Richard Nixon Presidential Library White House Special Files Collection Folder List

Box Number	Folder Number	Document Date	Document Type	Document Description
23	11	07/07/1972	Letter	To: Edmund Brown. From: Glenn Sedman. Re: California Election Code and the Presidential nomination
23	11	n.d.	Memo	Handwritten notes on California and South Dakota.
23	11	07/07/1972	Memo	To: Glenn Sedman. From: John Dean. Re: California State Filing Requirements.
23	11	05/05/1972	Letter	To: California Candidates for Congress and Committees Supporting Such Candidates. From: Edmund Brown. Re: Obligations under California Law. 2 pages.
23	11	n.d.	Form	Candidate's Post- Election Campaign Statement- Form C. 8 pages.
23	11	n.d.	Form	Candidate's Post- Election Campaign Statement- Form D. 8 pages.

Friday, April 04, 2008 Page 1 of 2

Box Number	Folder Number	Document Date	Document Type	Document Description
23	11	n.d.	Form	Congressional Candidate's Post- Election Campaign Statement- Form G. 8 pages.
23	11	n.d.	Form	Congressional Candidate's Post- Election Campaign Statement- Form H. 8 pages.
23	11	n.d.	Report	Campaign Financing in California the Law and its Application. Not scanned.
23	11	n.d.	Memo	Instructions to State and Local Candidates and Political Committees for Preparation of Campaign Statements. Not scanned.
23	11	n.d.	Other Document	Business card Thomas Bauer, Jr., State Finance Director

Friday, April 04, 2008 Page 2 of 2

1701 PENNSYLVANIA AVENUE. N.W WASHINGTON, D. C. 20006 (202) 333-0920

July 7, 1972

Honorable Edmund G. Brown, Jr. Secretary of State State Capitol Sacramento, California 95814

Dear Mr. Secretary:

We are advised by your special counsel, Mr. Daniel Lowenstein, that your office considers the filing requirements of the California Election Code to be inapplicable to candidates for Presidential nomination to whom delegates were pledged in the June 6th delegate selection primary. Our own interpretation of California law concurs with this opinion, and this conclusion is further confirmed by the fact that no Presidential candidate in past primaries has ever filed campaign disclosure statements pursuant to state law nor been considered to be required to do so. For these reasons, we have deemed it unnecessary to file a formal statement on behalf of President Nixon.

However, Mr. Lowenstein has also advised that the Attorney General of California has been requested to render a formal opinion on this question. In the event that his ruling should be contrary to the foregoing and to past practice, and he concludes that the Election Code requires Presidential candidates to file complete statements of campaign receipts and expenditures in regard to the recent primary, we would appreciate being so informed, in order that we may insure we are in full compliance with your state law. For the public record, however, I can inform you that the President has personally neither received any contributions nor made any expenditures in connection with the California primary election.

Thank you for your courtesies in this matter.

Respectfully,

lenn J. Sedam, Jr.

cc: County Clerk
Orange County

S. D. Cal. -> No many poul by Workington Nothing fee S. Dolata Dan Munson - Treasi 605 - 665-9401 (al. -Paul Yazer - Treas 213 - 680-2500 Tom Baren - Ex Dir of Finance Committee 213-485-9711 Lynn Nifzinger - Ex Div / Capaign 213 - 484-1330

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July 7, 1972

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MEMORANDUM FOR:

GLENN SEDAM

FROM:

JOHN DEAN

SUBJECT:

California State Filing Requirements

After discussions with you and other individuals in California, it is our conclusion that the President is not required to file a statement of campaign financing under the California State Election Code as a candidate in the June 6th primary. Accordingly, no formal report is being filed.

However, since the Secretary of State has asked the Attorney General of California for a formal opinion on this question, it does seem best to cover ourselves by showing our good faith effort to comply with state law. The attached draft letter for your signature should serve this purpose.

Insofar as the letter states that the President has personally made no expenditures nor received any contributions, it can also be considered a partial filing under state law if the Attorney General should later rule that Presidential candidates must file. In order to meet the other requirements of state law, the letter should be mailed so that it arrives at the Secretary of State's office no later than July 11 and a copy should also be sent to the County Clerk of Orange County. That address is as follows:

County Clerk
Orange County
700 Civic Center Drive West
Santa Ana, California 92701

Max Utt has also requested that he receive a copy of your letter. His address is as follows:

Gibson, Dunn & Krutcher 515 South Flower Street Los Angeles, California 90071

Your handling of this matter will be appreciated.



