7-12-85 at Yuba City, Ca. by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.



**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amount may be rounded off to whole dollars.)**

DATE	IND EXP *	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
6/30/85					0	0

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

9704055305

## CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

5/19/85 6/30/85

I.D. NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE

Friends of Wally Herger for Assembly

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Column A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions . . . . .	\$ 35,469	\$ 2,920 SCHEDULE A, LINE 3	\$ 38,389
2. Loans . . . . .	0	0 SCHEDULE B, LINE 3	0
3. Subtotal . . . . .	\$ 35,469 LINES 1 + 2	\$ 2,920 LINES 1 + 2	\$ 38,389 LINES 1 + 2
4. Non-monetary contributions . . . . .	105	0 SCHEDULE C, LINE 3	105
5. Pledges . . . . .	0	0 SCHEDULE D, LINE 7	0
6. TOTAL CONTRIBUTIONS . . . . .	\$ 35,574 LINES 3 + 4 + 5	\$ 2,920 LINES 3 + 4 + 5	\$ 38,494 LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)
<b>EXPENDITURES MADE</b>			
7. Payments . . . . .	\$ 14,470	\$ 2,273 SCHEDULE E, LINE 4	\$ 16,743
8. Accrued expenses (unpaid bills) . . . . .	0	0 SCHEDULE F, LINE 3	0
9. TOTAL EXPENDITURES . . . . .	\$ 14,470 LINES 7 + 8	\$ 2,273 LINES 7 + 8	\$ 16,743 LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) . . . . .	\$ 49,369
11. Cash receipts this period (Line 3, Column B above) . . . . .	2,920
12. Miscellaneous adjustments to cash (Schedule G, Line 7) . . . . .	602
13. Cash payments this period (Line 7, Column B above) . . . . .	2,273
14. Cash on hand at closing date (Lines 10+11+12-13 above) *	50,618
15. Outstanding debts (Line 2 + Line 8 of Column C above) . . . . .	
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) . . . . .	\$ 50,618
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) . . . . .	\$ ( )

\* Ending cash on hand should not be a negative amount

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:

20. EXPENDITURES MADE:

1/1 thru 6/30	7/1 to date

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
 FROM 5/19/85 THROUGH 6/30/85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (IF COMMITTEE)**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
2/20/85	Calif. Fertilizer Assn. ID 850321 701 12th St., Ste. 110 Sacramento CA 95814	PAC		350	350
2/20/85	Computers Sciences Corp. 2000 Evergreen St. Sacramento CA 95815			500	500
3/3/85	Insurers PAC P.O. Box 54600 Los Angeles CA 90054	PAC		500	500
1/1/85	Bartram, Vern MD 3105 Esplanade Chico CA 95926	Doctor	Self	100	100
3/3/85	Don Beck P.O. Box 79 Tahoe Vista CA 95732	REaltor	Self	100	100
2/20/85	Anna Demmer 735 Vermont Street Gridley CA 95948	Housewife	Housewife	100	100
3/3/85	Jean K. Filer 6900 Clark Road Paradise CA	Retired	Retired	100	100
<input checked="" type="checkbox"/> If more space is needed, check box at left and attach additional Schedules A.				<b>SUBTOTAL</b>	1750

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) . . . . .	\$ 2750	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) . . . . .	170	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page . . . . .		\$ 2920

(Amounts May Be Rounded To Whole Dollars)

I.D. NUMBER (if committed)  
790456

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
20/85	John Floyd MD 2721 Olive Hwy, Ste. 3 Oroville CA 95965	Doctor	Self	100	100
6/85	Gayle Morrison P.O. Box 29 Yuba City CA 95991	Moulding Mfg	SELF	100	100
20/85	John Oakes 777 Colusa Ave. Yuba City CA 95991	Banker	FEather River State Bank 777 Colusa Ave. Yuba City CA 95991	200	200
3/85	Darrell Stevens 19 Nelson Ave. Oroville CA 95965	Atty.	Self	100	100
20/85	Sierra View Mausoleum P.O. Box 126 Marysville CA 95901	Funeral Home		250	250
2/85	Sierra View Memorial Park P.O. Box 126 Marusville CA 95901	Cematery		250	250
SUBTOTAL				1000	

☐ If more space is needed, check box at left  
and attach additional Schedules A.

**SCHEDULE B  
LOANS  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
FROM 5/19/85 THROUGH 6/30/85

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (IF COMMITTEE)**  
790456

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR CO-SIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.					<b>SUBTOTAL</b>	0

**PART 2 - LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		<b>SUBTOTAL</b>	(a)	(b)	

**SUMMARY**

1	LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0
2	LOANS UNDER \$100 THIS PERIOD (Not itemized)	0
3	TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)	0
4	LOANS OF \$100 OR MORE REPAYED THIS PERIOD (Part 2, Column (a))	0
5	LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0
6	LOANS UNDER \$100 REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0
7	TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)	0
8	NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$ 0

(May be  
negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE) 790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

87040653300

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules C.					SUBTOTALS	0

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD. . . . .	\$	0	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). . . . .		0	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page . . . . .			\$ 0



# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 5/19/85 THROUGH 6/30/85

I.D. NUMBER (IF COMMITTEE)  
790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

9704065301

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (ALSO ENTER ON SCHEDULE A)	CUMU- LATIVE PLEGGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a)	(b)	
SUBTOTALS				0	0	

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$	0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)		0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)			0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))		0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)		0	
6. TOTAL PLEDGES PAID (Line 4 + 5)			0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.			\$ 0

(May be  
negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. number or name and address of treasurer)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postmaster Marysville CA 95901	G		235 1010
Peggy L. Bristow 1590 Spencer Lane Yuba City CA 95991	G		301
Hilde Swinehart 941 Richland Road Yuba City CA 95991	G		214
Yuba Sutter Fairgrounds 442 Franklin Ave Yuba City CA 95991	F		100
K & K Insurance 3134 Auburn Blvd. Sacramento CA 95821	F		113
SUBTOTAL			1973

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

**SUMMARY**

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 2078
2. Payments under \$100 this period (not itemized)	\$ 195
3. Total Accrued Expenses paid this period (Schedule F, Line 4)	\$ 0
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 2273

**SCHEDULE E  
PAYMENTS AND CONTRIBUTIONS MA**

**(CONTINUATION SHEET)  
FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
	CODE	DESCRIPTION OF PAYMENT	
D & D Printing 5509 Ballentine #8 Sacramento CA 95826	L		105
SUBTOTAL			105

☐ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER  
CANDIDATES OR COMMITTEES  
"I" - INDEPENDENT EXPENDITURES  
"L" - LITERATURE  
"B" - BROADCAST ADVERTISING  
"N" - NEWSPAPER AND PERIODICAL  
ADVERTISING  
"O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING,  
DOOR-TO-DOOR SOLICITATIONS  
"F" - FUNDRAISING EVENTS  
"G" - GENERAL OPERATIONS AND OVERHEAD  
"T" - TRAVEL, ACCOMMODATIONS AND MEALS  
"P" - PROFESSIONAL MANAGEMENT AND  
CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

8 7 0 4 0 5 3 3 0	NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT ACCRUED

☐ If more space is needed,  
check box, and attach additional Schedules F

**SUBTOTAL**      0

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1.	Accrued Expenses of \$100 or More This Period. ....	\$ 0	
2.	Accrued Expenses of Under \$100 This Period (Not Itemized) ....	0	
3.	Total Accrued Expenses Incurred This Period (Line 1 + 2) ....		0
4.	Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 ....		0
5.	Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page ....		0

(May be  
negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
5/19/85	6/30/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
5/30/85	Interest to all Bank accounts		545	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G		SUBTOTAL	(a) 545	(b)

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a) )	\$ 545	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	77	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		622
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b) )	0	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	20	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		20
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		\$602
		(May be negative figure)



Form 490  
1985

# CONSOLIDATED CAMPAIGN STATEMENT

Government Code Sections 84200-84217)

For use by candidates/officeholders and their controlled committees.

RECEIVED  
AND FILED  
In the office of the Secretary of State  
of the State of California

MAR 23 1985

MARCH FONG EU, Secretary of State  
A OFFICIAL USE ONLY

(Type or Print in Ink)

Statement covers period from 1/1/85 through 3/17/85

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES:

16

## I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF CANDIDATE:

Wally Herger

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

Assembly-Third District

RESIDENTIAL ADDRESS:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

1120 Fourth Avenue

Rio Oso

CA

95674

916

633-4543

BUSINESS ADDRESS:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

State Capitol

Sacramento

CA

95814

916

445-7298

## II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT

NAME OF COMMITTEE:

Friends of Wally Herger for Assembly

I.D. NUMBER

790456

ADDRESS OF COMMITTEE:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

P.O. Box 123

Yuba City

CA

95991

NAME OF TREASURER:

Leonard Meyer

PERMANENT ADDRESS OF TREASURER:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

1212 F Street

Marvsville

CA

95901

916

742-8869

NAME OF COMMITTEE:

I.D. NUMBER

ADDRESS OF COMMITTEE:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

NAME OF TREASURER:

PERMANENT ADDRESS OF TREASURER:

NO. AND STREET

CITY

STATE

ZIP CODE

AREA CODE

PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

## III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?*	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

\* (A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

## VERIFICATION

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 3/21/85 at Marvsville CA by Leonard R. Meyer

Executed on (DATE) at (CITY AND STATE) by (SIGNATURE OF TREASURER(S))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 3/22/85 at Yuba City, CA by Wally Herger

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provision of the Political Reform Act," Part X.

