



**Instructions for
Recipient Committee
Campaign Statement – Cover Page**

Period Covered by a Statement:

The "period covered" by a campaign statement begins the day after the closing date of the last campaign statement you filed. For example, if the closing date of the last statement was September 30, the beginning date of the next statement will be October 1.

If this is the committee's first campaign statement, begin with January 1 of the current calendar year.

The closing date of the statement depends on the type of statement you are filing.

Date of Election:

If you are filing this statement as a pre-election statement in connection with an election, enter the date of the election.

Type of Recipient Committee:

Check one box to indicate the type of committee filing the statement. General descriptions are provided on the cover sheet to this form, or contact your filing officer or the FPPC for assistance. Following are some additional guidelines:

Controlled Committee

• A controlled committee is one that is controlled by a candidate, officeholder or, in the case of a state ballot measure committee, by the proponent of the measure. A committee is "controlled" if the candidate, officeholder or proponent, his or her agent, or any other committee member or controls, has a significant influence on the actions or decisions of the committee.

Sponsored Committees

• A sponsored committee is one that has a sponsor—a business entity, organization, union, or other entity—that meets certain criteria.

Sponsored ballot measure committees and general purpose committees must include the name of the sponsor in the name of the committee.

Small Contributor Committees

• This term is significant only if the committee makes contributions to candidates running for elective state office.

Type of Statement:

Check the appropriate box(es) to indicate the type of statement you are filing (or amending).

Amendments: If you are filing an amendment to a previously filed statement, give a brief expansion of the amendment and list the schedules being amended. Include an amended summary page, if applicable. Be sure to enter the period covered of the statement you are amending.

Termination: A committee must continue filing campaign statements each year until it is eligible to terminate and file a Form 410 Termination. Most officeholders must continue filing campaign statements until they have terminated all controlled committees and have left office.

Committee I.D. Number

If the committee has not yet received an identification number from the Secretary of State,

enter "Not Yet Received." File Form 410 to obtain an I.D. Number.

Verification:

The statement must be signed by the committee treasurer or the assistant treasurer named on the committee's Statement of Organization (Form 410). An officeholder, candidate, or state measure proponent who controls the committee must also sign the statement. If two or three officeholders, candidates, or proponents control the committee, each must sign the statement. If more than three control the committee, one may sign on behalf of the others.

Under certain circumstances, the responsible officer of a sponsoring organization must sign the statement.

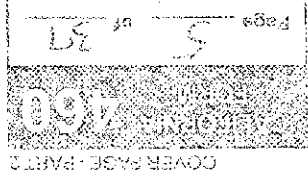
Additional Important Information:

Refer to the FPPC Campaign Disclosure Manual for your type of committee for information about:

- When, where, and what type of statements the committee is required to file.
- Closing date of campaign statements.
- Sponsored committee criteria.
- Termination criteria.
- Recordkeeping requirements and prohibitions.

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.



5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Chelene N. Martin

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Chelene N. Martin

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
Garver
P.O. Box 90115 Palmdale CA 95590

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

COMMITTEE NAME
N/A

NAME OF TREASURER
N/A

CONTROLLED COMMITTEE? YES NO

STREET ADDRESS (NO P.O. BOX)
CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
N/A

BALLOT NO. OR LETTER JURISDICTION
 SUPPORT OPPOSE

Identify the controlling officeholder, candidate, or sponsor proposed, if any.
NAME OF OFFICEHOLDER, CANDIDATE, OR SPONSOR

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed Candidate/Officeholder Committee. List names of officeholders or candidates for which the committee is primarily formed.

NAME OF OFFICEHOLDER OR CANDIDATE <u>N/A</u>	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

Attach continuation sheets if necessary.

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE ADDRESS
STREET ADDRESS (NO P.O. BOX)

COMMITTEE NAME
N/A

NAME OF TREASURER
N/A

CONTROLLED COMMITTEE? YES NO

STREET ADDRESS (NO P.O. BOX)
CITY STATE ZIP CODE AREA CODE/PHONE

**Instructions for
Recipient Committee
Campaign Statement – Cover Page**

**Officeholder or Candidate Controlled
Committee:**

Candidates must have a separate bank account and committee to run for different elective offices. A candidate who is required to file campaign statements in connection with more than one elective office but is only receiving contributions and making expenditures for one of the offices, may include both offices on one Form 460. In Part 5 of the cover page, enter the candidate's name and under "Office Sought or Held," identify each office, and state whether the candidate is seeking or holding the office. The Form 460 must be filed with the appropriate filing officer(s) for each office.

