

ORIGINAL

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

COVER PAGE

CALIFORNIA 2001/02 FORM 460

Page 1 of 12 For Official Use Only

Date Stamp

Type or print in ink

RECEIVED

Date of election applicable (Month, Day, Year)

10/17/2004

Statement covers period from

10/17/2004

through

10/28/2004

CITY OF COTATI CITY MEAS/02/2004/CLERK

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
General Purpose Committee
Sponsored
Small Contributor Committee
Political Party/Central Committee

2. Type of Statement:

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

3. Committee Information

I.D. NUMBER 1269377

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

STREET ADDRESS (NO P.O. BOX) 170 East Cotati Avenue
CITY Cotati, CA 94926
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX P.O. Box 489
CITY Cotati, CA 94931-0489

Treasurer(s)

NAME OF TREASURER Mr. Henry C. Levy
MAILING ADDRESS 5940 College Avenue, Suite C
CITY Oakland, CA 94618
STATE ZIP CODE AREA CODE/PHONE 510-652-1000
NAME OF ASSISTANT TREASURER, IF ANY Ms. Stacy E. Owens
MAILING ADDRESS 5940 College Avenue, Suite C
CITY Oakland, CA 94618
STATE ZIP CODE AREA CODE/PHONE 510-652-1000
OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 10/28/2004 Date
By [Signature] Signature of Treasurer or Assistant Treasurer
By [Signature] Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
By [Signature] Signature of Controlling Officerholder, Candidate, State Measure Proponent
By [Signature] Signature of Controlling Officerholder, Candidate, State Measure Proponent

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Recipient Committee Campaign Statement Cover Page — Part 2

CALIFORNIA FORM **460**

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE _____

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) _____

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) _____ CITY _____ STATE _____ ZIP _____

6. Ballot Measure Committee

NAME OF BALLOT MEASURE
An Initiative to Restrict Retail Business Uses in Cotati -

BALLOT NO. OR LETTER _____ JURISDICTION
City of Cotati, CA

SUPPORT
 OPPOSE

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT _____

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	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

OFFICE SOUGHT OR HELD _____ DISTRICT NO. IF ANY _____

7. Primarily Formed Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

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

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA
FORM **460**

Page 3 of 12

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

I.D. NUMBER

1269377

Statement covers period

from 10/17/2004

through 10/28/2004

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 0.00	\$ 150,000.00
2. Loans Received Schedule B, Line 3	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 0.00	\$ 150,000.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 0.00	\$ 150,000.00

Expenditures Made

6. Payments Made Schedule E, Line 4	\$ 24,300.14	\$ 142,526.18
7. Loans Made Schedule H, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 24,300.14	\$ 142,526.18
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-5,620.00	4,414.00
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 18,680.14	\$ 146,940.18

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 31,773.96
13. Cash Receipts Column A, Line 3 above	0.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	24,300.14
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 7,473.82

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

17. LOAN GUARANTEES RECEIVED

..... Schedule B, Part 2	\$ 0.00
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Cash Equivalents and Outstanding Debts

18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 4,414.00

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

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

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
\$ _____	____/____/____	\$ _____
\$ _____	____/____/____	\$ _____
\$ _____	____/____/____	\$ _____
\$ _____	____/____/____	\$ _____
\$ _____	____/____/____	\$ _____
\$ _____	____/____/____	\$ _____

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)
I.D. NUMBER
1269377

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 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
 MBR member communications
 MTG meetings and appearances
 OFC office expenses
 OFC petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads
 RAD radio airtime and production costs
 RFD returned contributions
 SAL campaign workers' salaries
 TEL t.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF transfer between committees of the same candidate/sponsor
 VOT voter registration
 WEB 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
AEQUUS Resources 2633 Telegraph Ave., #206 Oakland CA 94612	POL		Re-issue of check reported in prior period and not received by vendor	1,500.00
AEQUUS Resources 2633 Telegraph Ave., #206 Oakland CA 94612	POL		Check reported in prior period not received by vendor - voided and reissued	-1,500.00
Bagatelos Law Firm 380 West Portal Avenue, Suite F San Francisco CA 94127	PRO			840.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.				SUBTOTAL \$ 840.00

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) \$ 24,300.14

2. Unitemized payments made this period of under \$100 \$ 0.00

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.) **TOTAL \$** 24,300.14

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC

CALIFORNIA FORM 460

Statement covers period
from 10/17/2004
through 10/28/2004

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I.D. NUMBER
1269377

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

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

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	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
Brian Condon 4842 Carriage Lane Santa Rosa CA 95403	SAL			800.00
Jacqueline Dell'Osso 227 Eagle Drive Cotati CA 94931	SAL			755.00
Inga Johnson 125 Pinewood Court Cotati CA 94931	SAL			670.00
Joyce C. IaMar 9 George Street Cotati CA 94931	SAL			920.00
Nancy Sarris 1153 Hexem Avenue Santa Rosa CA 95404	SAL			785.00

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

SUBTOTAL \$ 3,930.00

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

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

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

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

AMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PEE	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/balot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	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
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	POS			1,000.00
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	LIT		See Schedule G for sub-vendor expenditures of \$500 or more.	8,018.84
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	POL			408.96
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	LIT			5,147.35
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	CMP			1,505.00