970405306



**THE ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)**

DATE	IND EXP *	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
3/18/85					0	0

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

870405307

**CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1/1/85	3/17/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE  
 Friends of Wally Herger for Assembly

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions .....	\$	\$ 14,635 <small>SCHEDULE A, LINE 1</small>	\$ 14,635
2. Loans .....		0 <small>SCHEDULE B, LINE 1</small>	0
3. Subtotal .....	\$	\$ 14,635 <small>LINES 1 + 2</small>	\$ 14,635 <small>LINES 1 + 2</small>
4. Non-monetary contributions .....		105 <small>SCHEDULE C, LINE 1</small>	105
5. Pledges .....		0 <small>SCHEDULE D, LINE 1</small>	0
6. TOTAL CONTRIBUTIONS .....	\$	\$ 14,740 <small>LINES 3 + 4 + 5</small>	\$ 14,740 <small>LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMNS A + B)</small>
<b>EXPENDITURES MADE</b>			
7. Payments .....	\$	\$ 9,003 <small>SCHEDULE E, LINE 1</small>	\$ 9,003
8. Accrued expenses (unpaid bills) .....		0 <small>SCHEDULE F, LINE 1</small>	0
9. TOTAL EXPENDITURES .....	\$	\$ 9,003 <small>LINES 7 + 8</small>	\$ 9,003 <small>LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMNS A + B)</small>

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

**STATEMENT OF CHANGES IN FINANCIAL CONDITION**

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$ 14,350
11. Cash receipts this period (Line 3, Column B above) .	14,635
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .	8,565
13. Cash payments this period (Line 7, Column B above) .	9,003
14. Cash on hand at closing date (Lines 10+11+12-13 above) *	28,547
15. Outstanding debts (Line 2 + Line 8 of Column C above) .	
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) .	\$ 28,547
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .	\$ ( )

\* Ending cash on hand should not be a negative amount.

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

**SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)**

19 CONTRIBUTIONS RECEIVED:

20 EXPENDITURES MADE:

1/1 thru 6/30	7/1 to date

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
 FROM 1/1/85 THROUGH 3/17/85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (if committee)**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
1/20/85	Beer Wholesalers Comm. ID # 761487 1127 11th Street #806 Sacramento CA 95814	Affairs Fund		350	350
1/22/85	Beneficial Management Corp.. of Amer.  4817 Butternut Hollow Lane Bonita CA 92002			350	350
1/16/85	CAHPAC ID # 741816 1401 21 st Street Ste. 202 Sacramento CA 95814			350	350
1/4/85	Calif. Automatic Vendors Council PAC ID #760934 11300 Sorrento Valley Road Ste. 235 San Diego CA 92121			350	350
1/28/85	Calif. Cable T.V. Assn. ID #745932 3636 Castro Valley Blvd. Ste. 10 Castro Valley CA 94546			350	350
1/16/85	Calif. Chiropractic Pac ID #742986 1225 8th Street, Ste. 550 Sacramento CA 95814			350	350
1/17/85	Calif. Dental PAC ID #742855 1225 8th St. Ste. 550 Sacramento CA 95814			700	700

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL**

**2,800**

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$ 14,600	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) .....	35	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....		\$ 14,635

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 1/1/85 **THROUGH** 3/17/85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (IF COMMITTEE)**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
6/85	Calif. Optometric PAC ID # 745825 P.O. Box 2591 Sacramento CA 95814			700	700
11/7/85	Calif. Pharmacists PAC ID # 741831 555 Capitol Mall Ste. 635 Sacramento CA 95814			350	350
6/85	Calif. Radiological PAC ID #811596 1030 Fifteenth St. Ste. 250 Sacramento CA 95814	AKA CAL-RAD-PAC		350	350
8/85	Calif. Trial Lawyers PAC ID #760231 4180 Treat Blvd. Ste. N Concord CA 94518			350	350
14/85	Calif. Wildlife Federation PAC ID # 1023 J Street, Ste. 203 Sacramento CA 95814			100	100
8/85	Dairy Institute ID #741436 11th & L Bldg, Ste. 718 Sacramento CA 95814			350	350
11/7/85	Dow Chemical Western Div. 925 L St., Ste. 1425 Sacramento CA 95814			350	350
12/85	Emergency Medical PAC ID #771066 1225 8th Street, Ste. 550 Sacramento CA 95814			350	350
11/7/85	Greater Anesthesia Service Pac ID #76098 100 So. Ellsworth, #806 San Mateo CA 94401			350	350
11/7/85	FHP Inc. Health Service PAC ID #744834 9930 Talbert Ave. Fountain Valley CA 92708			350	350
12/85	Household Finance  10772 Atrium San Diego CA 92131			350	350

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUBTOTAL** 3,950

970405310

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 1/1/85 **THROUGH** 3/17/85

**I.D. NUMBER (IF COMMITTEE)**  
 790456

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
3/85	Industrial Indemnity Co.  255 Calif. Street San Francisco CA 94120			350	350
2/22/85	Johnson & Johnson One Johnson & Johnson Plaza New Brunswick NJ 08933-7204			350	350
1/17/85	Life Insurance PAC ID #761012 1400 K St., Ste. 212 Sacramento CA 95814			350	350
2/28/85	National Medical Enterprises  11620 Wilshire Blvd. Los Angeles CA 90025			350	350
2/28/85	Pactel State PAC ID #771736 140 New Montgomery Street, Rm 1924 San Francisco CA 94105			350	350
1/6/85	PATH PAC ID #782369 1030 Fifteenth St. Ste. 250 Sacramento CA 95814			350	350
2/28/85	Peach PAC ID #744129 3704 Mt. Diablo Blvd. #215 Lafayette CA 94549			350	350
2/28/85	Western Mobilehome Parks PAC ID #742422 1225 8th St. Ste. 550 Sacramento CA 95814			350	350
1/15/85	Wickland Oil PAC ID #820000 1765 Challenge Way Sacramento CA 95815			350	350
2/22/85	ABT, INC. P.O. Box 625 Maxwell CA 95955	Trucking	Self	250	250
2/20/85	Airhill General True Value Hardware  10000 Valley Blvd. Van Nuys CA 91411			100	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL** 3,500



**SCHEDULE A**

**MONETARY CONTRIBUTIONS RECEIVED**

**(CONTINUATION SHEET)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM 1/1/85	THROUGH 3/17/85

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)

**790456**

970405312

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
/2/85	K. E. Dickey 10594 Combie Road Auburn CA 95603	Gas Business	Self	100	100
/18/85	Joseph Fitzhenry 10155 Stone Arch Drive Grass Valley CA 95945	Requested	Requested	100	100
/22/85	James Gilpatric 617 Darrougnt Drive Yuba City CA 95991	Oil Dealer	Self	250	250
/1/85	W. C. Grimes 214 Upper Circle Drive Grass Valley CA 95945	<i>Retired</i>	<i>Retired</i>	100	100
/29/85	James Hamilton 393 Del Norte Ave. Yuba City CA 95991	Doctor	Self	100	100
/28/85	John Hood 15615 Hummer Lane Grass Valley CA 95945	<i>Retired</i>	<i>Retired</i>	100	100
/6/85	Jopson Ranch 1255 Pleasant Grove Rd Wheatland CA 95692	Farmer	Self	500	500
/4/85	George Meyers 860 Onstott Road Yuba City CA 95991	Farmer	Self	500	500
/22/85	Roy Miller 4869 Franklin Road Yuba City CA 95991	Restaurant Owner	The Refuge Butte House Road Yuba City CA 95991	100	100
/22/85	Glenn Parker 16578 McCourtney Road Grass Valley CA 95945	Requested	Requested	100	100
/1/85	Gladys Perkins P.O. Box 6 Grass Valley CA 95945	<i>Retired</i>	<i>Retired</i>	100	100
<b>SUBTOTAL</b>				<b>2,050</b>	

☒ If more space is needed, check box at left  
and attach additional Schedules A.



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 1/1/85 THROUGH 3/17/85

I.D. NUMBER (IF COMMITTEE)

790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
4/85	Charles Phillips P.O. Box 2146 Chico CA 95926	Requested	Requested	100	100
3/85	Emery Poundstone P.O. Box 887 Colusa CA 95932	Farmer	Self	500	500
2/85	Gay Pryor 10900 Wissahickon Way Grass Valley CA 95945	Retired	Retired	100	100
2/85	Dr. Perry Riley 17850 Lasso Loop Penn Valley CA 95946	Doctor	Self	100	100
2/85	Robinson Const. Co. P.O. Box 1620 Oroville CA 95965	Const. Company	Self	1,000	1,000
9/85	Victor Savage 664 Shasta Street Yuba City CA 95991	Dentist	Self	100	100
2/85	Burrell Shirey 101 Joann Way Grass Valley CA 95945	Requested	Requested	100	100
4/85	Hamilton Stone 214 Sharon Way Grass Valley CA 95945	Retired	Retired	100	100
2/85	Albert Troost 117 Scott Way Grass Valley CA 95945	Requested	REquested	100	100
4/85	Eleanor Welch 544 10th Street Colusa CA 95932	Retired	Retired	100	100

☐ If more space is needed, check box at left  
 and attach additional Schedules A.

SUBTOTAL

2,300

8704052313

# SCHEDULE B

## LOANS

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

1/1/85

3/17/85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)

790456

### PART 1 - LOANS RECEIVED

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.				SUBTOTAL		

### PART 2 - LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY:

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAYED	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a)	(b)		
SUBTOTAL					

### SUMMARY

1	LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0
2	LOANS UNDER \$100 THIS PERIOD (Not itemized)	0
3	TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)	0
4	LOANS OF \$100 OR MORE REPAYED THIS PERIOD (Part 2, Column (a))	0
5	LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0
6	LOANS UNDER \$100 REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0
7	TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)	0
8	NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$ 0

(May be negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1/1/85	3/17/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMU. LATIVE AMOUNT
2/84	North Star to Tahoe Hwy 267 & No. Star Drive Truckee CA 95734			Ski lift tickets	105	105
SUBTOTALS					105	

☐ If more space is needed, check box at left and attach additional Schedules C.