Ballot Measure Committee:

Part 6 of the Form 460 Cover Page must be completed by committees that are primarily formed to support or oppose the qualification or passage of a single ballot measure or two or more measures being voted on in the same city, county, municipality, or state election. A "general purpose" ballot measure committee (one that supports or opposes a variety of state and/or local ballot measures) is not required to complete Part 6.

For example, a city councilmember is raising funds to run for the county board of supervisors. She has no committee and is not raising or spending funds in connection with the city office, and has formed a controlled committee for the county office. To comply with the requirements to file campaign statements for both her city office and her county candidacy, she may complete one Form 460 each campaign reporting period, which she will file with the city clerk and the county elections department. In Part 5 of the Form 460 Cover Page, under "Office Sought or Held," she will state that she is holding the office of city councilmember (including the name of the city) and that she is seeking a seat on the board of supervisors (including the name of the county).





Instructions for Summary Page Campaign Disclosure Statement

The Summary Page provides an overview of the committee's financial activities and is completed for each filing.

Column A reflects activities during the current reporting period as reported on Schedules A through H. It is not necessary to attach a blank schedule if there has been no reportable activity during the period, but it is necessary to enter a zero or the word "none" on the appropriate line in Column A of the Summary Page.

Column B figures should reflect the cumulative total since January 1 of the current calendar year. Add the totals from Column B of the committee's last campaign statement (if any) to the corresponding amounts in Column A. If this is the first report being filed for a calendar year, only carry forward the amounts reported on Lines 2, 7, and 9 of Column B (if any) from the committee's last statement. (Note: The amounts reported on Lines 2, 7, and 9 of Column B should be the same as the total outstanding amounts disclosed in column (d) of Schedules B, F, and H, respectively, of the current report.)

When loans (Schedules B and H) and accrued expenses (Schedule F) are paid, the figures to be carried from the schedules to Lines 2, 7, and 9 of Column A may be negative numbers. In this case, Column A may be negative figures on the Summary Page (e.g., with a minus sign (-) or in parentheses), and subtract them when totaling Columns A and B.

*There are exceptions to the calendar-year "cumulation period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. Consult the FPPC Campaign Disclosure

Manual for your type of committee for additional information.

Current Cash Statement

Lines 12-16 of the Summary Page should accurately reflect your current cash position. Beginning and ending cash balances should include the total amount of funds in your campaign checking and savings accounts, plus any investments that can be readily converted to cash, such as certificates of deposit, money market accounts, stocks and bonds, etc. (Officeholders and candidates are subject to bank account restrictions, and all committees should read the FPPC Campaign Disclosure Manual regarding appropriate uses of campaign funds.)

Line 12 (Beginning Cash Balance) must be the same as the ending cash balance reported on Line 16 of your previous statement's Summary Page. If this is your first campaign statement, enter zero on Line 12. Line 16 (Ending Cash Balance) is the total of Lines 12, 13, and 14, minus Line 15.

If you are filing a termination statement, Line 16 must be zero.

Cash Equivalents

"Cash equivalents" include investments that cannot be readily converted to cash, as well as the balance due on all outstanding loans the committee has made to others (from Line 7 of Column B of the Summary Page). Investments that can be readily converted to cash, such as certificates of deposit or money market funds, should be included in the cash on hand figures on Lines 12 and 16 of the Summary Page.

Summary for Primary and General Elections (Lines 20 and 21)

This section is only for committees that are:

- Controlled by a candidate who is being voted on in both the state primary and general elections (does not apply to controlled ballot measure committees), or
- Primarily formed to support or oppose candidates being voted on in both the state primary and general elections.

Complete the summary on the pre-election and semi-annual statements for the general election, covering periods during the last six months of the year (July 1-December 31).

