

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

FILE  
Date Stamp  
JUL 06 2007

CALIFORNIA FORM 460

Page 1 of 8

For Official Use Only

Statement covers period  
from 01/01/07  
through 06/30/07

Date of election if applicable:  
(Month, Day, Year)

VICTOR E. SALAZAR, County Clerk  
By: *[Signature]*  
Deputy

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.**

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
*(Also Complete Part 5)*
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
*(Also Complete Part 6)*
- Primarily Formed Candidate/Officeholder Committee  
*(Also Complete Part 7)*

**2. Type of Statement:**

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
*(Also file a Form 410 Termination)*
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
870153

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

FRESNO DEPUTY SHERIFF'S ASSOCIATION  
POLITICAL ACTION COMMITTEE

STREET ADDRESS (NO P.O. BOX)

1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
FRESNO	CA	93721	(559) 268-3372

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

LORETTA KULLBERG

MAILING ADDRESS

1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
FRESNO	CA	93721	(559) 268-3372

NAME OF ASSISTANT TREASURER, IF ANY

JAMES BEWLEY

MAILING ADDRESS

1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
FRESNO	CA	93721	(559) 268-3372

OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this 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 7/05/07  
Date

By *[Signature]*  
Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>01/01/07</u>	<b>CALIFORNIA FORM 460</b>
through <u>06/30/07</u>	
Page <u>2</u> of <u>8</u>	I.D. NUMBER <u>870153</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>9,602.00</u>	\$ <u>9,602.00</u>
2. Loans Received ..... Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>9,602.00</u>	\$ <u>9,602.00</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>9,602.00</u>	\$ <u>9,646.00</u>

**Calendar Year Summary for Candidates  
Running in Both the State Primary and  
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... Schedule E, Line 4	\$ <u>7,694.36</u>	\$ <u>7,694.36</u>
7. Loans Made ..... Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>7,694.36</u>	\$ <u>7,694.36</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>7,694.36</u>	\$ <u>7,694.36</u>

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>6,234.00</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>9,602.00</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>0.00</u>
15. Cash Payments ..... Column A, Line 8 above	<u>7,694.36</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>8,141.64</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 \$ \_\_\_\_\_

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ _____
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ _____

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>01/01/07</u>	<b>CALIFORNIA FORM 460</b>
through <u>06/30/07</u>	
Page <u>3</u> of <u>8</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

I.D. NUMBER

870153

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
		<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				
		<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				
<b>SUBTOTAL \$</b>						

**Schedule A Summary**

- Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 0.00
- Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 9,602.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 9,602.00

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

**Schedule D  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

Statement covers period		SCHEDULED	
from	01/01/07	<b>CALIFORNIA FORM 460</b>	
through	06/30/07	Page <u>4</u> of <u>8</u>	
		I.D. NUMBER 870153	

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

DATE	NAME OF 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 TO DATE (IF REQUIRED)
02/27/07	MIKE VILLINES FOR ASSEMBLY, 2008 PO BOX 606 FRESNO, CA 93709 FPPC #1293100	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		500.00	500.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
03/08/07	BETH EGAN FOR DISTRICT ATTORNEY PO BOX 362 FRESNO, CA 93708 FPPC #1235402	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		700.00	700.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
01/03/07	FRIENDS OF JOE FLORES 1625 E. SHAW, SUITE 130 FRESNO, CA 93710 FPPC #983540	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	100.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				1,300.00		

**Schedule D Summary**

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$ 7,510.39
2. Unitemized contributions and independent expenditures made this period of under \$100	\$ 183.97
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	<b>TOTAL \$ 7,694.36</b>

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period from <u>01/01/07</u> through <u>06/30/07</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>8</u>

NAME OF FILER <b>FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE</b>	I.D. NUMBER <b>870153</b>
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DATE	NAME OF 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 TO DATE (IF REQUIRED)
03/08/07	FRIENDS OF H. R. PEREA PO BOX 4529 FRESNO, CA 93744 FPPC #1253628  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		2,500.00	2,500.00	
04/09/07	FRIENDS OF JOE FLORES 1625 E. SHAW, SUITE 130 FRESNO, CA 93710 FPPC #983540  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		100.00	200.00	
06/07/07	REPUBLICAN PARTY OF FRESNO CO. 2037 W. BULLARD, #342 FRESNO, CA 93711  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		360.00	360.00	
06/07/07	MARGARET MIMS FOR SHERIFF PO BOX 1071 SELMA, CA 93662-1071 FPPC #1283613  <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1,000.00	1,000.00	
<b>SUBTOTAL \$</b>				<b>3,960.00</b>		

**Schedule D  
(Continuation Sheet)  
Summary of Expenditures  
Supporting/Opposing Other  
Candidates, Measures and Committees**

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

SCHEDULE D (CONT.)