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD. ....	\$	105
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). ....		0
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....		\$ 105

# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 1/1/85 THROUGH 3/1/85

I.D. NUMBER (IF COMMITTEE)  
790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT PLEDGED THIS PERIOD	AMOUNT PAID (ALSO ENTER ON SCHEDULE A)	CUMULATIVE PLEDGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a)	(b)	
SUBTOTALS						

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page		\$ 0

(May be negative figures)

# SCHEDULE E PAYMENTS AND CONTRIBUTIONS MADE

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM <b>1/1/85</b>	THROUGH <b>3/17/85</b>
I.D. NUMBER (IF COMMITTEE) <b>790456</b>	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

## CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES  
 "I" - INDEPENDENT EXPENDITURES  
 "L" - LITERATURE  
 "B" - BROADCAST ADVERTISING  
 "N" - NEWSPAPER AND PERIODICAL ADVERTISING  
 "O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS  
 "F" - FUNDRAISING EVENTS  
 "G" - GENERAL OPERATIONS AND OVERHEAD  
 "T" - TRAVEL, ACCOMMODATIONS AND MEALS  
 "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
IRS Fresno CA	G	Taxes	2,872
Franchise Tax Board Sacramento CA	G	Taxes	607
Peggy Bristow 1590 Spencer Lane Yuba City CA 95991	G		392
Hilde Swinehart 941 Richland Road Yuba City CA 95991	G		877
Grass Valley Computers 5995 Lindhurst Ave. Marysville CA 95901	G		140
<b>SUBTOTAL</b>			<b>4888</b>

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the allocation section at the front of the campaign statement.

## SUMMARY

1. Payments of \$100 or more made this period (Include all Schedule E Subtotals) .....	\$ <u>8271</u>
2. Payments under \$100 this period (not itemized) .....	\$ <u>732</u>
3. Total Accrued Expenses paid this period (Schedule F, Line 4) .....	\$ <u>0</u>
4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page .....	\$ <u>9003</u>

# SCHEDULE E PAYMENTS AND CONTRIBUTIONS MADE

(CONTINUATION SHEET)  
FORM 420, 430 OR 490)

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1/1/85	3/17/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

## CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

<p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p>	<p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p>
--	---

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
APPAC 3457-B Ardenale Lane 1/10/85 Sacramento CA 95825	C	ID#741724	2,000
Y-S Chamber of Commerce 10 & E Streets Marysville CA 95901	G		105
Yuba-Sutter Co. Sheriff's Posse P.O. Box 5327 Marysville CA 95901	G		100
The Rusty Duck Sacramento CA	F		580
Stapleton's Folsom, CA	G		153
Filco 1227 Bridge Street Yuba City CA 95991	G		286
California Republican Party 1985 Convention Reg. Sacramento CA	G		159
<b>SUBTOTAL</b>			<b>3383</b>

☐ If more space is needed, check box and attach additional Schedules E.



**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1/1/85	3/17/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER  
CANDIDATES OR COMMITTEES  
"I" - INDEPENDENT EXPENDITURES  
"L" - LITERATURE  
"B" - BROADCAST ADVERTISING  
"N" - NEWSPAPER AND PERIODICAL  
ADVERTISING  
"O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING,  
DOOR-TO-DOOR SOLICITATIONS  
"F" - FUNDRAISING EVENTS  
"G" - GENERAL OPERATIONS AND OVERHEAD  
"T" - TRAVEL, ACCOMMODATIONS AND MEALS  
"P" - PROFESSIONAL MANAGEMENT AND  
CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT ACCRUED
<input type="checkbox"/> If more space is needed, check box, and attach additional Schedules F			<b>SUBTOTAL</b>

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

1. Accrued Expenses of \$100 or More This Period . . . . .	\$ 0	
2. Accrued Expenses of Under \$100 This Period (Not Itemized) . . . . .	0	
3. Total Accrued Expenses Incurred This Period (Line 1 + 2) . . . . .		0
4. Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3 . . . . .		0
5. Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page . . . . .		0

(May be  
negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
1/1/85	3/17/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
1/28/85	US Postal Service Marysville CA 95901	Refund on Mailer	8,257	
1/23/85	Republican Leadership Conference State Capitol Sacramento CA 95814	Refund for Conference	150	
1/17/85	Interest to all Bank Accounts		151	
			(a)	(b)
		SUBTOTAL	8,558	

☐

If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 8,558	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	36	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)	8,594	
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	0	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	29	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)	29	
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page	\$ 8,565	

(May be negative figure)



Form 490  
1985

**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

RECEIVED  
AND FILED  
In the office of the Secretary of State  
of the State of California  
MAY 24 1985  
WALLY HERGER, Secretary of State  
A OFFICIAL USE ONLY

Statement covers period from 3/18/85 through 5/18/85

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES: 11

**I CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <u>Wally Herger</u>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly-Third District</u>		
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>1120 Fourth Avenue</u>	<u>Rio Uso</u>	<u>CA</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>

**II CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>					I.D. NUMBER <u>790456</u>	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>P.O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95991</u>		
NAME OF TREASURER: <u>Leonard Meyer</u>						
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>1212 F Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8869</u>

NAME OF COMMITTEE:					I.D. NUMBER	
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
NAME OF TREASURER:						
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER

Attach additional information on appropriately labeled continuation sheets.

**III CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?*	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

\* (A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

**VERIFICATION**

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 5/22/85 at Marysville, CA by Leonard R. Meyer  
(DATE) (CITY AND STATE) (SIGNATURE OF TREASURER(S))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 5/22/85 at Yuba City, Calif. by Wally Herger  
(DATE) (CITY AND STATE) (SIGNATURE OF CANDIDATE OR OFFICEHOLDER)

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provision of the Political Reform Act," Part X.

**IV. ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts must be rounded off to whole dollars.)**

DATE	IND. EXP.	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
5/18/85					0	0

Attach additional information on appropriately labeled continuation sheets.

\* Check box if "independent expenditure." (See Instructions below.)

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If no previous statement has been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 4, or November 5, 1985, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates, and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Also list in-kind contributions and independent expenditures which involve goods or services provided to or on behalf of a candidate or committee when a payment is not made (e.g., employee services, in-house printing, etc.). A description of the goods or services must also be provided. Indicate the date of the expenditure; if the expenditure is an independent expenditure (an expenditure not made at the behest of the candidate or committee on whose behalf it is made) check the box to so indicate; the office sought or held (or the measure's number or letter and the jurisdiction); the amount of the expenditure; and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation.")

270405322

# CAMPAIGN DISCLOSURE STATEMENT SUMMARY PAGE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE

FRIENDS OF WALLY HERGER FOR ASSEMBLY

	COLUMN A Cumulative total from previous period *	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions .....	\$ 14,635	\$ 20,834 <small>SCHEDULE A, LINE 1</small>	\$ 35,469
2. Loans .....	0	0 <small>SCHEDULE B, LINE 1</small>	0
3. Subtotal .....	\$ 14,635 <small>LINES 1 + 2</small>	\$ 20,834 <small>LINES 1 + 2</small>	\$ 35,469 <small>LINES 1 + 2</small>
4. Non-monetary contributions .....	105	0 <small>SCHEDULE C, LINE 1</small>	105
5. Pledges .....	0	0 <small>SCHEDULE D, LINE 1</small>	0
6. TOTAL CONTRIBUTIONS .....	\$ 14,740 <small>LINES 3 + 4 + 5</small>	\$ 20,834 <small>LINES 3 + 4 + 5</small>	\$ 35,574 <small>LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)</small>
<b>EXPENDITURES MADE</b>			
7. Payments .....	\$ 9,003	\$ 5,467 <small>SCHEDULE E, LINE 1</small>	\$ 14,470
8. Accrued expenses (unpaid bills) .....	0	0 <small>SCHEDULE F, LINE 1</small>	0
9. TOTAL EXPENDITURES .....	\$ 9,003 <small>LINES 7 + 8</small>	\$ 5,467 <small>LINES 7 + 8</small>	\$ 14,470 <small>LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)</small>

\* If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

## STATEMENT OF CHANGES IN FINANCIAL CONDITION

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$ 28,547
11. Cash receipts this period (Line 3, Column B above) .....	20,834
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .....	5,455
13. Cash payments this period (Line 7, Column B above) .....	5,467
14. Cash on hand at closing date (Lines 10+11+12-13 above) *	49,369
15. Outstanding debts (Line 2 + Line 8 of Column C above) .....	
16. Ending surplus (if Line 14 is greater than Line 15, subtract Line 15 from Line 14) .....	\$ 49,369
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .....	\$ ( )

\* Ending cash on hand should not be a negative amount

18. CASH EQUIVALENTS (OTHER ASSETS HELD) (See Instructions on Reverse) \$

## SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)

19. CONTRIBUTIONS RECEIVED:		
20. EXPENDITURES MADE:		



**SCHEDULE A**

**MONETARY CONTRIBUTIONS RECEIVED  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OF TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
3/22/85	Ag Council of Calif. ID# 761092 P.O. Box 831 Sacramento CA 95804	PAC		350	350
3/22/85	Alta-Dena Dairy P.O. Box 388 City of Industry CA 91747 ID #830257	PAC		350	350
5/1/85	CAAA PAC ID# 791057 5999 Freeport Blvd. Sacramento CA 95822	PAC		350	350
5/1/85	CAC PAC ID# 790689 P.O. Box 254490 Sacramento CA 95865	PAC		350	350
3/22/85	CAM PAC ID# 742403 6336 Wilshire Blvd. Los Angeles CA 90048	PAC		350	350
3/29/85	Calif. Auto Dealers Assn. ID# 741623 1127 11th St. STe. 728 Sacramento CA 95814	PAC		500	500
5/12/85	Calif. Dental PAC ID# 742855 1225 8th St. #550 Sacramento CA 95814	PAC		100	800
<b>SUBTOTAL</b>				2,350	

☒ If more space is needed, check box at left  
and attach additional Schedules A.