Expenditure Ceiling Summary for State Candidates (Line 22)

Candidates for elective state office who have accepted the voluntary expenditure ceiling for a particular election must disclose the total amount of expenditures made through the end of the reporting period that are subject to the expenditure ceiling for the election. Report the date of the election and total amount expended for that election. Report totals for the primary and general elections separately. This information is no longer required if the expenditure ceiling has been lifted. (See FPPC Campaign Disclosure Manual.)

Schedule A
Monetary Contributions Received

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

Statement covers period

from 11/25/09 through 5/17/2010

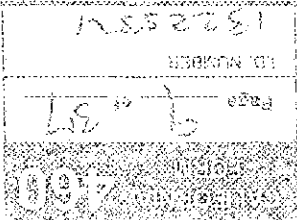
Page 9 of 37

ID NUMBER 1322551

SEE INSTRUCTIONS ON REVERSE

NIGHTMARE FOR ROBERT 2ND (LAWYER)
to erect LEAK DEPOSE FUND

John Baldwin



SCHEDULE A

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	QUARTER/TO DATE CALENDAR YEAR (PART 1 - DEC. 31)	PAGE SECTION (IF REQUIRED)
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1/9/2010	BURY JAMES 145 S. BEAVERS DR. #101 BEAVERLY HILLS CA 90212	IND COM OTH PTY SOC	ORATORIAN EXERCISE INSTRUCTORS	\$100	\$100	N/A
1/28/2010	LEO CHAPMAN SR. 1600 KURTZ ST. OCCASION CA 92081	IND COM OTH PTY SOC	STATE EMPLOYEE SENIO	\$100	\$100	N/A
1/31/2010	JAMES CHAPMAN 301 LEXINGTON DR. MILLSVILLE PA 17551	IND COM OTH PTY SOC	CHAPMAN STATE SENATOR PARTY	\$500	\$500	N/A
2/1/2010	MARK HEDER 2308 LA MIRADA VISTA CA 92081	IND COM OTH PTY SOC	RETIRED	\$177.00	\$177.00	AD/M
2/25/10	VAUGHN BECHT 5701 MEADOWS RD WILMINGTON CA 92683	IND COM OTH PTY SOC	RETIRED	\$181.00	\$181.00	AD/M

SUBTOTALS 1059.20

Schedule A Summary

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.)

\$ 5178.20

2. Amount received this period - unitemized monetary contributions of less than \$100

\$ 212

3. Total monetary contributions received this period

TOTAL \$ 7290.20

CONTRIBUTOR CODES
IND - Individual
COM - Recipient Committee
(Other than PTY or SOC)
OTH - Other (e.g., business entity)
PTY - Political Party
SOC - Small Contributor Committee

**Instructions for
Schedule A
Monetary Contributions Received**

Report monetary contributions (except loans) received during the reporting period on Schedule A. Also report on Schedule A if a contributor forgives a loan for you or a third party pays a loan for you. Loans received during the period are reported on Schedule B. Certain transfers between a state candidate's controlled committees are also disclosed on Schedule A. (See FPPC Campaign Disclosure Manual.)

If a total of \$100 or more is received from a single contributor during a calendar year, report the name, street address, city, state and zip code of the contributor, the amount contributed this period, and the cumulative amount received from the contributor since January 1 of the current calendar year.¹ Include monetary and nonmonetary contributions and loans when reporting the cumulative amount. Contributions totaling less than \$100 received from a single contributor during a calendar year are reported as a lump sum on line 2 of the Schedule A Summary.

¹There are exceptions to the calendar year "cumulative period" for candidate elections and ballot measure elections held in January and early February, and for ballot measure qualification activities. (See the FPPC Campaign Disclosure Manual² for candidates and ballot measure committees.)

Date Received: A monetary contribution has been received when the candidate or committee, or an agent of the candidate or committee, receives or obtains control of the check or other negotiable instrument. There are special rules for reporting the date contributions are received by a committee that collects

Report monetary contributions through employer payroll deductions or membership dues.

contributions through employer payroll deductions or membership dues.

Contributor Codes: For each itemized contributor, check the applicable contributor code:
 IND--contributions from any individual's personal funds.
 OMI--contributions from other committees that receive contributions. These committees will have an identification number assigned by the Secretary of State. Examples: political action committees, other candidates' committees. (State committees should use PTY or SOC when appropriate.)
 OTH--business entities and other contributors.
 PTY--contributions from political parties (including state and county central committees).
 SOC--contributions from small contributor committees (applicable only to state candidates and committees).

