Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

FILED

Date Stamp MAR 22 2006 REGISTRAR OF VOTERS By Deputy

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

Page 1 of 20

For Official Use Only

COPY

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 01/01/2006 through 03/17/2006

Date of election if applicable (Month, Day, Year) 06/06/2006

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

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

2. Type of Statement:

- [X] 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 1278722

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

Ralph Martin For OC Sheriff

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

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

Dennis Werner

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

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 03/21/2006 (Date) By Dennis Werner (Signature of Treasurer or Assistant Treasurer)

Executed on 03/21/2006 (Date) By Ralph Martin (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)

Recipient Committee Campaign Statement Cover Page — Part 2

Type or print in ink.

COVER PAGE - PART 2

CALIFORNIA FORM **460**

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

Ralph Martin

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

County Sheriff, Orange County, District: -

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

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

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	☐ SUPPORT ☐ OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

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 ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	☐ SUPPORT ☐ OPPOSE

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**

Statement covers period
from 01/01/2006
through 03/17/2006

Page 3 of 20

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTALT O DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 26,149.00	$ 26,149.00
2. Loans Received	*Schedule B, Line 7*	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 26,149.00	$ 26,149.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 26,149.00	$ 26,149.00

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	$ 0.00	$ 0.00
21. Expenditures Made	$ 0.00	$ 0.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 42,061.35	$ 42,061.35
7. Loans Made	*Schedule H, Line 7*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 42,061.35	$ 42,061.35
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	2,470.37	2,889.11
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0.00	0.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 44,531.72	$ 44,950.46

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.

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 96,254.16
13. Cash Receipts	*Column A, Line 3 above*	26,149.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	0.00
15. Cash Payments	*Column A, Line 8 above*	42,061.35
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 80,341.81

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

17. LOAN GUARANTEES RECEIVED ..... *Schedule B, Part 2* $ 0.00

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).

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*	$ 2,889.11

Schedule A
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA FORM **460**

Statement covers period
from 01/01/2006
through 03/17/2006

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
02/24/2006	Anaheim Healthcare Center	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		1,500.00	1,500.00	$1500 P2006
02/15/2006	Maria Arce	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker N/A	100.00	100.00	$100 P2006
02/15/2006	Irving Bauman	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	COO & President Sun Mar Health Corp.	1,500.00	1,500.00	$1500 P2006
03/17/2006	Michael Borges	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Lieutenant Los Angeles Sheriff Department	150.00	150.00	$150 P2006
01/27/2006	William Brauberger	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	$100 P2006
			SUBTOTAL $	3,350.00		

Schedule A Summary

1. Amount received this period – contributions of $100 or more. (Include all Schedule A subtotals.) ..... $ 26,000.00
2. Amount received this period – unitemized contributions of less than $100 ..... $ 149.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 26,149.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
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.

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
01/11/2006	Bronx Tale Holdings LLC	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		1,500.00	1,500.00	$1500 P2006
03/17/2006	Gary De Cew	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy Sheriff Los Angeles County	150.00	150.00	$150 P2006
03/06/2006	Ellis Realty	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	$100 P2006
01/20/2006	Lawrence Esten	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Manning & Marter	100.00	100.00	$100 P2006
01/11/2006	Christina Flores	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Homemaker N/A	1,500.00	1,500.00	$1500 P2006
			SUBTOTAL $	3,350.00		

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IND – Individual
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
03/17/2006	Alex Friedman	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	1,000.00	1,000.00	$1000 P2006
02/24/2006	Thomas Gahry	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	$100 P2006
03/06/2006	Peggy Halberg	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	100.00	100.00	$100 P2006
02/24/2006	John Harris Jr	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sergeant LA County Sheriff	100.00	100.00	$100 P2006
02/24/2006	Durell Hensley	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Hensley & Hensley	500.00	500.00	$500 G2006
			SUBTOTAL $	1,800.00		

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IND – Individual
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

NAME OF FILER
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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)
03/06/2006	Heritage Manor Healthcare	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		1,500.00	1,500.00	$1500 P2006
02/15/2006	John Hocking	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy Sheriff LA County Sheriff	200.00	200.00	$200 P2006
02/24/2006	Delene Hoff	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Board Member Santa Margarita Catholic High School	250.00	250.00	$250 G2006
03/17/2006	John Hook	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Owner Mesa Homes	1,000.00	1,000.00	$1000 P2006
02/15/2006	Frank Johnson	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CEO Sunmar Healthcare	1,500.00	1,500.00	$1500 P2006
			SUBTOTAL $	4,450.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM 460

NAME OF FILER
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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)
01/12/2006	Stephen Lookabaugh	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired N/A	1,500.00	1,500.00	$1500 P2006
01/04/2006	Luke Lucas	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer T-Mobile USA	100.00	100.00	$100 P2006
02/15/2006	Lawrence Malone	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Landlord Personal Real Estate	1,500.00	1,500.00	$1500 P2006
01/11/2006	Craig Miller	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Car Dealer Miller Autosports	100.00	100.00	$100 P2006
03/17/2006	Neill Murchison	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy Sheriff Los Angeles County	150.00	150.00	$150 P2006
			SUBTOTAL $	3,350.00		

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OTH – Other
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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM 460