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/07	
through	06/30/07	Page <u>6</u> of <u>8</u>

NAME OF FILER <b>FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE</b>	I.D. NUMBER <b>870153</b>
--	------------------------------

DATE	NAME OF 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 TO DATE (IF REQUIRED)
06/12/07	BETH EGAN FOR DISTRICT ATTORNEY PO BOX 362 FRESNO, CA 93708 FPPC #1235402	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		400.00	1,100.00	
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
VARIOUS	PORAC POLITICAL ACTION COMMITTEE 4010 TRUXEL ROAD SACRAMENTO, CA 95834-3725 FPPC #801830	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1,850.39	1,850.39	
	<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					
<b>SUBTOTAL \$</b>				2,250.39		

**Schedule E  
Payments Made**

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

SCHEDULE E

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/07	
through	06/30/07	Page <u>7</u> of <u>8</u>
NAME OF FILER		I.D. NUMBER
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		870153

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<b>CMP</b> campaign paraphernalia/misc.	<b>MBR</b> member communications	<b>RAD</b> radio airtime and production costs
<b>CNS</b> campaign consultants	<b>MTG</b> meetings and appearances	<b>RFD</b> returned contributions
<b>CTB</b> contribution (explain nonmonetary)*	<b>OFC</b> office expenses	<b>SAL</b> campaign workers' salaries
<b>CVC</b> civic donations	<b>PET</b> petition circulating	<b>TEL</b> t.v. or cable airtime and production costs
<b>FIL</b> candidate filing/ballot fees	<b>PHO</b> phone banks	<b>TRC</b> candidate travel, lodging, and meals
<b>FND</b> fundraising events	<b>POL</b> polling and survey research	<b>TRS</b> staff/spouse travel, lodging, and meals
<b>IND</b> independent expenditure supporting/opposing others (explain)*	<b>POS</b> postage, delivery and messenger services	<b>TSF</b> transfer between committees of the same candidate/sponsor
<b>LEG</b> legal defense	<b>PRO</b> professional services (legal, accounting)	<b>VOT</b> voter registration
<b>LIT</b> campaign literature and mailings	<b>PRT</b> print ads	<b>WEB</b> information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
FRIENDS OF JOE FLORES 1625 E. SHAW, SUITE 130 FRESNO, CA 93710 FPPC #983540	FND		200.00
BETH EGAN FOR DISTRICT ATTORNEY PO BOX 362 FRESNO, CA 93708 FPPC #1235402	FND		1,100.00
FRIENDS OF H. R. PEREA PO BOX 4529 FRESNO, CA 93744 FPPC #1253628	FND		2,500.00

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

**SUBTOTAL \$ 3,800.00**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ 7,510.39
2. Unitemized payments made this period of under \$100	\$ 183.97
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	<b>TOTAL \$ 7,694.36</b>

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	01/01/07	
through	06/30/07	Page <u>8</u> of <u>8</u>
NAME OF FILER		I.D. NUMBER
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		870153

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

I.D. NUMBER

870153

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<b>CMP</b> campaign paraphernalia/misc.	<b>MBR</b> member communications	<b>RAD</b> radio airtime and production costs
<b>CNS</b> campaign consultants	<b>MTG</b> meetings and appearances	<b>RFD</b> returned contributions
<b>CTB</b> contribution (explain nonmonetary)*	<b>OFC</b> office expenses	<b>SAL</b> campaign workers' salaries
<b>CVC</b> civic donations	<b>PET</b> petition circulating	<b>TEL</b> t.v. or cable airtime and production costs
<b>FIL</b> candidate filing/ballot fees	<b>PHO</b> phone banks	<b>TRC</b> candidate travel, lodging, and meals
<b>FND</b> fundraising events	<b>POL</b> polling and survey research	<b>TRS</b> staff/spouse travel, lodging, and meals
<b>IND</b> independent expenditure supporting/opposing others (explain)*	<b>POS</b> postage, delivery and messenger services	<b>TSF</b> transfer between committees of the same candidate/sponsor
<b>LEG</b> legal defense	<b>PRO</b> professional services (legal, accounting)	<b>VOT</b> voter registration
<b>LIT</b> campaign literature and mailings	<b>PRT</b> print ads	<b>WEB</b> information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
MIKE VILLINES FOR ASSEMBLY, 2008 PO BOX 606 FRESNO, CA 93709 FPPC #1293100	FND		500.00
REPUBLICAN PARTY OF FRESNO COUNTY 2037 W. BULLARD, #342 FRESNO, CA 93711	FND		360.00
MARGARET MIMS FOR SHERIFF PO BOX 1071 SELMA, CA 93662-1071 FPPC #1283613	FND		1,000.00
PORAC POLITICAL ACTION COMMITTEE 4010 TRUXEL ROAD SACRAMENTO, CA 95834-3725 FPPC #801830	CTB		1,850.39

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

**SUBTOTAL \$ 3,710.39**



# Recipient Committee Campaign Statement – Short Form

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

For use by recipient committees that have not received a contribution or other receipt that must be itemized, have not received or made loans, and have no outstanding accrued expenses.