When itemizing a contribution from another recipient committee, disclose the identification number assigned to that committee by the Secretary of State in addition to its name and address. If no ID number has been assigned, provide the name and address of that committee's treasurer.

Contributions from Individuals: When itemizing a contribution from an individual, also disclose the contributor's occupation and the name of his or her employer. If the contributor is self-employed, provide the name of his or her business. If the contributor is not employed enter "none."
 It is not necessary to enter occupation and employer information for other types of contributors (such as business entities).
 Missing Contributor Information: A contribution of \$100 or more must be returned to the contributor within 60 days if the recipient does not obtain the contributor's address, occupation and employer

Additional important information: Refer to the FPPC Campaign Disclosure Manual for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, prohibitions on cash contributions, returning contributions, and more.

Additional Important Information: Refer to the FPPC Campaign Disclosure Manual for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, prohibitions on cash contributions, returning contributions, and more.



Contributions from Committees: When itemizing a contribution from another recipient committee, disclose the identification number assigned to that committee by the Secretary of State in addition to its name and address. If no ID number has been assigned, provide the name and address of that committee's treasurer.

Intermediaries: If you receive a contribution through an intermediary (i.e., you have received a contribution check from a person other than the true source of the funds), disclose all of the required information for both the intermediary and the actual contributor.

Per Election to Limit: Candidates subject to state contribution limits (and candidates subject to local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPPC Campaign Disclosure Manual.)

Additional Important Information: Refer to the FPPC Campaign Disclosure Manual for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, prohibitions on cash contributions, returning contributions, and more.

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period

from 11/1/2010

NAME OF FILER N/L H/T/M/G/M/L/C For former 2010 Committee to Elect/Legal Retiree final

through 01/17/2011

Page 11 of 13

1522954

ID NUMBER

SCHEDULE A (CONT)

CA 400

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF CONTRIBUTOR ALSO ENTERED NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NA)	AMOUNT RECEIVED THIS PERIOD	QUANTITATIVE YEAR (CALENDAR YEAR OR JAN. 1 - DEC. 31)	PER SECTION (IF REQUIRED)
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2/20/2010	Barbara Coe 5551 Castle Drive Huntington Beach, CA 92649	IND COM OTH PTY SCC	Retired Averitt's Place Department	\$175.00	275.00	N/A
1/31/2010	Estelle Coward 9233 Columbus Ave North Hills, CA 91343	IND COM OTH PTY SCC	Retired	\$150.00	150.00	N/A
2/24/2010	Carla Coes 6854 Beavens Ave. Fountain, CA 92330	IND COM OTH PTY SCC	FORMER CO-ORDINATOR NAD POST	\$150.00	150.00	N/A
2/10/2010	John W Furtz 203 Riverside Way San Jose, CA 95119	IND COM OTH PTY SCC	Retired	\$150.00	150.00	N/A
1/31/2010	LARRY JEWELL 15324 MORTER DR. LA MESA, CA	IND COM OTH PTY SCC	Retired	\$100.00	100.00	N/A
SUBTOTAL: \$725						

Contributor Codes
 IND - Individual
 COM - Resident Committee
 OTH - Other (e.g., business entity)
 (Other than PTY or SCC)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

STATE OF PENNSYLVANIA
 DEPARTMENT OF REVENUE

Statement covering period: 11/1/2010 to 3/17/2010

NAME OF FILER: John M. Baldoni
Legal Defense Fund

CONTRIBUTOR'S NAME: NIGHTWAVE FOR COURAGE 2011 Committee for Clait

CONTRIBUTOR'S ID NUMBER: 1322554

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
2/3/2010	Joe Kupke P.O. Box 5252 Columbus, GA 31906	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$116.00	\$116.00	N/A
2/20/2010	James Lambert 1258 Summit Road Way San Marcos, CA 92078	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self-employed	\$100.00	\$100.00	N/A
1/12/2010	Don's Limnako PSC 303, Box 73 APO AP 96204	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Military	\$100.00	\$100.00	N/A
2/12/2010	LMY Morgan 190 WA Camino 28 Via 5022 Rancho Santa Margarita, CA 92688	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$150.00	\$150.00	N/A
2/20/2010	GRY ODM P.O. Box 1782 Lancaster, PA 17608	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	NATIONAL FIELD Director (unaffiliated Party)	\$532.00	\$532.00	N/A

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (Other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period

from 11/1/2010

through 5/17/2010

NAME OF FILER: NIGHTWORKS FOR GOVERNOR 2010 Committee
 200 to elect IICOM, DORRIS

John M. Baldwin

fund.