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
03/14/2006	Cheryl Newman	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Law Enforcement LASD	100.00	100.00	$100 P2006
03/17/2006	Denise Oglesby	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Deputy Sheriff Los Angeles County	150.00	150.00	$150 P2006
03/17/2006	Reuben Padilla	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Sales PCI	500.00	500.00	$500 P2006
02/15/2006	William Presnell	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	CFO Sumar Healthcare	1,500.00	1,500.00	$1500 P2006
01/13/2006	John Radeleff	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Commander Los Angeles Sheriff's Department	250.00	250.00	$500 P2006
			SUBTOTAL $	2,500.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

Type or print in ink.
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SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
03/17/2006	Alex Rossi	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Administration County Of Los Angeles	150.00	150.00	$150 P2006
03/16/2006	James Schallert	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Deputy Sheriff Los Angeles County	1,000.00	1,000.00	$1000 P2006
02/24/2006	David Shaby	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Shaby's Real Estate	1,500.00	2,500.00	$1500 P2006 $1000 G2006
02/24/2006	David Shaby	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Real Estate Shaby's Real Estate	1,000.00	2,500.00	$1500 P2006 $1000 G2006
03/06/2006	Michael Soderberg	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired N/A	100.00	100.00	$100 P2006
			SUBTOTAL $	3,750.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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)
03/17/2006	Arthur Stie	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired N/A	150.00	150.00	$150 P2006
03/17/2006	Thomas Strain	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired N/A	150.00	150.00	$250 P2006
01/11/2006	Tomasa Flores Trust	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,500.00	1,500.00	$1500 P2006
03/17/2006	UFCW Region 8 States Council Political Education Fund California State	[ ] IND [ ] COM [ ] OTH [ ] PTY [X] SCC		1,500.00	1,500.00	$1500 P2006
03/17/2006	David Whitham	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Deputy Sheriff LACSD	150.00	150.00	$550 P2006
			SUBTOTAL $	3,450.00		

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Schedule E
Payments Made

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

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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
Orange County Registrar Of Voters	FIL		1,718.70
Orange County Registrar Of Voters	FIL		16,027.00
Spinelli Graphics	LIT		1,238.59

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

SUBTOTAL $ 18,984.29

Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) ..... $ 41,961.40
2. Unitemized payments made this period of under $100 ..... $ 99.95
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 $** 42,061.35

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2006 through 03/17/2006

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Ralph Martin For OC Sheriff

I.D. NUMBER: 1278722

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
Spinelli Graphics	LIT		1,467.24
Shallman Communications	CNS		15,000.00
Verizon Wireless	OFC		153.65
VISA	POS		622.04
Office Depot	OFC		Memo: 149.31

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

SUBTOTAL $ 17,242.93

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2006 through 03/17/2006

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Ralph Martin For OC Sheriff

I.D. NUMBER: 1278722

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
US Postmaster	POS		Memo: 448.79
VISA	OFC		45.49
Nova Information Systems	OFC		8.00
Nova Information Systems	OFC		20.00
Nova Information Systems	OFC		60.00

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

SUBTOTAL $ 133.49

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 01/01/2006 through 03/17/2006

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER: Ralph Martin For OC Sheriff

I.D. NUMBER: 1278722

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
Nova Information Systems	OFC		8.00
Nova Information Systems	OFC		80.00
Nova Information Systems	OFC		48.00
Visa	TRS		77.07
Hyatt Hotel - Sacramento	TRS		Memo: 77.07

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

SUBTOTAL $ 213.07

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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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
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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
Visa	OFC		560.60
Verizon Wireless	OFC		108.19
Grant And Associates Web Service	WEB		59.95
Grant And Associates Web Service	WEB		59.95
Smack Dab Marketing	LIT		200.00

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

SUBTOTAL $ 988.69

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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CNS campaign consultants
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CVC civic donations
FIL candidate filing/ballot fees
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LEG legal defense
LIT campaign literature and mailings
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 PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
SG Consulting	PRO		2,353.93
Corner Bakery	MTG		Memo: 23.45
Hyatt Regency	TRS		Memo: 106.98
Southwest Airlines	TRS		Memo: 212.10
County Of Orange	FIL		Memo: 11.40

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SUBTOTAL $ 2,353.93

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink.
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SCHEDULE E (CONT.)

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM **460**

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
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I.D. NUMBER
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MTG meetings and appearances
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PET petition circulating
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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
SG Consulting	CNS		2,045.00
Democratic Foundation Of Orange Co-State ID: 830453	CTB		Memo: 45.00

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

SUBTOTAL $ 2,045.00

Schedule F
Accrued Expenses (Unpaid Bills)

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

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
1278722

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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
Spinelli Graphics	LIT	0.00	2,780.92	0.00	2,780.92
Verizon Wireless	OFC	0.00	108.19	0.00	108.19
VISA	OFC Subvendor: Office Depot	218.74	-218.74	0.00	0.00
	SUBTOTALS $	218.74 $	2,670.37 $	0.00 $	2,889.11

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

Schedule F Summary

1. 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 $ 2,670.37
2. 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 $ 200.00
3. Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... NET $ 2,470.37
   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.

Statement covers period
from 01/01/2006
through 03/17/2006

CALIFORNIA FORM 460

NAME OF FILER
Ralph Martin For OC Sheriff

I.D. NUMBER
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MBR member communications
MTG meetings and appearances
OFC office expenses
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PHO phone banks
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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)

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

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
Smack Dab Marketing	LIT	200.00	0.00	200.00	0.00
	SUBTOTALS $	200.00 $	0.00 $	200.00 $	0.00