* Payments that are contributions or independent expenditures must also be summarized on Schedule D. **SUBTOTAL \$ 16,080.15**

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

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

Statement covers period
from 10/17/2004
through 10/28/2004

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I.D. NUMBER
1269377

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Citizens to Protect Cotati, No on Measure P...(Please See Attachment Page for Entire Committee Name)

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PET | petition circulating | TEL | t.v. or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHO | phone banks | TRC | candidate travel, lodging, and meals |
| FND | fundraising events | POL | polling and survey research | TRS | staff/spouse travel, lodging, and meals |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | 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
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	POS			500.00
Stearns Consulting, Inc. 174 Ripley Street San Francisco CA 94114	LIT		See Schedule G for sub-vendor expenditures of \$500 or more.	2,099.99
Earl Wakser 140 Chapala Drive Santa Rosa CA 95403	SAL			850.00
SUBTOTAL \$				3,449.99

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

**Schedule F
Accrued Expenses (Unpaid Bills)**

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

Statement covers period
from 10/17/2004
through 10/28/2004

**CALIFORNIA 460
FORM**

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)
I.D. NUMBER
1269377

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 MBR member communications
 MTG meetings and appearances
 OFC office expenses
 PET petition circulating
 PHO phone banks
 POL polling and survey research
 POS postage, delivery and messenger services
 PRO professional services (legal, accounting)
 PRT print ads
 RAD radio airtime and production costs
 RFD returned contributions
 SAL campaign workers' salaries
 TEL t.v. or cable airtime and production costs
 TRC candidate travel, lodging, and meals
 TRS staff/spouse travel, lodging, and meals
 TSF transfer between committees of the same candidate/sponsor
 VOT voter registration
 WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF 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) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Bagatelos Law Firm 380 West Portal Avenue, Suite F San Francisco CA 94127	PRO	840.00	0.00	840.00	0.00
Bagatelos Law Firm 380 West Portal Avenue, Suite F San Francisco CA 94127	PRO	4,414.00	0.00	0.00	4,414.00
Brian Condon 4842 Carriage Lane Santa Rosa CA 95403	SAL	800.00	0.00	800.00	0.00
SUBTOTALS \$		6,054.00 \$	0.00 \$	1,640.00 \$	4,414.00

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

Schedule F Summary

- Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.) **INCURRED TOTALS \$** 0.00
- Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$** 5,620.00
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -5,620.00
May be a negative number

**Schedule F (Continuation Sheet)
Accrued Expenses (Unpaid Bills)**

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

**CALIFORNIA 460
FORM**

Statement covers period
from 10/17/2004
through 10/28/2004

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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

I.D. NUMBER
1269377

Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

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

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

NAME AND ADDRESS OF 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) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Jacqueline Dell'Osso 227 Eagle Drive Cotati CA 94931	SAL	755.00	0.00	755.00	0.00
Inga Johnson 125 Pinewood Court Cotati CA 94931	SAL	670.00	0.00	670.00	0.00
Joyce C. LaMar 9 George Street Cotati CA 94931	SAL	920.00	0.00	920.00	0.00
Nancy Sarris 1153 Hexem Avenue Santa Rosa CA 95404	SAL	785.00	0.00	785.00	0.00
Earl Wakser 140 Chapala Drive Santa Rosa CA 95403	SAL	850.00	0.00	850.00	0.00
SUBTOTALS \$		3,980.00	0.00	3,980.00	0.00

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

Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

CALIFORNIA FORM 460

Statement covers period from 10/17/2004 through 10/28/2004

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

I.D. NUMBER
1269377

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Stearns Consulting, Inc.

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

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

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Autumn Press 1280 65th Street Emeryville CA 94608	LIT			3,246.84
Autumn Press 1280 65th Street Emeryville CA 94608	LIT			2,099.99
Peter K. 200 Clinton Street - 5L Brooklyn NY 11201	LIT			2,500.00
Precise Mailing 168 Beacon St. S San Francisco CA 94080	LIT			908.80

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 8,755.63

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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Schedule G

Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

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

SCHEDULE G

CALIFORNIA
FORM 460

Statement covers period
from 10/17/2004

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through 10/28/2004

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

I.D. NUMBER

1269377

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Stearns Consulting, Inc.

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
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| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
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| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense | PRO | professional services (legal, accounting) | VOT | voter registration |
| LIT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
US Postal Service 1300 Evans Street San Francisco CA 94124	POS			1,363.20

Attach additional information on appropriately labeled continuation sheets.

TOTAL * \$ 1,363.20

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

www.netfile.com

Additional Comments
For Form 460

I.D. NUMBER
1269377

NAME OF FILER

Citizens to Protect Cotati, No on Measure P... (Please See Attachment Page for Entire Committee Name)

Committee's Full Name: Citizens to Protect Cotati, No on Measure P, a coalition including: Cotati City Council Members, Chamber of Commerce, Police, and community leaders and endorsed by hundreds of Cotati citizens; Major funding by: retail store Lowe's HIW, Inc. & retail project manager Newman Development Group of Cotati, LLC