SCHEDULE A (CONT.)
 Page 13 of 33
 LO NUMBER 1522554

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER IS NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER "SELF-EMPLOYED")	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
2/1/2010	See ENZANO P.O. Box 1169 Simi Valley CA 93062	IND COM OTH PTY SCC	Retired.	\$100.00	\$100.00	N/A
2/24/2010	Yvonne A. Boer 832 MIDLAND DRIVE Alpine CA 91901	IND COM OTH PTY SCC	Self employed	\$200	\$200	N/A
3/19/2010	Wendy S. Rubin 4239 N. Clarendon Ave. Rosemead CA 91770	IND COM OTH PTY SCC	Office Administrator	\$1,080.00	\$1,080.00	N/A
7/23/2010	George Short 15120 TERRAPIN COURT RD LA Mirada CA 90638	IND COM OTH PTY SCC	Retired	\$100.00	\$100.00	N/A
11/20/2010	Nancy Spitzer 8158 Palm Street - Lemon Grove CA 91945	IND COM OTH PTY SCC	Retired	\$100.00	\$100.00	N/A
SUBTOTALS 1580.00						

Contributor Codes
 IND - Individual
 COM - Requiring Committee
 (Other than PTY or SCC)
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Form 700 (Rev. 07/08)
 PREPARED BY: (SEE INSTRUCTIONS)

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
 from 1/1/2010
 through 2/10/2010

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 1322554

SCHEDULE A (CONT)

NAME OF FILER: NIGHTINGALE FOR GOVERNOR COMMITTEE TO CLERK
 2010 / Legal Defense Fund

PER ELECTION (IF REQUIRED) 10 DATE (M, D, Y) CALENDAR YEAR (M, D, Y) AMOUNT RECEIVED THIS PERIOD

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTERED NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR (M, D, Y)	PER ELECTION (IF REQUIRED) 10 DATE
2/12/2010	MIKE VA SUTER 1229 GLENWOOD DR. CONRAD, CA 94518	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Police Officer Conrad CA	\$150.00	\$150.00	N/A
2/3/2010	Robert Young 308 Howard St. Beverly, MA 01935	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$176.00	\$176.00	N/A
2/13/2010	David Ditt Oceanside, CA 92054	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$120.00	\$120.00	2/1/10
2/13/2010	Sam M Baldwin 883a Broadway Ave Fontana, CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Student	\$220.00	\$470.00	N/A
2/13/2010	Keneth Madera 601 VAN NISS AVE. #07611 San Francisco, CA 94132	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	\$100.00	\$100.00	2/1/10

SUBTOTALS 766

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 OTH - Other (e.g., business entity)
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
from 11/1/2010
through 2/17/2011

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CON NUMBER

1922554

NAME OF FILER

Sum & Susan Ehrhart
to elect/keep current fund

SCHEDULE A (CONT)

460

DATE RECEIVED	2/16/2010
FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	Sum & Susan Ehrhart 403 Pasadena Way San Jose, CA 95119
CONTRIBUTOR CODE *	IND COM OTH PTY SOC
IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IS SELF-EMPLOYED, ENTER "SELF-EMPLOYED")	Retired
AMOUNT RECEIVED THIS PERIOD	\$100.00
QUANTITIES TO DATE	8/00
FEE SCHEDULE (SEE SECTION TO DATE)	N/A

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IS SELF-EMPLOYED, ENTER "SELF-EMPLOYED")	AMOUNT RECEIVED THIS PERIOD	QUANTITIES TO DATE	FEE SCHEDULE (SEE SECTION TO DATE)
		IND COM OTH PTY SOC				
		IND COM OTH PTY SOC				
		IND COM OTH PTY SOC				
		IND COM OTH PTY SOC				
		IND COM OTH PTY SOC				

