| | | | | | | SCHEDULE F | |
|--|--|--|---------------------------------------|--|---|--|--|
| Schedule F Accrued Expenses (Unpaid Bills) | | | Statement cover | Statement covers period CALIFORNIA | | | |
| | | | from07/01 | ./2006_ R | ORM | -100 | |
| | | | through <u>12/31</u> | ./2006 P | age1 | ² of13 | |
| NAME OF FILER Zev Yaroslavsky, Supervisor Yaroslavsky Officeholder | | | | | I.D. NUMBER | | |
| | | | | | 983499 | | |
| CODES: If one of the following codes accurately describe | es the payment, you may e | nter the code. Other | wise, describe the p | ayment. | | | |
| CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings | MTG meetings and appearances RFD OFC office expenses SAL PET petition circulating TEL PHO phone banks TRC POL polling and survey research TRS POS postage, delivery and messenger services TSF PRO professional services (legal, accounting) VOT | | | irned contributions npaign workers sa or cable airlime a ididate travel, lodg ff/spouse travel, lo nsfer between com er registration | ign workers salaries cable airtime and production costs ate travel, lodging and meals (explain) couse travel, lodging and meals (explain) r between committees of the same candidate/spor | | |
| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUND PAI THIS PERIOI (ALSO REPORT C |) BA | (d) OUTSTANDING LANCE AT CLOSE OF THIS PERIOD | |
| Park LaBrea News/Beverly Press | PRT | 0.00 | 528.00 | | 0.00 | 528.00 | |
| | | | | | | | |
| | SUBTOTALS | \$ 0.00 | \$ 528.00 | \$ | 0.00 \$ | 528.00 | |

Schedule F Summary

| Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for payments for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) | \$528.00 |
|---|----------|
| 2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) | \$0.00 |
| 3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) | \$528.00 |