**SUMMARY**

1. AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals) .....	\$ 16,299	
2. AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized) .....	4,535	
3. TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page .....	\$ 20,834	



# SCHEDULE A

## MONETARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 3/18/85 THROUGH 5/18/85

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)  
790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
5/1/85	Calif. Farm Bureau Fed. ID# 760960 1601 Exposition Blvd. Sacramento CA 95815	PAC		350	350
3/25/85	Calif. Correctional Peace Officers Assn. ID# 830349 530 Bercut Dr. Ste. M Sacramento CA 95814	PAC		1,000	1,000
1/29/85	Calif. Court Reporters AKA PACCRA 1127 11th St. Ste. 234 Sacramento CA 95814	PAC		350	350
7/25/85	Calif. Grain & Feed PAC ID# 810430 510 Bercut Drive Sacramento CA 95814	PAC		500	500
5/5/85	Calif. Grocers ID# 760914 1400 K Street Ste. 208 Sacramento CA 95814	PAC		350	350
3/25/85	Calif. Medical PAC ID# 742617 44 Gough St. San Francisco CA 94103	PAC		350	350
5/2/85	Calif. Restaurant Assn. ID# 742541 1225 8th St. Ste. 325 Sacramento CA 95814	PAC		350	350
5/16/85	Calif. Unitary Coalition 444 W. Beech St. Ste. 4000 San Diego CA 92101	PAC		350	350
4/29/85	Certified Public Accts. ID# 782601 1225 8th St. Ste. 550 Sacramento CA 95814	PAC		500	500
3/22/85	Crocker National Corp. 1 Montgomery St. San Francisco CA 94104	Banking		250	250
5/12/85	Farmer's Rice Cooperative P.O. Box 696 West Sacramento CA 95691	Coop.		500	500

☒ If more space is needed, check box at left  
and attach additional Schedules A.

SUBTOTAL

4,850

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
 FROM 3/18/85 THROUGH 5/18/85

**NAME OF CANDIDATE OR COMMITTEE:**

**I.D. NUMBER (IF COMMITTEE)**  
 790456

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
3/22/85	Federated Fire Fighters of Calif. 300 T Street Sacramento CA 95814			250	250
4/29/85	Humana Inc. 450 Newport Center Dr. Ste. 550 Newport Beach CA 92660			750	750
4/29/85	Penta Investment Corp. 9610 Ridgehaven Ct. San Diego CA 92123			350	350
4/29/85	Shell Oil Good Govt. Fund Oil Co. P.O. Box 2463 Houston TX 77001			350	350
3/22/85	State & Local Citizenship Responsibility Group ID# 742227 2244 Walnut Grove Ave. Rosemead CA 91770			500	500
3/29/85	The Tobacco Institute 1225 8th Street Sacramento CA 95814	Tobacco Co.		500	500
4/29/85	Western Manufactured Housing ID# 781951 3855 E. La Palma Ave. Anaheim CA 92807		Pac	350	350
4/6/85	ABT, Inc. P.O. Box 727 Maxwell CA 95955	Trucking	Self	250	750
4/29/85				250	
4/6/85	Agriculture Advisors Inc. P.O. Box Box 952 Yuba City CA 95991	Advisors	Self	100	100
5/12/85	Akin Ranch P.O. Box 196 Robbins CA 95676	Farming	Self	100	100
3/22/85	Almont Orchards 3108 Burdick Rd Chico CA 95926	Farming	Self	300	300

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL**

4,050

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 3/18/85 THROUGH 5/18/85  
 I.D. NUMBER (if committee)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
7/16/85	H. A. Andreotti P.O. Box 298 Colusa CA 95932	Trucking	Self	250	250
7/23/85 7/16/85	Frank M. Booth 519 D St Marysville CA 95901	Mechanical	Contractors	250 250	500
7/1/85	Ken Charter Rt. 1 Box 62 Arbuckle CA 95912	Farming	Self	100	100
7/6/85	Downey Clinch 506 Linden Ave. Grass Valley CA			100	100
7/10/85	Carol Crain 106 Charles Grass Valley CA			100	100
7/11/85	Colusa Co. Republican Colusa CA 95932	Women Fed.		499	499
7/16/85	Lex Daoust P.O. Box 1071 Marysville CA 95901	New Car Dealer	Self	100	100
7/25/85	Lester Doty 1168 Bridge St Yuba City CA 95991	Liquor Store Owner	Self	100	100
7/1/85	Dale Green 1548 Market St. Yuba City CA 95991	Contractor	Self	100	100
7/10/85	Karsten Hansen P.O. Box 2 Grass Valley CA 95945	Trucking	Self	100	100
7/12/85	Gerald Harter 5444 Larkin Rd Live Oak CA 95953	Farmer	Self	100	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

SUBTOTAL

2,049

# SCHEDULE A

## METARY CONTRIBUTIONS RECEIVED

(CONTINUATION SHEET)

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

3/18/85 5/18/85

I.D. NUMBER (IF COMMITTEE)

790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
4/17/85	Ernest Hatch 348 River View Drive. Oroville CA 95965	Rice Grower	Self	100	100
4/20/85	James Higgins 12225 Lakeshore Drive Auburn CA 95603			100	100
7/15/85	Fred T. Huntington P.O. Box 991 Oroville CA 95965	Retired	Retired	100	100
9/1/85	Juanita Kelly PO Box 1494 Marysville CA 95901			100	100
7/12/85	Charles L. Larsen 771 Buschman Rd PARADISE CA	Dentist	Self	100	100
4/18/85	James Leathers 922 Elm St. Woodland CA 95695	Farmer	Self	100	100
7/16/85	Eugene Muttersback 613 Market ST Colusa CA 95932	Attorney	Self	100	100
9/1/85	Neill Mitchell 1900 Feather River Blvd. Marysville CA 95901	Farming	Self	100	100
5/3/85	Mary Newton 300 Niltell St Grass Valley CA 95959	Housewife	None	100	100
4/18/85	Ralph Nissen P.O. Box 216 Williams CA 95987	Farming	Self	100	100
4/19/85	L.A. Otterson P.O. Box 731 Colusa CA 95932	Farmer	Self	100	100



If more space is needed, check box at left  
and attach additional Schedules A.

SUBTOTAL

1,100

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 3/18/85 THROUGH 5/18/85  
 I.D. NUMBER (IF COMMITTEE)  
 790456

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE RECD	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
120/85	Paul Peterson 1075 Woodland Ave nico CA 95926			100	100
122/85	Ralph Priest 10210 Horest Spgs. Drive Grass Valley CA 95945			100	100
112/85	Wally Reemelin			100	100
715/85	Frank Rehmann P.O. Box 6 Live Oak CA 95953	Farming	Self	100	100
110/85	Dell Riebe 129 Idaho-Maryland Rd Grass Valley CA 95945	Auto Supplies	Self	250	250
110/85	Alfred Sadler 651 Cassidy Yuba City CA 95991	Cleaning	Self	200	200
128/85	Franklin Schoellerman 13553 Lakeview Place Auburn CA 95603			100	100
116/85	F. W. Sellman P.O. Box 1299 ParADISE CA 95969			100	100
116/85	Fred Shaeffer 10850 Oroville Hwy Marysville CA 95901	Farming	Self	100	100
4/6/85	Earll Shine 200 Jan Road Grass Valley CA 95945			100	100
4/6/85	James Taylor 12819 Torry Pines Drive Auburn CA 95603			100	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL**

**1,350**

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
1/22/85	Edward Thomas 11994 Torrey Pine Drive Auburn CA 95603			100	100
1/1/85	N. R. Travis P.O. Box 1467 West Sacramento CA 95691	Warehouse Exec.	2080 Enterprise Blvd. West Sacramento	150	150
1/16/85	Deane Williams 3288 Larkin Rd Biggs CA 95917	Retired	Retired	100	100
3/30/85	Milton Wilson 3601 Manzanita Rd Lincoln CA 95648			100	100
5/23/85	Arden Ziegenmeyer 7317 Barrow St. Sutter CA 95982			100	100
SUBTOTAL				550	

☐ If more space is needed, check box at left  
and attach additional Schedules A.



# SCHEDULE B

## LOANS

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM THROUGH

3/18/85 5/18/85

I.D. NUMBER (IF COMMITTEE)

790456

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

### PART 1 - LOANS RECEIVED

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (IF COMMITTEE, ALSO ENTER I.D. NUMBER OF TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	INT. RATE	AMOUNT OF LOAN	CUMULA- TIVE TO DATE

☐

If more space is needed, check box at left  
and attach additional Schedules B, Part 1.

SUBTOTAL

### PART 2 - LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY:

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAID	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
		(a)	(b)		

☐

If more space is needed, check box at  
left and attach additional Schedules B,  
Part 2.

SUBTOTAL

### SUMMARY

1. LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$ 0	
2. LOANS UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)		0
4. LOANS OF \$100 OR MORE REPAID THIS PERIOD (Part 2, Column (a))	0	
5. LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))	0	
6. LOANS UNDER \$100 REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)	0	
7. TOTAL LOANS REPAID, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)		0
8. NET CHANGE THIS PERIOD (Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page		\$ 0

(May be  
negative figure)

**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMU- LATIVE AMOUNT

☐ If more space is needed, check box at left  
and attach additional Schedules C.

**SUBTOTALS**

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD. ....	\$	0
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). ....		0
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....		\$ 0

**SCHEDULE D**

**PLEDGES**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

<b>STATEMENT COVERS PERIOD</b>	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID <small>(also enter on Schedule A)</small>	CUMU- LATIVE PLEGGE UNPAID
SUBTOTALS				(a)	(b)	

704015333

☐ If more space is needed, check box at left and attach additional Schedules D.

**SUMMARY**

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.		\$ 0

(May be  
negative figure)

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
3 Hilde Swinehart 941 Richland Rd 5 Yuba City CA 95991	G		1,395
5 Brennan's Restaurant 1117 11th Street Sacramento CA 95814			155
4 Peggy Bristow 1590 Spencer Lane 7 Yuba City	G		545
8 IRS 5045 E. Butler Ave. Fresno CA 93888	G		116
Bonanza Inn Yuba City CA 95991	G		161
SUBTOTAL			2,372

☒ If more space is needed, check box and attach additional Schedules E.

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the Allocation section at the front of the campaign statement.