SUBTOTALS / 00

- Contribution Codes
- IND - Individual
 - OCM - Recipient Committee
 - OTH - Other (e.g., business entity)
 - PTY - Political Party
 - SOC - Small Contributor Committee

Schedule B - Part 1
Loans Received

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

Statement covers period
from 1/1/2000
through 3/17/2000

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: *Nigam/Asstt For Governor 2000 (cont'd)*

NAME OF LENDER: *State Bank*

ID NUMBER: *1322554*



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Schedule B - Part 1

IF AN INDIVIDUAL, ENTER COOPERATION AND EMPLOYER BEGINNING AND ENDING PERIOD (If self-employed, enter name of business)	FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (If committee, also entered number)	IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SOC <input type="checkbox"/>	PAID <input type="checkbox"/> FORGIVEN <input type="checkbox"/>	OUTSTANDING BALANCE BEGINNING THIS PERIOD (a)	AMOUNT RECEIVED THIS PERIOD (b)	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD (c)	DATE DUE	DATE PAID OR FORGIVEN THIS PERIOD (d)	DATE DUE	DATE PAID OR FORGIVEN THIS PERIOD (e)	TERMINATION YEAR	TERMINATION DATE	DATE INCURRED	DATE INCURRED	DATE INCURRED	DATE INCURRED	DATE INCURRED	DATE INCURRED	SUBTOTALS		
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																				\$	\$

Schedule B Summary

- Loans received this period (Total Column (b) plus unutilized loans of less than \$100.)
- Loans paid or forgiven this period (Total Column (c) plus loans under \$100 paid or forgiven.)
- Net change this period. (Subtract line 2 from line 1.) Enter the net here and on the Summary Page, Column A, Line 2.

NET \$

IND - Individual
COM - Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SOC - Special Contributor Committee

Amounts forgiven or paid by another party also must be reported on Schedule A, if required.

**Instructions for
Schedule B – Part 1
Loans Received**

All loans received or outstanding are reported on Schedule B. Loans include monetary loans and amounts drawn on lines of credit.

Report loan guarantors on Schedule B – Part 2. A "guarantor" is a third party that co-signs, endorses, or provides security for a loan, or establishes or provides security for a line of credit. A guarantor is also making a contribution.

When a state candidate guarantees a loan from a commercial lending institution in connection with his or her election, both the lending institution and the candidate are required to be disclosed as the lender.

For each loan of \$100 or more that was received or was outstanding during the reporting period, disclose the lender's name and address. Report the original source of all loans received. E.g., for a loan from a commercial lending institution for which a candidate is personally liable, report the lending institution as the lender.

Column (a) – Enter the outstanding loan balance at the beginning of this period (Column (d) of last report). If the loan was received this period, this column will be blank.

Column (b) – Enter the amount received from the lender during this reporting period. If this loan was received in a previous reporting period, leave blank.

Column (c) – Enter the amount of any reduction of the loan during this reporting period. Check whether the loan was paid or forgiven. When the lender forgives a loan or a third party makes a payment on a loan, also report the lender or third party on Schedule A.

Column (d) – Enter the outstanding balance of the loan at the close of this reporting period. Enter the due date, if any.

Column (e) – Enter the interest rate and the amount of interest paid on the loan(s) during this reporting period. Interest paid is reported separately from payments made on the loan principal. Interest payments are also transferred to the Schedule E Summary.

Column (f) – Enter the original amount of the loan and date received. If this is the first time you are reporting the loan, this will be the same amount reported in Column (b).

Column (g) – Enter the cumulative amount of conditions (loans, monetary and nonmonetary contributions) received from the lender during the calendar year covered by this statement. Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPC Campaign Disclosure Manual.)

Schedule B Summary:

The Schedule B Summary reflects the "net change" in your loan activity. That is, loan payments made during the period are subtracted from new loans received. When the loan payments number is larger than the amount of new loans received, Line 5 will be a negative figure. For example, if \$200 is paid during the period and only \$100 is received in new

loans, report the net change on Line 3 as "\$100" or "(\$100)." Be sure to carry this figure to the Summary Page as a negative figure to be subtracted from Summary Page totals.