Secretary of State

STATE CAPITOL SACRAMENTO, CA 95814 (916) 445-6371

May 5, 1972

TO: CALIFORNIA CANDIDATES FOR CONGRESS AND TO COMMITTEES SUPPORTING SUCH CANDIDATES

The purpose of this letter is to inform you of your obligations under California law (Elections Code §§ 11500-11631) to file reports of your campaign receipts and expenditures. Much of the information required by California law is also required by the Federal Election Campaign Act of 1971. The instructions in this letter have been formulated to save you from unnecessary duplication in reporting to both state and federal authorities.

The statements described by this letter must be filed by:

- Each candidate in the primary for member of the United States House of Representatives; and
- The treasurer of each committee which is charged with the duty of conducting all or a substantial portion of the campaign of any such candidate.

Each statement must be filed with the Secretary of State. In addition, each candidate and treasurer must file a copy of the statement with the clerk of the county in which the candidate resides. Each candidate must file a statement, even though the committee treasurer also files. The statements must be on file no later than July 11, 1972. If a committee which files a statement has registered with federal authorities, the committee should enter its federal number on the form filed with the Secretary of State.

The statements you file under the federal law will be considered as also being filed in accordance with state law, provided that the copy filed with the Secretary of State contains an original signature (not a photo-copied signature). In addition to the federal forms, each candidate and each committee must file separate reports listing all contributions and all expenditures

not listed in the federal reports. Form C should be used by the candidate, and Form D by the committee treasurer. Under the heading "Receipts," list the full name and city or locality of every contributor who was not listed in your federal report, either because the contributor gave \$100 or less, or because the contribution was received prior to April 7, 1972. The law does not require you to report the amount received from each contributor, but you must state a total amount for all contributions. Under the heading "Expenditures," report each expenditure made prior to April 7, 1972, and therefore not reported in your federal report. If all your receipts and expenditures are listed in your federal report, you may simply indicate this fact and sign the form.

If you wish to file your statements in person, you may do so at the Secretary of State's office at 1880 Century Park East, Suite 311, Los Angeles, or at Room 119 of the State Capitol Building in Sacramento. Statements filed by mail should be addressed to:

Secretary of State Elections Division - Campaign Statements 111 Capitol Mall Sacramento, California 95814

If you have questions regarding your disclosure obligations, my staff will be happy to provide you with any assistance.

Sincerely,

Edmund G. Brown Jr. Secretary of State

By Daniel H. Lowenstein Special Counsel to the Secretary of State

Enclosures



SECRETARY OF STATE OF CALIFORNIA

CANDIDATE'S POST-ELECTION CAMPAIGN STATEMENT

(Government Code Sections 3750–3754; Elections Code Sections 11500–11631)

THIS STATEMENT MUST BE FILED NO MORE THAN 35 DAYS AFTER THE ELECTION

Name of Candidate:		
Type of Election (Primary, General, or Special):_		
Date of Election: Month Day Year	Office for which you were a candidate:	
Political Party and District No. (if applicable):		
	RECEIPTS	
tributors who gave a total of more than \$500. Pol	contributor who made contributions. Specify the exact amount in itical committees which made contributions should be listed separals or services worth more than \$500 ("in-kind" contributions), an age 2. Attach extra sheets if-necessary.	ately as indicated
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RECEIPTS—Continued

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* Must be shown for each contributor who contributed a	n total of more than \$500	\$
		\$
	Amount Contributed by Candidate	\$
TOTAL LOANS RECEIVED (The name and and/or guaranteeing each loan, the due be listed on a separate attached page.)	city or locality of each person, organization or committee making date of each loan, and the exact amount of each loan over \$500, must	\$
TOTAL PLEDGES (The name and city or loc	cality of each person, organization or committee which has promised to bunt each such contributor has promised must be stated on a separate	\$
TOTAL VALUE OF NON-MONETARY CON	TRIBUTIONS (The name and city or locality of each person, organiza- utions worth more than \$500, the nature of each contribution and its parate attached page.)	\$

Grand Total Received \$_____

EXPENDITURES

(Attach extra pages if additional space is needed.)