**SUMMARY**

- |   |          |
|---|----------|
| 1. Payments of \$100 or more made this period (Include all Schedule E Subtotals)                  | \$ 4,675 |
| 2. Payments under \$100 this period (not itemized)  | \$ 792   |
| 3. Total Accrued Expenses paid this period (Schedule F, Line 4)                                   | \$       |
| 4. Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page | \$ 5,467 |

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Grass Valley Computers 5995 Lindhurst Ave. Marysville CA 95901	G		327
Holiday Inn Boston MA	T		127
United Airlines Sacramento CA	T		1,192
Giselles Travel Sacramento CA	T		419
Bank of America - Visa P.O. Box 37129 San Francisco CA 94137	G		238
SUBTOTAL			2,303

☐ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE F**  
**ACCRUED EXPENSES**  
**(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
3/18/85	5/18/85
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

If one of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT ACCRUED
SUBTOTAL		

☐ If more space is needed,  
check box, and attach additional Schedules F

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been re-reported in a previous period.

**SUMMARY**

1. Accrued Expenses of \$100 or More This Period	\$ 0
2. Accrued Expenses of Under \$100 This Period (Not Itemized)	0
3. Total Accrued Expenses Incurred This Period (Line 1 + 2)	0
4. Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3	0
5. Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column B of Summary Page	0

(May be  
negative figure)



**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
**FROM** 3/18/85 **THROUGH** 5/18/85  
**I.D. NUMBER (IF COMMITTEE)**  
 790456

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE	NAME AND ADDRESS OF SOURCE (IF RECEIPT) OR PAYEE (IF EXPENDITURE) (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	DESCRIPTION OF ADJUSTMENT	AMOUNT OF	
			INCREASE TO CASH	DECREASE TO CASH
4/26/85	State of Calif. Sacramento CA	Refund from State for State Business.	1,192	
5/1/85	Grass Valley Computers 5995 Lindhurst Ave. Marysville CA 95901	Refund - overpayment on computer	3,968	
5/17/85	Interest to all Bank Accounts		302	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules G			<b>SUBTOTAL</b>	
			(a) 5,462	(b)

**SUMMARY**

1. INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 5,462	
2. INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	1	
3. TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		5,463
4. DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	0	
5. DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	8	
6. TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		8
7. TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		5,455

(May be negative figure)



**CONSOLIDATED  
CAMPAIGN STATEMENT**  
(Government Code Sections 84200-84217)

**RECEIVED  
AND FILED**  
In the office of the Secretary of State  
of the State of California

Form 490  
1984

For use by candidates/officeholders and their controlled committees.

(Type or Print in Ink)

Statement covers period from 10-21-84 through 12-31-84

FEB 01 1985  
MARCH 1985  
OFFICIAL USE ONLY

DATE OF ELECTION (MO., DAY, YR.) (if applicable):

TOTAL PAGES:

22

**CANDIDATE/OFFICEHOLDER INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF CANDIDATE: <u>Wally Herger</u>				OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) <u>Assembly-Third District</u>		
RESIDENTIAL ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>120 Fourth Avenue</u>	<u>Rio Oso</u>	<u>California</u>	<u>95674</u>	<u>916</u>	<u>633-4543</u>
BUSINESS ADDRESS:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>State Capitol</u>	<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>916</u>	<u>445-7298</u>

**CONTROLLED COMMITTEES\* INCLUDED IN THIS CONSOLIDATED REPORT**

NAME OF COMMITTEE: <u>Friends of Wally Herger for Assembly</u>						I.D. NUMBER <u>790456</u>
ADDRESS OF COMMITTEE:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>P.O. Box 123</u>	<u>Yuba City</u>	<u>CA</u>	<u>95991</u>		
NAME OF TREASURER: <u>Leonard Meyer</u>						
PERMANENT ADDRESS OF TREASURER:	NO. AND STREET	CITY	STATE	ZIP CODE	AREA CODE	PHONE NUMBER
	<u>812 F Street</u>	<u>Marysville</u>	<u>CA</u>	<u>95901</u>	<u>916</u>	<u>742-8869</u>
NAME OF COMMITTEE:						I.D. NUMBER
ADDRESS OF COMMITTEE:						PHONE NUMBER
NAME OF TREASURER:						
PERMANENT ADDRESS OF TREASURER:						

Attach additional information on appropriately labeled continuation sheets.

**CANDIDATE/OFFICEHOLDER ONLY: LIST ANY OTHER COMMITTEES NOT INCLUDED IN THIS CONSOLIDATED STATEMENT WHICH ARE CONTROLLED BY YOU OR ARE PRIMARILY FORMED TO RECEIVE CONTRIBUTIONS OR MAKE EXPENDITURES ON BEHALF OF YOUR CANDIDACY.**

COMMITTEE NAME AND I.D. NUMBER	COMMITTEE ADDRESS	TREASURER	Controlled Committee?*	
			YES	NO

Attach additional information on appropriately labeled continuation sheets.

A controlled committee is one which is controlled directly or indirectly by a candidate or which acts jointly with a candidate or controlled committee in connection with the making of expenditures. A candidate controls a committee if the candidate, the candidate's agent, or any other committee he or she controls, has significant influence on the actions or decisions of the committee.)

**VERIFICATION**

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and that I have used all reasonable diligence in their preparation.

Executed on 1-29-85 at Marysville, Ca by Leonard R. Meyer  
(Date) (City and State) (Signature of Treasurer(s))

I declare under penalty of perjury that to the best of my knowledge this statement and its schedules are true, correct and complete and the treasurer(s) of this committee(s) has used all reasonable diligence in the preparation of this statement and its schedules.

Executed on 1-25-85 at Yuba City, Ca by Wally Herger  
(Date) (City and State) (Signature of Candidate(s) or Officeholder(s))

For information required to be provided to you pursuant to the Information Practices Act of 1977, see "Information Manual on Campaign Disclosure Provisions of the Political Reform Act," Part X.

**IV ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES** (Allocate expenditures from Schedules E & F made to or on behalf of another candidate, officeholder or measure. Amounts may be rounded off to whole dollars.)

OFFICIAL USE ONLY	DATE	NAME OF CANDIDATE OR OFFICEHOLDER AND OFFICE OR MEASURE AND BALLOT NUMBER OR LETTER	CHECK ONE		AMOUNT	CUMULATIVE TO DATE
			Support	Oppose		
	12-31				0	0

Attach additional information on appropriately labeled continuation sheets.

**INSTRUCTIONS FOR PREPARING COVER PAGE  
CONSOLIDATED CAMPAIGN STATEMENT  
FORM 490**

**PERIOD COVERED BY STATEMENT:**

The period covered begins the day after the closing date of the last campaign statement filed. If a previous statement has not been filed, the period begins on January 1 of the current calendar year. The period ends on the closing date for the current statement. The closing date is specified in the "Information Manual on Campaign Disclosure."

**DATE OF ELECTION:**

If this statement is filed in connection with an election held on a date other than June 5 or November 6, enter the date of the election.

**PART I:**

Provide the candidate's or officeholder's full name, residential address, business address and telephone numbers, and the office sought or held.

**PART II:**

Identify the controlled committees included in the consolidated report and the treasurers of the committees. Use the same information that appears on the committees' Statements of Organization filed with the Secretary of State. Do not use abbreviations. A permanent business or residential address must be provided for the treasurers. The identification numbers must be included. (If not yet received from the Secretary of State's office, that fact must be noted.)

**PART III:**

The candidate or office holder must list all additional committees not included in this consolidated report which are controlled by the candidate or officeholder or are primarily formed to receive contributions or make expenditures on the candidate's behalf and whether or not they are controlled committees.

**VERIFICATION:**

The statement must be signed by each committee treasurer included in the consolidated report and by the candidate or officeholder who controls the committee. The treasurer and candidate or officeholder must review the information contained in the statement before signing the verification.

**ALLOCATION OF CONTRIBUTIONS AND EXPENDITURES MADE TO OR ON BEHALF OF OTHER CANDIDATES, OFFICEHOLDERS AND MEASURES:**

List all contributions (including loans) and independent expenditures itemized on Schedules E and F to support or oppose officeholders, candidates and ballot measures (other than those controlling this committee or for which this committee is primarily formed). Indicate the date of the expenditure, the office sought or held (or the measure's number or letter and the jurisdiction), the amount of the expenditure and the cumulative amount to date. The "Cumulative to Date" column should include the total of expenditures for or against each candidate or measure since January 1 of the current calendar year. (See "Information Manual on Campaign Disclosure" for discussion and examples of "cumulation".)

870405339

**CAMPA DISCLOSURE STATEMENT SUMMARY PAGE**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE  
**Friends of Wally Herger for Assembly**

	COLUMN A Cumulative total from previous period*	COLUMN B Total this period from attached schedules	COLUMN C Cumulative to date (Columns A + B)
<b>CONTRIBUTIONS RECEIVED</b>			
1. Monetary contributions .....	\$ 143,085	\$ 23,718 <small>SCHEDULE A, LINE 3</small>	\$ 166,803
2. Loans .....	0	0 <small>SCHEDULE B, LINE 8</small>	0
3. Subtotal .....	\$ 143,085 <small>LINES 1 + 2</small>	\$ 23,718 <small>LINES 1 + 2</small>	\$ 166,803 <small>LINES 1 + 2</small>
4. Non-monetary contributions .....	2,465	4,158 <small>SCHEDULE C, LINE 3</small>	6,623
5. Pledges .....	0	0 <small>SCHEDULE D, LINE 7</small>	0
6. TOTAL CONTRIBUTIONS .....	\$ 145,550 <small>LINES 3 + 4 + 5</small>	\$ 27,876 <small>LINES 3 + 4 + 5</small>	\$ 173,426 <small>LINES 3 + 4 + 5 (SHOULD EQUAL LINE 6, COLUMN A + B)</small>
<b>EXPENDITURES MADE</b>			
7. Payments .....	\$ 115,909	\$ 98,010 <small>SCHEDULE E, LINE 4</small>	\$ 213,919
8. Accrued expenses (unpaid bills) .....	0	0 <small>SCHEDULE F, LINE 8</small>	0
9. TOTAL EXPENDITURES .....	\$ 115,909 <small>LINES 7 + 8</small>	\$ 98,010 <small>LINES 7 + 8</small>	\$ 213,919 <small>LINES 7 + 8 (SHOULD EQUAL LINE 9, COLUMN A + B)</small>

\*If this is the first report filed for the calendar year, Column A should be blank except for unpaid loans, bills and pledges.