Additional important information:

Refer to the instructions for Schedule A for important information about:

- Contributor Codes
- Contributions from individuals
- Contributions from Committees
- Intermediaries

A loan received from a commercial lending institution in the normal course of business is reportable on Schedule B but is not considered a contribution. Contributor codes and cumulative amounts (Column (g)) are required only for loans that are contributions. Refer to the FPC Campaign Disclosure Manual for your type of committee for important information about recordkeeping provisions on cash contributions, returning contributions, and more.



Schedule B - Part 2

Loan Guarantors

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

Statement covers period
from 1/1/2010
through 2/1/2010

Page 18 of 57

SCHEDULE B - PART 2

SEE INSTRUCTIONS ON REVERSE. NIGHTMARE FOR GOODBOY LAW COMMITTEE
TO EDIT LOCAL DEBTS FORM

NAME OF FILER

Sam Beldin

FULL NAME, STREET ADDRESS AND
ZIP CODE OF GUARANTOR
(IF COMMITTEE, ALSO ENTER ID NUMBER)

CONTRACTOR

CODE

IND

COM

OTH

PTY

SOC

OCCUPATION AND EMPLOYER
OF SELF-EMPLOYED, ENTER
NAME OF BUSINESS

LOAN

AMOUNT
GUARANTEED
THIS PERIOD

CUMULATIVE
TO DATE

BALANCE
OUTSTANDING
TO DATE

CALENDAR YEAR

PER PERIOD
(IF REQUIRED)

1

LENDER

DATE

2

CALENDAR YEAR

PER PERIOD
(IF REQUIRED)

3

LENDER

DATE

4

CALENDAR YEAR

PER PERIOD
(IF REQUIRED)

5

IND

COM

OTH

PTY

SOC

N/A

IND

COM

OTH

PTY

SOC

N/A

IND

COM

OTH

PTY

SOC

N/A

CALENDAR YEAR

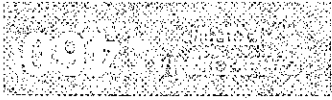
PER PERIOD
(IF REQUIRED)

6

SUBTOTAL \$

17

**Instructions for
Schedule B – Part 2
Loan Guarantors**



Guarantors of loans received or outstanding during the reporting period are reported on Schedule B – Part 2. A "guarantor" is a third party that co-signs, endorses, or provides security for a loan, or establishes or provides security for a line of credit. A guarantor is also making a contribution.

For each guarantor of \$100 or more, enter the name and address of the guarantor and, if the guarantor is an individual, his/her occupation and employer or, if self-employed, the name of his/her business.

Enter the name of the lender or the entity at which a line of credit was established and the date of the loan or the date the line of credit was established.

Enter the amount guaranteed this period, if applicable. For lines of credit, enter the full amount established or secured by the guarantor during the period. (Report amounts drawn on a line of credit on Schedule B – Part 1.)

Enter the cumulative amount guaranteed during the calendar year covered by the statement. Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FPCO Campaign Disclosure Manual.)

Report the outstanding balance for which the guarantor is liable at the close of the reporting period.

Loan guarantors are not included in the Schedule B Summary, but are carried forward in a lump sum to Line 17 of the Summary Page.

Schedule C
Nonmonetary Contributions Received

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

SCHEDULE C
Statement covers period
from 1/1/2010 through 3/17/2010
Page 70 of 53
1322557

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
NIGHTINGALE FOR SUPERIOR 200 COMMITTEE
to court/leave center
Sum Baldwin

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT FAIR MARKET VALUE	QUANTITY TO DATE (UNIT - DEC 31)	PER ELECTION DATE (IF REQUIRED)
---------------	--	--------------------	--	----------------------------------	--------------------------	----------------------------------	---------------------------------

3/8/200	Stephanie Anderson P.O. Box 27045 Fort Collins, CO 80527 0545	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Self employed owner CLEANED LAMAR BUS	40% boots "Signs of Credum"	658 \$ 658 \$	658 \$ 658 \$	N/A
---------	--	---	---	-----------------------------------	------------------	------------------	-----

		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 658 \$

Schedule C Summary

1. Amount received this period - itemized nonmonetary contributions. (Include all Schedule C subtotals.) \$ 658 \$
2. Amount received this period - unitemized nonmonetary contributions of less than \$100. \$ 0
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) TOTAL \$ 658 \$

Contribution Codes
IND - Individual
COM - Recipient Committee
(Other than PTY or SCC)
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee



Instructions for Schedule C Nonmonetary Contributions Received

Report the receipt of nonmonetary contributions on Schedule C.