(a) For the preparing, printing, circulation and verifying of nomination papers and for the candidate's official filing fee.

NAME OF PAYEE (Person or Organization Receiving Payment) NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES AMOUNT Total Spent \$_ (b) For the candidate's and campaign personnel's personal traveling expenses. NAME OF PAYEE (Person ar Organization Receiving Payment) NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES AMOUNT Total Spent \$_ (c) For rent, furnishing, and maintaining headquarters and halls and rooms for public meetings, including light, heat, and telephone. NAME OF PAYEE (Person or Organization Receiving Payment) NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES AMOUNT Total Spent \$_ (d) For payment of personnel. 1. Campaign manager or managers. NAME OF PAYEE (Person ar Organization Receiving Payment) NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES AMOUNT Total Spent \$_

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NAME OF PAYEE	g and posting of billboards, signs and po	sters.	
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(Person or Organization Receiving Payment)	PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
			
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) For conveying voters to a			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
		 	
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			_
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Receiving Payment)	,		\$

Does the above report reflect all contributions, loans, and pledges fur your candidacy?	nished directly or indirectly and all expenditures on behalf of
(YES or NO)	
If answer is No, then list below the name of each committee known to pledges or has made or may have made expenditures on behalf of y number of the treasurer or other responsible officer of each committee	our candidacy, along with the name, address and telephone
I have used all reasonable diligence in the preparation of this states make it. I certify (or declare) under penalty of perjury that the foregoing is true.	
Dated	up. p
	Signature of Candidate
	Address
	City, State, Zip Code
	Telephane Number



SECRETARY OF STATE OF CALIFORNIA

COMMITTEE'S POST-ELECTION CAMPAIGN STATEMENT

(Government Code Sections 3750–3754; Elections Code Sections 11500–11631)

This form is to be filed by the treasurer of a political committee which supports only one candidate. A political committee is any organization which accepts contributions or makes expenditures for the purpose of influencing or attempting to influence the election of candidates. A committee which supports only one candidate but which plays no role in conducting that candidate's campaign and which is entirely independent of the candidate's campaign may, if the treasurer chooses, file its campaign statement on Form E. Committees which support more than one candidate must file Form F. Form E and Form F may both be obtained from the Secretary of State.

THIS STATEMENT MUST BE FILED NO MORE THAN 35 DAYS AFTER THE ELECTION

•		
Name of Committee:		
Name of Treasurer:		
Name of Candidate:		
Type of Election (Primary, General, or Special):	-P- →	
Date of Election:	Office for which the candidate ran:	
Political Party and District No. (if applicable):		
·	RECEIPTS	
List on the following lines the name of every contri- tributors who gave a total of more than \$500. Political Loans, pledges, contributions of goods or services wort date should be stated as indicated on page 2. Attach	committees which made contributions should be listed homore than \$500 ("in-kind" contributions), and co	ed separately on page 2.
NAME (Contrib	CITY OR LOCALITY utors other than political committees)	* THUOMA
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^{*} Must be shown for each contributor who contributed a total of more than \$500.

RECEIPTS—Continued

NAME CITY OR LOCALITY

AMOUNT *

(Contributors other than political committees) NAME OF POLITICAL COMMITTEE NAME OF OFFICER, ADDRESS, TELEPHONE * THUOMA * Must be shown for each contributor who contributed a total of more than \$500. Total **Amount Contributed by Candidate** TOTAL LOANS RECEIVED (The name and city or locality of each person, organization or committee making and/or guaranteeing each loan, the due date of each loan, and the exact amount of each loan over \$500, must be listed on a separate attached page.) TOTAL PLEDGES (The name and city or locality of each person, organization or committee which has promised to contribute more than \$500 and the amount each such contributor has promised must be stated on a separate attached page.) TOTAL VALUE OF NON-MONETARY CONTRIBUTIONS (The name and city or locality of each person, organization or committee making in-kind contributions worth more than \$500, the nature of each contribution and its fair market value must be stated on a separate attached page.) **Grand Total Received \$**

EXPENDITURES

(Attach extra pages if additional space is needed.)