**STATEMENT OF CHANGES IN FINANCIAL CONDITION**

10. Cash on hand at the beginning of this period. (Line 14 of previous statement) .	\$ 87,399
11. Cash receipts this period (Line 3, Column B above) .....	23,718
12. Miscellaneous adjustments to cash (Schedule G, Line 7) .....	1,243
13. Cash payments this period (Line 7, Column B above) .....	98,010
14. Cash on hand at closing date (Lines 10+11+12-13 above)* .....	14,350
15. Outstanding debts (Line 2 + Line 8 of Column C above) .....	
16. Ending surplus, (if Line 14 is greater than Line 15, subtract Line 15 from Line 14). .....	\$ 14,350
17. Ending deficit (if Line 15 is greater than Line 14, subtract Line 14 from Line 15) .....	\$ ( )

\*Ending cash on hand should not be a negative amount.

**SUMMARY FOR CANDIDATES IN BOTH A JUNE AND NOVEMBER ELECTION (See Instructions on Reverse)**

	1/1 thru 6/30	7/1 to date
18. CONTRIBUTIONS RECEIVED:		
19. EXPENDITURES MADE:		

9704053340

**SCHEDULE A**

**MONETARY CONTRIBUTIONS RECEIVED  
FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

				STATEMENT COVERS PERIOD FROM 10-21 THROUGH 12-31-84	
NAME OF CANDIDATE OR COMMITTEE: Friends of Wally Herger for Assembly				I.D. NUMBER (if committee) 790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
0-29	ALPAC P.O. Box 58407 Los Angeles, CA 90058	PAC	761392	350	350
0-29 1-1	Assn. General Contractors 301 Capitol Mall, ste. 402 Sacramento CA 95814	PAC	771604	2,000	2,000
1-6	Atlantic-Richfield Disb. Public Affairs Box 2679 T.A. Los Angeles CA 90051	Oil Disb.	Self	500	500
1-2	CAGE-PAC 1802 C Street Sacramento CA 95808	PAC	771333	250	250
5-7	CAHFPAC 1401 21 st Street Ste. Sacramento CA 95814	202 PAC	741816	400	1,000
9-6	CAP-Trust Legislative Comm. 3550 Wilshire Blvd. #1801 Los Angeles CA 90010	PAC	760951	200	200
9-2	CAWG-PAC 926 J St. Ste. 709 Sacramento CA 95814	PAC	801893	100	100
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules A.				<b>SUBTOTAL</b>	3,800

**SUMMARY**

AMOUNT RECEIVED - CONTRIBUTIONS OF \$100 OR MORE (Include all Schedule A subtotals)	\$ 22,463
AMOUNT RECEIVED - CONTRIBUTIONS OF LESS THAN \$100 (Not itemized)	1,255
TOTAL MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + Line 2) Enter here and on Line 1 Column B of Summary Page	\$ 23,718

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE: FRIENDS OF WALLY HERGER FOR ASSEMBLY				I.D. NUMBER (if committee) 790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number on treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
0-24	Calif. Housing Council 1225 8th Street Sacramento CA 95814	PAC	746544	350	350
7-8	Calif. Medical PAC 44 Gough Street San Francisco CA 94103	PAC	742617	3,000	3,700
0-24	Calif. Optometric PAC P.O. Box 2591 Sacramento CA 95814	PACX	745825	500	1,200
0-24	Calif. Rice Industry Comm. Fund 335 Teegarden Street Yuba City CA 95991	Rice Disb.	Self	400	400
1-25	Californians Against Waste 1228 N St. # 26 Sacramento CA 95814	PAC	841877	100	100
5-7	Castle & Cooke Inc. P.O. Box 7330 San Francisco CA 94120-7330	Requested	Requested	1,000	1,000
7-7	Cling Peach for Equal Gov. 3704 Mt. Diablo Blvd. Ste. 215 Lafayette CA 94549	PAC	744129	300	300
12-20	CREPAC (Sutter-Yuba BORPAC) 525 So. Virgil Ave. Los Angeles, CA 90020	PAC	742276	100	100
10-24	Dairy Institute 11 th & L Bldg. Ste. 718 Sacramento CA 95814	PAC	741436	150	500
11-1	Evergreen Assn. 3000 Sand Hill Rd. 11, Ste. 140 Menlo Park, CA 94025-7193	Requested	Requested	500	1,000
10-29	Farmers Group Inc. 4680 Wilshire Blvd. Los Angeles, CA 90014	Insurance Co	Self	250	250
<b>SUBTOTAL</b>				<b>6,650</b>	

☐ If more space is needed, check box at left  
 and attach additional Schedules A.



**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE:  
**RIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)  
**790456**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
0-31	Greater Anesthesia Service 100 So. Ellsworth # 806 San Mateo CA 94401	PAC	760981	500	1,200
1-4	Harness Horseman PAC 2222 Meyers Ave. Escondido CA 92025	PAC	782183	500	500
1-25	Loggers Better Gov. Comm. 555 Capitol Mall, Ste. 745 Sacramento CA 95814	PAC	746418	500	500
1-26	Pacific Gas & Electric Co. Employees Good Govt. Fund 77 Beale Street San Francisco CA 94106	Electric Co.	Self	150	400
1-31	Pacific Merchant Shipping Assn. 1 Maritime Plaza San Francisco CA 94111	PAC	811858	300	300
1-10	Kohm & Haas Calif. Inc. P.O. Box 3188 Hayward CA 94540	Requested	Requested	500	500
1-20	SEAPAC Superior Employees Ag. Box 9999 Bakersfield CA 93389	PAC	77-0017996	250	250
1-9	Southern Milk Producers P.O. Box 1296 Chino CA 91710	PAC	782156	200	575
1-24	Sunsweet Growers, Inc. 1050 S. Diamond St. Stockton CA 95201	PAC	802394	500	500
1-30	Tenneco Oil Co. P.O. Box 9380 Bakersfield CA 93389	Oil Co.	Self	500	500
1-30	Tenneco West, Inc. P.O. Box 9380 Bakersfield CA 93389	Oil Co.	Self	500	500
SUBTOTAL				4,400	

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE:				I.D. NUMBER (if committee)	
FRIENDS OF WALLY HERGER FOR ASSEMBLY				790456	
DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(if committee, also enter I.D. number or treasurer's name and address)</small>	OCCUPATION	EMPLOYER <small>(if self-employed, enter name of business)</small>	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
11-29	Tri-Valley Growers for 100 Calif. Street San Francisco CA 94106	Responsible Gov.  PAC	  760487	1,000	1,000
1-4	Wine Institute Fund 165 Post Street San Francisco CA 94108	PAC	743161	200	200
1-24	Summa Corp. P.O. Box 14000 Las Vegas, Nevada 89156	PAC	Self	150	500
1-24	John Abele Box 2 Arbuckle CA 95912	Farming	Self	50	100
1-6	H A Andreotti Box 298 Colusa CA 95932	Farming	Self	500	750
1-29	Don Beck P.O. Box 79 Tahoe Vista CA 95732	Realtor	Self	50	150
1-1	W. H. Beduhn 436 Market Street Colusa CA 95932	Accounting	Self	50	100
1-24	Frank M. Booth 519 D Street Marysville CA 95901	Mechanical Contractor	Self	500	1,040
1-4	Richard Boyer MD P.O. Box 667 Yuba City CA 95991	Doctor	Self	500	778
1-24	George C. Carter, Jr. P.O. Box 308 Chico CA 95926	Retired	Retired	100	100
1-2	Colusa County Republican P.O. Box 269 Colusa CA 95932	Central Comm.  Republican Comm.	Self	500	500
<b>SUBTOTAL</b>				3,600	

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE:

**RIENDS OF WALLY HERGER FOR ASSEMBLY**

I.D. NUMBER (IF COMMITTEE)

790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
1-4	L. C. Dennis P.O. Box 368 Maxwell CA 95955	Farming	Self	100	325
1-2	Steven Dennis P.O. Box 368 Maxwell CA 95955	Farmign	Self	100	100
1-7	John Floyd, MD 2721 Olive Hwy, Ste. 3 Oroville CA 95965	Doctor	Self	50	100
2-20	Foothill Ambulance Service P.O. Box 177 Citrus Heights CA 95611	Ambulance Service	Self	250	500
3-31	Arthur & Gron Gilstrap 11163 Township Road Live Oak CA 95953	Farming	Self	100	350
3-30	Harris Rice Enterprise P.O. Box 248 Richvale CA 95974	Rice Farming	Self	500	1,040
8-24	J. W. Hill 548 Winslow Drive Yuba City CA 95991	Retired	Retired	250	500
8-24	Charles Huntington 122 Pine Oaks Road Oroville CA 95965	Sporting Goods Owner	Self	100	100
10-30	Jopson Ranch 1255 Pleasant Grove Road Wheatland CA 95692	Farming	Self	18	1,178
10-26	McGowan & McGowan P.O. Box 3637 Chico CA 95927	Farmers	Self	150	150
10-24	Glenn Mahis 17610 Pacheco Pass Hwy Hollister CA 95023	Farming	Self	50	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

**SUBTOTAL**

1,668

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE:  
 FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
1-1	Robert Mohammed 1857 So. Butte Road Yuba City CA 95991	Farming	Self	150	150
1-20	Richard Morgan M.D. 18 Williamsburg Lane Chico CA 95926	Doctor	Self	100	350
0-3-	James Moulder 965 Malick Ave. Yuba City CA 95991	Realtor	Self	100	100
0-31	Elva Niles 929 Carson Colusa CA 95932	Retired	Retired	20	270
0-31	Pro-Flame 250 Bel Marin Keys Ste. Novato CA 94947	40 Gas Dealers	Self	25	125
0-25	Don Richter 750 Oro Dam Blvd. Oroville CA 95965	Farming	Self	50	328
0-24	Dell Riebe 129 Idaho-MARYLAND Road Grass Valley CA	Auto. Supplies	Self	250	540
0-1	G. W. Rienks, Jr. P.O. Box 988 Marysville CA 95901	Retired	Retired	50	106
1-2	Scheidel & Osterli 1510 W. Catlett Road Pleasant Grove CA 95668	Farmers	Self	125	125
0-25	Kewal Singh 932 Mesa Drive Yuba City CA 95991	Farmer	Self	100	100
0-25	Clarence Summy 4550 Railroad Ave. Yuba City CA 95991	Retired	Retired	100	100

☒ If more space is needed, check box at left  
 and attach additional Schedules A.

