

Late Contribution Report

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

LATE CONTRIBUTION REPORT

NAME OF FILER COMMITTEE TO ELECT ILA METTEE-MC CUTCHON		Date of This Filing _____ Montevideo	Date Stamp MAY 21 2008	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER	I.D. NUMBER (if applicable) 1302716	Report No. _____		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY	STATE	ZIP CODE	No. of Pages _____	3/4

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (* SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
05/20/2008	Valley Farm Management, Inc. Soledad CA 93960-9507 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500.00
05/20/2008	D'Arrigo Bros. Co. Salinas CA 93902-0850 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500.00
05/20/2008	Monterey County Prosecutor's Association Salinas CA 93902-0376 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2000.00

*Contributor Codes
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Reason for Amendment: _____

MAY-21-2008 14:31
DUNLAP, STEINBRUNER, LUBOW
831 625 9308 P. 04/05

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NAME OF FILER COMMITTEE TO ELECT ILA METTEE-MC CUTCHON			Date of This Filing <u>05/21/2008</u>	Date Stamp <div style="font-size: 2em; font-weight: bold; opacity: 0.5;">RECEIVED</div> MAY 21 2008	CALIFORNIA FORM 497 For Official Use Only County Registrar of Voters	
AREA CODE/PHONE NUMBER (831) 884-9042	I.D. NUMBER (if applicable) 1302716	Report No. <u>20080521-500857E-02</u>		No. of Pages <u>4</u>		
STREET ADDRESS _____			<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>			
CITY Marina	STATE CA	ZIP CODE 93933-2785	1/4			

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED
05/20/2008 	Janet Gollnick Salinas CA 93908-9106 ID:	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Bookkeeper it's Cactus	1000.00
05/20/2008 	S.A.M. Account Soledad CA 93960-9830 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500.00
05/20/2008 	R.C. Farms, Inc Salinas CA 93908-8758 ID:	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2000.00

***Contributor Codes**

IND - Individual	PTY - Political Party
COM - Recipient Committee (other than PTY or SCC)	SCC - Small Contributor Committee
OTH - Other	

Reason for Amendment: _____

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STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ <small>(explain below)</small>	
CITY	STATE	ZIP CODE	No. of Pages _____ 274

Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION <small>(IF APPLICABLE)</small>
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		
	ID:	Ballot: Dist:		

Reason for Amendment: _____

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