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			
		Total Spent	\$
For the candidate's and	campaign personnel's personal traveling	expenses.	
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(n) For photographs, mats, co	uts, art work and displays.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN	41
				
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		Total Spent	\$	

(k) For conveying voters to and from the polls.

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as poyee enter "some")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
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		Total Spent \$_	
		Grand Total Spent \$	
Does the above report reflec he candidate's campaign?	t all contributions, loans, and pledges fo	urnished directly or indirectly and all expenditure	s on behalf o
	(YES or NO	D)	
pledges or has made or may	ow the name of each committee known to y have made expenditures on behalf of ther responsible officer of each committe	o you which has or may have received contribut the candidate, along with the name, address one.	ions, loans, o and telephon
	,	.p. >	
have used all reasonable o	diligence in the preparation of this state	ement and it is true and is as full and explicit a	s I am able t
declare under penalty of p	erjury that the foregoing is true and cor	rect.	
Dated			
		Signature of Treasurer	
	,	Address	_
	·	City State 7in Code	
		City, State, Zip Code	
		Telephone Number	

SECRETARY OF STATE OF CALIFORNIA



CONGRESSIONAL CANDIDATE'S POST-ELECTION CAMPAIGN STATEMENT

(Elections Code Sections 11500-11631)

THIS STATEMENT MUST BE FILED NO MORE THAN 35 DAYS AFTER THE ELECTION

Name of Candidate:	
ype of Election (Primary, General, or Special):	District No
Date of Election:	Political Party:
	RECEIPTS
	r locality of every contributor who made contributions. Political committee as indicated on page 2. Contributions by the candidate and loans should necessary.
NAME	CITY OR LOCALITY
(Contribute	ors other than political committees)
	
,	
	

Form G Page 1

RECEIPTS—Continued

NAME

CITY OR LOCALITY

(Contributors other than political committees)		
- 		
NAME OF POLITICAL COMMITTEE	NAME OF OFFICER, ADDRESS, TELEPHONE	
		
	Subtotal (all contributions received)	\$
	Amount Contributed by Candidate	\$
TOTAL LOANS RECEIVED (The name and and/or guaranteeing each loan, and the	d city or locality of each person, organization or committee making e due date of each loan must be listed on a separate attached page.)	\$
	Grand Total Received	\$

EXPENDITURES

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	HUOMA
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NAME OF PAYEE (Person or Organization Receiving Payment) for payment of personne ampaign manager or manager (Person or Organization	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Pl. Diagram of Person or Organization PROVIDING GOODS AND SERVICES	DESCRIPTION OF GOODS AND SERVICES Total Spent	AMOU
NAME OF PAYEE (Person or Organization Receiving Payment) or payment of personne ampaign manager or manager or manager or manager or manager or manager or or Organization	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Pl. Diagram of Person or Organization PROVIDING GOODS AND SERVICES	DESCRIPTION OF GOODS AND SERVICES Total Spent	AMOU

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "some")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
, compression,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
tonographore and clocks		Total Spent	3
tenographers and clerks.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
	·	.p. s	-
recinct workers.		Total Spent	\$
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	мома
		Total Spent	.
Speakers.		33.3.3 .3.5.3.	
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "some")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			

Entertainers.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			
For the preparing, printing o	and posting of billboards, signs and pos	Total Spent	\$
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	АМОИА
-			
For the preparing, printing,	and distribution of literature by direct	Total Spent t mail, including postage, throwaways and han	
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			
		Total Spent	\$
For newspaper advertising.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUI
	·		
			
		Total Spent	\$

Form G Page 5

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
	-		
For office supplies precin	ct lists postage other than that provides	Total Spent d for in subdivision (f), expressage and telegro	
candidacy.	er isis, postage omer man mar provides		.pining relativ
NAME OF PAYEE (Person ar Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
			-
			
.		Total Spent	\$
NAME OF PAYEE	NAME OF PERSON OR ORGANIZATION		
(Person or Organization Receiving Payment)	PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
			_
			