SHORT FORM

FILED  
Date Stamp  
JAN 28 2008

**CALIFORNIA FORM 450**  
 Page 1 of 3  
For Official Use Only

**VICTOR E. SALAZAR, County Clerk**  
 By: [Signature] Deputy

Statement covers period  
 from 07/01/07  
 through 12/31/07

Date of election if applicable:  
 (Month, Day, Year)

### 1. Type of Recipient Committee:

- Ballot Measure Committee
  - Primarily Formed
  - Controlled
  - Sponsored
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
- Primarily Formed Candidate/Officeholder Committee

### 2. Type of Statement:

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain) \_\_\_\_\_  
(Also check type of statement you are amending)
- Quarterly Statement
- Special Odd-year Report
- Supplemental Pre-election Statement - Attach Form 495

### 3. Committee Information

I.D. NUMBER  
870153

COMMITTEE NAME  
**FRESNO DEPUTY SHERIFF'S ASSOCIATION  
 POLITICAL ACTION COMMITTEE**

STREET ADDRESS (NO P.O. BOX)  
1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>FRESNO</b>	<b>CA</b>	<b>93721</b>	<b>(559) 268-3372</b>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

### Treasurer(s)

NAME OF TREASURER  
**LORETTA KULLBERG**

MAILING ADDRESS  
1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>FRESNO</b>	<b>CA</b>	<b>93721</b>	<b>(559) 268-3372</b>

NAME OF ASSISTANT TREASURER, IF ANY  
**JAMES BEWLEY**

MAILING ADDRESS  
1360 VAN NESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<b>FRESNO</b>	<b>CA</b>	<b>93721</b>	<b>(559) 268-3372</b>

OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

I have used all reasonable diligence in preparing and reviewing this 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 1/28/08  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By [Signature]  
SIGNATURE OF TREASURER OR ASSISTANT TREASURER

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT, OR RESPONSIBLE OFFICER OF SPONSOR

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

By \_\_\_\_\_  
SIGNATURE OF CONTROLLING OFFICEHOLDER, CANDIDATE, STATE MEASURE PROPONENT

**Recipient Committee  
Campaign Statement  
Summary Page**

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

SHORT FORM

Statement covers period		<b>CALIFORNIA FORM 450</b>
from	07/01/07	
through	12/31/07	Page <u>2</u> of <u>3</u>
NAME OF COMMITTEE		I.D. NUMBER
FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE		870153

**Expenditures Made**

1. Expenditures of \$100 or more made this period .....	\$	2,673.97
2. Expenditures under \$100 made this period (Not itemized.) .....		518.06
3. SUBTOTAL EXPENDITURES MADE THIS PERIOD .....	\$	3,192.03
4. Nonmonetary Adjustment .....		0.00
5. Total expenditures made from previous statement .....	\$	7,694.36
(If this is the first statement for the calendar year, enter zero.)		
6. TOTAL EXPENDITURES MADE TO DATE .....	\$	10,886.39

**Contributions Received**

7. Monetary contributions received this period .....	\$	8,165.50
8. Non-monetary contributions received this period .....		0.00
9. Total contributions received from previous statement .....	\$	9,602.00
(If this is the first statement for the calendar year, enter zero.)		
10. TOTAL CONTRIBUTIONS RECEIVED TO DATE .....	\$	17,767.50

**Current Cash Statement**

11. Beginning cash balance .....	\$	8,141.64
12. Cash receipts this period .....		8,165.50
13. Miscellaneous increases to cash .....	\$	0.00
14. Cash expenditures this period .....		3,192.03
15. ENDING CASH BALANCE THIS PERIOD .....	\$	13,115.11

**Recipient Committee  
Campaign Statement – Short Form**

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

Statement covers period  
from 07/01/07  
through 12/31/07

SHORT FORM  
**CALIFORNIA FORM 450**  
Page 3 of 3  
I.D. NUMBER  
870153

SEE INSTRUCTIONS ON REVERSE

NAME OF COMMITTEE

FRESNO DEPUTY SHERIFF'S ASSOCIATION POLITICAL ACTION COMMITTEE

**5. Payments Made** (If more space is needed, use additional copies of this page for continuation sheets.)

DATE*	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF PAYMENT	NAME OF CANDIDATE AND OFFICE OR NAME OF BALLOT MEASURE AND BALLOT NUMBER OR LETTER AND JURISDICTION	AMOUNT THIS PERIOD	CUMULATIVE AMOUNTS TO DATE*
08/29/07	MARGARET MIMS FOR SHERIFF PO BOX 1071 SELMA, CA 93662-1071 FFPC #1283613	CONTRIBUTION	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	1,500.00	Calendar Year \$ 2,500.00 Other \$ _____
09/12/07	EGAN FOR DISTRICT ATTORNEY PO BOX 362 FRESNO, CA 93708-0362 FPPC #1235402	CONTRIBUTION	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	500.00	Calendar Year \$ 1,600.00 Other \$ _____
10/04/07	VILLINES FOR ASSEMBLY 2008 1127 11TH STREET, SUITE 310 SACRAMENTO, CA 95814 FPPC #1293100	CONTRIBUTION	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> Contribution <input type="checkbox"/> Ind. Exp.	500.00	Calendar Year \$ 1,000.00 Other \$ _____
<b>SUBTOTAL \$</b>				2,500.00	

\* Required only for payments which are contributions or independent expenditures.