SUBTOTAL

1,070

**SCHEDULE A**  
**MONETARY CONTRIBUTIONS RECEIVED**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
 FROM 10-21-84 THROUGH 12-31-84

NAME OF CANDIDATE OR COMMITTEE:  
 FRIENDS OF WALLY HERGER FOR ASSEMBLY

I.D. NUMBER (IF COMMITTEE)  
 790456

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)	OCCUPATION	EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT	
				RECEIVED	CUMULATIVE TO DATE
3-24	Sweco Products, Inc. P.O. Box 259 Sutter CA 95982	Ag. Equip.	Self	225	225
1-7	N. R. Travis P.O. Box 1467 West Sacramento CA 95691	Warehouse Exec.	2080 Enterprise Blvd. West Sacramento	150	250
0-24	David Wheeler 515 Windsor Drive Yuba City CA 95991	New Car Dealer	Self	500	1,000
3-31	Charles Yates P.O. Box 808 Colusa CA 95932	Farmer	Self	50	328
3-20	Yuba Co. Republican Comm. P.O. Box 333 Marysville CA 95901	REpublican Comm.	Self	100	100
4-24	Yuba Co. Republican Women Federation 1320 D. St., #3 Marysville CA 95901	Republican	Self	100	100
7-2	Bruce B. Yurman 7990 Via Roma Drive Fair Oaks CA 95628	Atty.	State of Calif. Sacramento CA	150	150

☐ If more space is needed, check box at left and attach additional Schedules A.

SUBTOTAL 1,275



**SCHEDULE B**

**LOANS**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

**STATEMENT COVERS PERIOD**  
FROM 10-21-84 THROUGH 12-31-84

**NAME OF CANDIDATE OR COMMITTEE:**

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**I.D. NUMBER (if committee)**  
790456

**PART 1 - LOANS RECEIVED**

DATE REC'D	FULL NAME AND ADDRESS OF LENDER AND ANY GUARANTORS OR COSIGNERS (if committee, also enter I.D. number on treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	INT. RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 1.					<b>SUBTOTAL</b>	0

**PART 2 - LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY:**

DATE	FULL NAME AND ADDRESS OF THE LENDER	(a) AMOUNT REPAYED	ENTER THIS DATA ON SCHEDULE A ALSO		UNPAID BALANCE
			(b) AMOUNT FORGIVEN OR PAID BY THIRD PARTY	THIRD PARTY NAME AND ADDRESS	
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules B, Part 2.		(a)	(b)		
<b>SUBTOTAL</b>					

**SUMMARY**

LOANS OF \$100 OR MORE THIS PERIOD (Part 1)	\$	0
LOANS UNDER \$100 THIS PERIOD (Not itemized)		0
TOTAL LOANS RECEIVED THIS PERIOD (Line 1 + 2)		0
LOANS OF \$100 OR MORE REPAYED THIS PERIOD (Part 2, Column (a))		0
LOANS OF \$100 OR MORE THIS PERIOD FORGIVEN OR PAID BY A THIRD PARTY (Part 2, Column (b))		0
LOANS UNDER \$100 REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Not itemized) (Also enter this amount on Line 2 of Summary section of Schedule A)		0
TOTAL LOANS REPAYED, FORGIVEN OR PAID BY A THIRD PARTY THIS PERIOD (Line 4 + 5 + 6)		0
NET CHANGE THIS PERIOD		
(Subtract Line 7 from Line 3) Enter the difference here and on Line 2, Column B of Summary Page	\$	0

(May be negative figure)



**SCHEDULE C**  
**NON-MONETARY CONTRIBUTIONS RECEIVED**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**RIENDS OF WALLY HERGER FOR ASSEMBLY**

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER OR TREASURER'S NAME AND ADDRESS)</small>	OCCUPATION	EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	DESCRIPTION OF GOODS OR SERVICES	FAIR MARKET VALUE RECEIVED	CUMULATIVE AMOUNT
10-6&7 1984	P & M Cedar Products, Inc. See Attached			Transportation Food & Lodging	658	658
11-1- 1984	Ralph Amado 9777 Wilshire Blvd. #1018 Beverly Hills, CA 90212	Republican	Attorney American Zionist	Israel Trip st Assn.	3,500	3,500
<b>SUBTOTALS</b>					4,158	

☐ If more space is needed, check box at left and attach additional Schedules C.

**SUMMARY**

1. NON-MONETARY CONTRIBUTIONS OF \$100 OR MORE THIS PERIOD. ....	\$	4,158	
2. NON-MONETARY CONTRIBUTIONS UNDER \$100 THIS PERIOD (Not itemized). ....		0	
3. TOTAL NON-MONETARY CONTRIBUTIONS THIS PERIOD (Line 1 + 2) Enter here and on Line 4, Column B of Summary Page .....		4,158	\$



Camryn Report

## P&M Cedar Products, Inc.

October 22, 1984

Assemblyman Wally Herger  
State Capitol  
Sacramento, CA 95814

Dear Wally:

Thank you for taking time out of your busy schedule to join me and other members of the California Licensed Foresters' Association (CLFA) at Mount Shasta last July 6 & 7. On behalf of P & M Cedar Products and the other sponsors of this event, we were glad to have the opportunity to show you, first hand, the practice of modern forest management.

The transportation, food and lodging associated with the Mt. Shasta trip should be reported on your Statement of Economic Interests (Schedule F) as follows:

Recipients: Wally & Pam Herger

Dates of Gift: July 6-7, 1984

Value of Gift: \$658.48

Description: Transportation, food & lodging.

Donors

P & M Cedar Products, Inc., P.O.Box 7349, Stockton, CA 95207

Roseburg Lumber, Drawer #7, Mt. Shasta, CA 96067

Fruit Growers Supply Company, Star Route, Box 440, Hilt, CA 96044

Champion International Corp., P.O.Drawer D, McCloud, CA 96057

Hearst Corporation, Forestry Division, 309 North "C" Street,  
Mt. Shasta, CA 96067

Paul Bunyon Lumber Company, P.O.Drawer 487, Anderson, CA 96007

Louisiana Pacific, P.O.Box 158, Samoa, CA 95564

All donors are in the "forest products industry" and shared equally in the cost of the gift. If you have any questions concerning this matter, please do not hesitate to contact my office.

Very truly yours,

Jon Reed

Registered Professional Forester

RECEIVED OCT 1 1984

OCT 30 1984

P. O. Box 7349, Stockton, California 95207 (209) 957-2802

# SCHEDULE D

## PLEDGES

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD

FROM THROUGH

10-21-84 12-31-84

I.D. NUMBER (if committee)

790456

NAME OF CANDIDATE OR COMMITTEE:

RIENDS OF WALLY HERGER FOR ASSEMBLY

DATE REC'D	FULL NAME AND ADDRESS OF CONTRIBUTOR (if committee, also enter I.D. number or treasurer's name and address)	OCCUPATION	EMPLOYER (if self-employed, enter name of business)	AMOUNT PLEGGED THIS PERIOD	AMOUNT PAID (also enter on Schedule A)	CUMU- LATIVE PLEGGE UNPAID
<input type="checkbox"/> If more space is needed, check box at left and attach additional Schedules D.				(a)	(b)	
SUBTOTALS				0	0	

### SUMMARY

1. PLEDGES OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 0	
2. PLEDGES UNDER \$100 THIS PERIOD (Not itemized)	0	
3. TOTAL PLEDGES RECEIVED (Line 1 + 2)		0
4. PLEDGES OF \$100 OR MORE PAID THIS PERIOD (Column (b))	0	
5. PLEDGES UNDER \$100 PAID THIS PERIOD (Not itemized) (Also enter on Line 2 of the summary section of Schedule A)	0	
6. TOTAL PLEDGES PAID (Line 4 + 5)		0
7. NET CHANGE THIS PERIOD (Subtract Line 6 from Line 3) Enter the difference here and on Line 5, Column B of Summary Page.		\$ 0

(May be  
negative figure)

# SCHEDULE E

## PAYMENTS AND CONTRIBUTIONS MADE

FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

FRIENDS OF WALLY HERGER FOR ASSEMBLY

### CODES FOR CLASSIFYING EXPENDITURES

One of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES  
 "I" - INDEPENDENT EXPENDITURES  
 "L" - LITERATURE  
 "B" - BROADCAST ADVERTISING  
 "N" - NEWSPAPER AND PERIODICAL ADVERTISING  
 "O" - OUTSIDE ADVERTISING

"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS  
 "F" - FUNDRAISING EVENTS  
 "G" - GENERAL OPERATIONS AND OVERHEAD  
 "T" - TRAVEL, ACCOMMODATIONS AND MEALS  
 "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

**IMPORTANT:** Do not itemize the payment of accrued expenses on Schedule E. Report only the lump sum of these payments on Line 3 of the Summary section, below.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. number or name and address of treasurer)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Postmaster Marysville CA 95901	G		18,408
Computer Caging Corp. 560 Sunrise Vista Drive, Ste. 100 Citrus Heights CA 95610	L		18,061
4iling Data Services, INC. 10 East Commercial Street 9s Angles, CA 90012	L		950
7onor Mail 30. Box 429 Sacramento CA 95802	L		1,090
ree PAC 106 K Street Ste. 310 Sacramento CA 95814	C	791812	10,500

☐ If more space is needed, check box and attach additional Schedules E.

SUBTOTAL 49,009

**IMPORTANT:** Contributions and expenditures on behalf of other candidates or committees must also be entered in the location section at the front of the campaign statement.