		Total Spent	\$
For conveying voters to a	nd from the polls.		
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
	<u> </u>		
		Total Spent	

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES		AMOUA
	•			
For watching the polling	and counting of votes cast.	Total Spent	Ψ	_
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES		AMOU
				
	·	Total Spent	\$	
	its, art work and displays.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES		AMOU
	· · · · · · · · · · · · · · · · · · ·			
			_	
		Total Spent	\$	
For petty cash items relat				
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES		AMOU
				

Grand Total Spent \$_____

your candidacy?	
_	(YES or NO)
If answer is No, then list below the name of each comm pledges or has made or may have made expenditures number of the treasurer or other responsible officer of	ittee known to you which has or may have received contributions, loans, or on behalf of your candidacy, along with the name, address and telephone each committee.
I have used all reasonable diligence in the preparation make it.	n of this statement and it is true and is as full and explicit as I am able to
I certify (or declare) under penalty of perjury that the	foregoing is true and correct.
Dated	
	Signature of Candidate
	Address
	City, State, Zip Code
	Telephone Number

Does the above report reflect all contributions, loans, and pledges furnished directly or indirectly and all expenditures on behalf of

Form G Page 8

△66523—862 9-72 2,500

SECRETARY OF STATE OF CALIFORNIA



CONGRESSIONAL COMMITTEE'S POST-ELECTION CAMPAIGN STATEMENT

(Elections Code Sections 11500–11631)

This form is to be filed by the treasurer of a political committee which supports candidates for Congress only. If more than one congressional candidate is supported, attach a separate sheet listing the name, district number and political party of each candidate. If the committee supports state and local candidates as well as congressional candidates, Form F should be filed. Political committees which do not support any congressional candidates should file Form D if they support one state or local candidate, and Form F if they support more than one state or local candidate. Form D and Form F may be obtained from the Secretary of State.

THIS STATEMENT MUST BE FILED NO MORE THAN 35 DAYS AFTER THE ELECTION

Name of Committee:	
Name of Treasurer:	
Name of Candidate:	
Type of Election (Primary, General, or Special):	District No
Date of Election:	Political Party:
	RECEIPTS
	or locality of every contributor who made contributions. Political committees on page 2. Contributions by the candidate and loans to the committee should finecessary.
NAME	CITY OR LOCALITY
Form H	

Form H Page 1

RECEIPTS—Continued

NAME	CITY OR LOCALITY	
(Contributors other than political committees)		
		
		
		
	-	
NAME OF POLITICAL COMMITTEE	NAME OF OFFICER, ADDRESS, TELEPHONE	
_		
	Subtotal (all contributions received)	¢
	Subiolal (all comfibulions received)	Ψ
	Amount Contributed by Candidate	\$
TOTAL 1011/2 PEOFINIES (T)		
and/or guaranteeing each loan, and the d	ity or locality of each person, organization or committee making ue date of each loan must be listed on a separate attached page.)	\$
	Grand Total Received	\$

EXPENDITURES

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	MOMA
-			
		Total Spent	\$
NAME OF PAYEE (Person or Organization	campaign personnel's personal traveling NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES		
Receiving Payment)	(If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOU
			-
		.p. s	
		Total Spent	
or rent, furnishing, and NAME OF PAYEE (Person or Organization Receiving Payment)	maintaining headquarters and halls and NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	Total Spent rooms for public meetings, including light, hed	at, and telep
NAME OF PAYEE (Person or Organization	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES	rooms for public meetings, including light, hec	at, and telep
NAME OF PAYEE (Person or Organization	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES	rooms for public meetings, including light, hec	at, and telep
NAME OF PAYEE (Person or Organization Receiving Payment) or payment of personne	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	rooms for public meetings, including light, hec	AMOU
NAME OF PAYEE (Person or Organization Receiving Payment) or payment of personne ampaign manager or me	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Pl. Conagers. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES	Total Spent	AMOU
NAME OF PAYEE (Person or Organization Receiving Payment) or payment of personne ampaign manager or me	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Pl. anagers. NAME OF PERSON OR ORGANIZATION	TOOMS FOR PUBLIC MEETINGS, INCLUDING LIGHT, HEC	AMOU
NAME OF PAYEE (Person or Organization Receiving Payment) or payment of personne ampaign manager or me	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Pl. Conagers. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES	Total Spent	AMOU