- Nonmonetary contributions include:
 - Goods and services for which you have not paid the fair market value, including items donated for auctions or garage sales, such as artwork or furniture.
 - A discount that is not available to the public generally.
 - Salary payments made by an employer for an employee who spends 10% or more of his or her compensated time in a calendar month working for your committee.

Volunteer personal services and payments voluntarily made by a person for his or her own campaign-related travel expenses are not reportable. The occupant of a home or office can host a fundraiser without making a nonmonetary contribution as long as the total cost of the fundraiser is \$500 or less.

If a total of \$100 or more is received from a single contributor during a calendar year, report the name, street address, city, state and zip code of the contributor, the amount received from the contributor since January 1 of the current calendar year. Include monetary and nonmonetary contributions and loans when reporting the cumulative amount. Contributions totaling less than \$100 received from a single contributor during a calendar year are reported as a lump sum on Line 2 of the Schedule C Summary.

Date Received:

A nonmonetary contribution has been received on the earlier of the following: 1) the date the contributor made an expenditure for goods or services at your best (in consultation or coordination with you, or at your request or suggestion); or 2) the date you or your agent obtained possession or control of the goods or services.

Per Election to Date:

Candidates subject to state contribution limits (or if required by local ordinance) must disclose the cumulative amount received from each contributor during the limitation cycle in addition to the calendar year cumulative amount. (Candidates for elective state office should refer to FFCO Campaign Disclosure Manual.)

Fair Market Value:

The fair market value of a nonmonetary contribution is the amount it would cost to purchase the goods or services on the open market. The fair market value can be more than the amount it cost the contributor to provide the goods or services to you.

If you do not know the value of a nonmonetary contribution, you may request the contributor to provide you with a written statement of the value. If you make a request in writing and the value of the contribution is \$100 or more, the contributor is required by law to provide the information.

Administrative Services:

Administrative overhead and start-up expenses paid by a sponsoring organization for its sponsored committee are not contributions to the committee but must be reported on Schedule C. Report the value of the services in the "Description of Goods or Services" column and a zero in the "Amount" and "Cumulative to Date" columns.

Nonmonetary Contributions as Expenditures:

The total of nonmonetary contributions is reported on the Summary Page as both contributions received and expenditures made. Enter the total on Line 2 of the Schedule C Summary on both lines 4 and 10 of the Summary Page. (State Candidate: Most nonmonetary contributions also count for purposes of the voluntary expenditure limits.)

Additional Important Information:

Refer to the Instructions for Schedule C for important information about:

- Contributor Codes
- Contributions from Individuals
- Contributions from Committees
- Intermediaries

Refer to the FFCO Campaign Disclosure Manual for your type of committee for important information about aggregating monetary and nonmonetary contributions, recordkeeping, and more.

Schedule D

Summary of Expenditures Supporting/Opposing Other

Candidates, Measures and Committees

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

SEE INSTRUCTIONS ON REVERSE
 NAMES OF FILER: Sum Balthasar
 2010 LEGAL DEFENSE FUND
 NICHOLAS FOR GENERAL COMMITTEE TO ELECT

Statement covers period from 11/2009 through 3/17/2010

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SCHEDULED

DATE	NAME OR CANDIDATE, OFFICE AND DISTRICT OR MEASURE NUMBER OR LETTER AND JURISDICTION OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE (CALENDAR YEAR JAN. 1 - DEC. 31)	PER ELECTION (IF REQUIRED)
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
		<input type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
		<input type="checkbox"/> Support <input type="checkbox"/> Oppose				
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
		<input type="checkbox"/> Support <input type="checkbox"/> Oppose				
SUBTOTAL \$						

Schedule D Summary

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) \$ 0
- Unitemized contributions and independent expenditures made this period of under \$100 \$ 0
- Total contributions and independent expenditures made this period. (Add lines 1 and 2. Do not enter on the Summary Page.) TOTAL \$ 0