### SUMMARY

Payments of \$100 or more made this period (Include all Schedule E Subtotals)	\$ 96,723
Payments under \$100 this period (not itemized)	\$ 1,287
Total Accrued Expenses paid this period (Schedule F, Line 4)	\$ 0
Total Payments this period (Line 1 + 2 + 3) Enter here and on Line 7, Column B of Summary Page	\$ 98,010

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**RIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions in the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual in Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
ilco 1227 Bridge Street #H Dubu City CA 95991	I		761
Hendrick's P.O. Box 1841 Marysville CA 95901	G		3,217
Californians for Fair Reapportionment 127 11 st Street, Ste. 940 Sacramento CA 95814	C	840056 11-1-84	5,000
& D Printing Consultant 509 Ballentine # 8 Sacramento CA 95826	6		5,569
Citizens for Sebastiani 5 McDonald Sonoma CA 95476	C	11-2-84	2,000
Mass Valley Computers 995 Lindhurst Ave. Marysville CA 95901	G		10,130
Elliot Photo Inc. 12 D Street Marysville CA 95901	G		464
Shingle Travel 216 Bridge Street Dubu City CA 95991	T		336
SUBTOTAL			27,477

☐ If more space is needed, check box and attach additional Schedules E.

# SCHEDULE E

## PAYMENTS AND CONTRIBUTIONS MADE (CONTINUATION SHEET) FORM 420, 430 OR 490

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
FRIENDS OF WALLY HERGER FOR ASSEMBLY

### CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual in Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Veraw Roast 503 Eastbluff Drive Ste. 203 Newport Beach CA 92660	G	150
Republicans Leadership Conference Fund 1000 L. St. N. CA	I	600
Slide Swinehart 41 Richland Road Oroville CA 95991	G	382
American Envelope & Paper Products, Inc. 180 N. Kraemer Place Fahiem CA 92806	G	2,271
ication Systems, Inc. 31 University Ave. Ste. 150 Sacramento CA 95825	G	264
acific Bell P.O. Box T Sacramento CA 95813	G	154
ultigraphics apt. 2671 Pasadena CA 91051	G	1,638
he Sacramento Bee Sacramento CA	G	252
SUBTOTAL		5,711

☒ If more space is needed, check box and attach additional Schedules E.



**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |  |   |
|--|---|
| <p>"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES</p> <p>"I" - INDEPENDENT EXPENDITURES</p> <p>"L" - LITERATURE</p> <p>"B" - BROADCAST ADVERTISING</p> <p>"N" - NEWSPAPER AND PERIODICAL ADVERTISING</p> <p>"O" - OUTSIDE ADVERTISING</p> | <p>"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS</p> <p>"F" - FUNDRAISING EVENTS</p> <p>"G" - GENERAL OPERATIONS AND OVERHEAD</p> <p>"T" - TRAVEL, ACCOMMODATIONS AND MEALS</p> <p>"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES</p> |
|--|---|

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Sacramento Union Sacramento CA	G		252
The Appeal Democrat 19 G Street Marysville CA 95901	G N		144 81
OGS 041 Old County Road Elmont CA 94002	O		250
Eggy Bristow 690 Spencer Lane Euba City CA 95991	G		432
Formart Printing P.O. Box 1068 Marysville CA 95901	G		2,040
The Union P.O. Box 1025 Grass Valley CA 95945	G		150
Western Union Telegraph Co. cctg. Control 258 Schuetz Road St. Louis MO 63146	G		109
Midvalley Office Machine 00 Carriage Square Euba City CA 95991	G		1,501
SUBTOTAL			4,959

☒ If more space is needed, check box and attach additional Schedules E.

**SCHEDULE E**  
**PAYMENTS AND CONTRIBUTIONS MADE**  
**(CONTINUATION SHEET)**  
**FORM 420, 430 OR 490)**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**RIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING EXPENDITURES**

If one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual in Campaign Disclosure* for detailed explanations and examples of each category.

"C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES	"S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
"I" - INDEPENDENT EXPENDITURES	"F" - FUNDRAISING EVENTS
"L" - LITERATURE	"G" - GENERAL OPERATIONS AND OVERHEAD
"B" - BROADCAST ADVERTISING	"T" - TRAVEL, ACCOMMODATIONS AND MEALS
"N" - NEWSPAPER AND PERIODICAL ADVERTISING	"P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES
"O" - OUTSIDE ADVERTISING	

If one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (if committee, also enter I.D. number or name and address of treasurer)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
hico Enterprise-REcord P.O. Box 9 hico CA 95927	N		108
ve Digger & World Digger P.O. Box 1408 oville CA	N		128
ark Larwood Co. P.O. Box 1254 acramento CA 95806	I		4,616
in Cal acramento CA	T		168
ingle Travel 216 Bridge Street uba City CA 95991	T		148
ankamericard Visa P.O. Box 37129 an Francisco CA 94137	G		92
orge Owens alt Lake City, Utah	G		120
odins S... ..	G		527
SUBTOTAL			5,907

☒ If more space is needed, check box and attach additional Schedules E.

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD  
FROM 10-21-84 THROUGH 12-31-84  
I.D. NUMBER (if committee)  
790456

FRIENDS OF WALLY HERGER FOR ASSEMBLY

one of the following codes is used to describe the expenditure, no written description is needed. (Note exceptions on the back of this schedule for codes "C", "I" and "T".) Refer to the back of Schedule E and the *Information Manual* on Campaign Disclosure for detailed explanations and examples of each category.

- |     |   |     |  |
|-----|---|-----|--|
| "C" | - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" | - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" | - INDEPENDENT EXPENDITURES                        | "F" | - FUNDRAISING EVENTS                                       |
| "L" | - LITERATURE                                      | "G" | - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" | - BROADCAST ADVERTISING                           | "T" | - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" | - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" | - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" | - OUTSIDE ADVERTISING                             |     |  |

one of the above codes does not accurately or fully describe the expenditure, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

[illegible]

**SCHEDULE F  
ACCRUED EXPENSES  
(UNPAID BILLS)**

**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (if committee)	
790456	

NAME OF CANDIDATE OR COMMITTEE:  
**FRIENDS OF WALLY HERGER FOR ASSEMBLY**

**CODES FOR CLASSIFYING ACCRUED EXPENSES**

One of the following codes is used to describe the accrued expense, no written description is needed. (Note exceptions the back of this schedule for codes "C", "I" and "T".) Refer to the back of this schedule and the *Information Manual on Campaign Disclosure* for detailed explanations and examples of each category.

- |   |  |
|---|--|
| "C" - CONTRIBUTIONS TO OTHER CANDIDATES OR COMMITTEES | "S" - SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS |
| "I" - INDEPENDENT EXPENDITURES                        | "F" - FUNDRAISING EVENTS                                       |
| "L" - LITERATURE                                      | "G" - GENERAL OPERATIONS AND OVERHEAD                          |
| "B" - BROADCAST ADVERTISING                           | "T" - TRAVEL, ACCOMMODATIONS AND MEALS                         |
| "N" - NEWSPAPER AND PERIODICAL ADVERTISING            | "P" - PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES          |
| "O" - OUTSIDE ADVERTISING                             |  |

One of the above codes does not accurately or fully describe the accrued expense, leave the "Code" column blank and provide a written description in the "Description of Payment" column.

NAME AND ADDRESS OF PAYEE, CREDITOR OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, ALSO ENTER I.D. NUMBER OR NAME AND ADDRESS OF TREASURER)	CODE OR DESCRIPTION OF PAYMENT	AMOUNT ACCRUED
If more space is needed, check box, and attach additional Schedules F		SUBTOTAL

**IMPORTANT:** Do not itemize the *payment* of accrued expenses on Schedules E or F. Report the lump sum of these payments on Schedule E, Line 3, and on Schedule F, Line 4. Do not re-itemize accrued expenses which have been reported in a previous period.

**SUMMARY**

Accrued Expenses of \$100 or More This Period	0
Accrued Expenses of Under \$100 This Period (Not Itemized)	0
Total Accrued Expenses Incurred This Period (Line 1 + 2)	0
Accrued Expenses Paid This Period (Not Itemized) Enter here and on Schedule E, Line 3	
Net Change This Period (Subtract Line 4 from Line 3), Enter difference here and on Line 8, Column 8 of Summary Page	0

(May be negative figure)

**SCHEDULE G**  
**MISCELLANEOUS ADJUSTMENTS TO CASH POSITION**  
**FORM 420, 430 OR 490**

(Amounts May Be Rounded To Whole Dollars)

STATEMENT COVERS PERIOD	
FROM	THROUGH
10-21-84	12-31-84
I.D. NUMBER (IF COMMITTEE)	
790456	

NAME OF CANDIDATE OR COMMITTEE:

RIENDS OF WALLY HERGER FOR ASSEMBLY

DATE	DESCRIPTION OF ADJUSTMENT <small>(IF THE ADJUSTMENT INVOLVES A COMMITTEE, OTHER THAN THE FILER, ENTER THE COMMITTEE'S NAME AND ADDRESS. ALSO ENTER THE COMMITTEE'S I.D. NUMBER OR THE TREASURER'S NAME AND ADDRESS)</small>	AMOUNT OF	
		INCREASE TO CASH	DECREASE TO CASH
2-31	Interest from all Bank Accounts	1,249	
SUBTOTAL		(a) 1,249	(b)

☐ If more space is needed, check box at left and attach additional Schedules G

**SUMMARY**

INCREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (a))	\$ 1,249	
INCREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	0	
TOTAL INCREASES TO CASH THIS PERIOD (Line 1 + Line 2)		1,249
DECREASES TO CASH OF \$100 OR MORE THIS PERIOD (Column (b))	0	
DECREASES TO CASH OF LESS THAN \$100 THIS PERIOD (Not itemized)	6	
TOTAL DECREASES TO CASH THIS PERIOD (Line 4 + Line 5)		6
TOTAL MISCELLANEOUS ADJUSTMENTS TO CASH THIS PERIOD (Line 3 minus Line 6) Enter here and on Line 12 of Summary Page		\$ 1,243

(May be negative figure)



FEDERAL ELECTION COMMISSION  
WASHINGTON D C 20463

THIS IS THE BEGINNING OF MUR # 2178  
DATE FILMED 2/29/87 CAMERA NO. 2  
CAMERAMAN AS

87040653360