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	
Receiving rayment)	(11 sume as payee emer sume /	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
tonographore and clorks		Total Spent	\$
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
		., ,	
recinct workers.		Total Spent	\$
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	АМОИН
			
			
		Total Spent	\$
Speakers.	NAME OF BEDSON OR ORGANIZATION		
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			
		Total Spent	\$

Entertainers.			
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
-			
For the preparing, printing	and posting of billboards, signs and po	Total Spent sters.	\$
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
			
		Total Spent	\$
or the preparing, printing,	and distribution of literature by direct	t mail, including postage, throwaways and hand	lbills.
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUA
			
		Total Spent	\$
For newspaper advertising.		•	
NAME OF PAYEE (Person or Organization	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES	DESCRIPTION OF GOODS AND SERVICES	4400
Receiving Payment)	(If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
,			
		Total Spent	\$

Form H Page 5

NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	THUOMA
	 	
<u> </u>	<u> </u>	
	Total Spent	
ct lists, postage other than that provided	d for in subdivision (f), expressage and teleg	raphing relative :
NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payer enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
		
		
	yP 2	
 		
	Total Spent	\$
oters and public opinion surveys.		=====
NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	THUOMA
		
	·	
nd from the nells	Total Spent	\$
NAME OF PERSON OR ORGANIZATION		
(If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUNT
	ct lists, postage other than that provided NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Oters and public opinion surveys. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") Indicate the public opinion surveys. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	PROVIDING GOODS AND SERVICES (If same as payee enter "same") Total Spent at lists, postage other than that provided for in subdivision (f), expressage and teleg NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES (If same as payee enter "same") Total Spent oters and public opinion surveys. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES (If same as payee enter "same") DESCRIPTION OF GOODS AND SERVICES (If same as payee enter "same") Total Spent and from the polls. NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES

NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUA
Receiving Payment)	(II saline as payee enter saline)	DESCRIPTION OF GOODS AND SERVICES	
	<u> </u>		
		Total Spent	s
For watching the polling	and counting of votes cast.	roiu. opoii.	4
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AMOUN
		Total Spent	\$
For photographs, mats, cu	uts, art work and displays.		
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same os payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	AUOMA
		<u> </u>	
		Total Spent	\$
For petty cash items relat	<u> </u>		
NAME OF PAYEE (Person or Organization Receiving Payment)	NAME OF PERSON OR ORGANIZATION PROVIDING GOODS AND SERVICES (If same as payee enter "same")	DESCRIPTION OF GOODS AND SERVICES	
Receiving rayment	(it same as payer enter same)		NOMA
Receiving rayment)	(IT same as payee enter same)	TECHNICION OF COORD AND SERVICES	NOMA
Receiving rayinein)	(ir same as payee emer same)	DESCRIPTION OF GOODS ALLS SERVICES	MOUN
Receiving rayments	(IT same as payee enter same)		AMOUN
Receiving rayment)	(IT same as payee enter same)		AMOUN
Receiving rayment)	(ir same as payee emer same)		NUOMA
Receiving regiment)	(IT same as payee emer same)	Total Spent	

Does the above report reflect all contributions, loans, and pledges the candidate's campaign?	s furnished directly or indirectly and all expenditures on behalf of
(YES o	r NO)
If answer is No, then list below the name of each committee knowledges or has made or may have made expenditures on behalf number of the treasurer or other responsible officer of each committee to the committee of the treasurer or other responsible officer of each committee of the treasurer or other responsible officer of each committee of the treasurer or other responsible officer of each committee knowledges.	of the candidate, along with the name, address and telephone
I have used all reasonable diligence in the preparation of this smake it. I certify (or declare) under penalty of perjury that the foregoing	
Dated	·P •
	Signature of Treasurer
	Address
	City, State, Zip Code
	Telephone Number

∆66523C---862 9-72 2,000

THOMAS F. BAUER, JR. State Finance Director

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California Finance Committee for the Re-election of the President 515 S. Flower St., Los Angeles, California 90071 (213) 485-9711

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