Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

FILE

Date Stamp

MAY 26 2006

REGISTRAR OF VOTERS

By _____ Deputy

COVER PAGE

CALIFORNIA 2001/02 FORM **460**

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
  - ◯ 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:

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

Amendment to Sch A for addresses

3. Committee Information

I.D. NUMBER 1237231

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

Norby for Supervisor

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

Betty Presley

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 5-23-06 (Date) By Betty Presley (Signature of Treasurer or Assistant Treasurer)

Executed on 5-25-06 (Date) By X Chris Norby (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

Chris Norby

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Board of Supervisors
County of Orange

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. Primarily Formed 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 Candidate/Officeholder 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

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

CALIFORNIA FORM **460**

Page 3 of 27

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

Contributions Received

		Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	*Schedule A, Line 3*	$ 14,375.00	$ 14,375.00
2. Loans Received	*Schedule B, Line 3*	0.00	0.00
3. SUBTOTAL CASH CONTRIBUTIONS	*Add Lines 1 + 2*	$ 14,375.00	$ 14,375.00
4. Nonmonetary Contributions	*Schedule C, Line 3*	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED	*Add Lines 3 + 4*	$ 14,375.00	$ 14,375.00

Expenditures Made

6. Payments Made	*Schedule E, Line 4*	$ 28,285.28	$ 28,285.28
7. Loans Made	*Schedule H, Line 3*	0.00	0.00
8. SUBTOTAL CASH PAYMENTS	*Add Lines 6 + 7*	$ 28,285.28	$ 28,285.28
9. Accrued Expenses (Unpaid Bills)	*Schedule F, Line 3*	0.00	0.00
10. Nonmonetary Adjustment	*Schedule C, Line 3*	0.00	0.00
11. TOTAL EXPENDITURES MADE	*Add Lines 8 + 9 + 10*	$ 28,285.28	$ 28,285.28

Current Cash Statement

12. Beginning Cash Balance	*Previous Summary Page, Line 16*	$ 223,646.65
13. Cash Receipts	*Column A, Line 3 above*	14,375.00
14. Miscellaneous Increases to Cash	*Schedule I, Line 4*	416.00
15. Cash Payments	*Column A, Line 8 above*	28,285.28
16. **ENDING CASH BALANCE**	*Add Lines 12 + 13 + 14, then subtract Line 15*	$ 210,152.37

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

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

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*	$ 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).

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	$	$

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
/ /	$
/ /	$

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

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
Norby for Supervisor

I.D. NUMBER
1237231

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)
02/09/2006	Ray Andrews	[X] IND	Retired	100.00	100.00	P 06 200.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
02/26/2006	Mr. Philip Anthony	[X] IND	Consultant	250.00	100.00	P 06 1,500.00
		[ ] COM	Philip L. Anthony, Inc.			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
02/28/2006	Mr. Philip Anthony	[X] IND	Consultant	-150.00	100.00	P 06 1,500.00
		[ ] COM	Philip L. Anthony, Inc.			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
01/21/2006	Fay L. Bowman	[X] IND	Homemaker	100.00	100.00	P 06 100.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
03/12/2006	James Boyd	[X] IND	Dentist	250.00	250.00	P 06 250.00
		[ ] COM	James Boyd, DDS			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
			SUBTOTAL $	550.00		

Schedule A Summary

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) ..... $ 12,850.00
2. Amount received this period – unitemized monetary contributions of less than $100 ..... $ 1,525.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL $** 14,375.00

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA FORM 460

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

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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)
03/12/2006	David D. Boyer	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Attorney David D. Boyer, APC	250.00	250.00	P 06 250.00
02/14/2006	Stephen W. Bristol	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President Cipher Data Resources	200.00	200.00	P 06 200.00
01/20/2006	Mark Bucher	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	CEO Employers Resource	500.00	500.00	P 06 500.00
02/09/2006	Roger Burtner	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Consulting Geologist Roger Burtner	100.00	100.00	P 06 300.00
02/09/2006	Jerry Christie	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 100.00
			SUBTOTAL $	1,150.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

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

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02/26/2006	William R. Cramer	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	CFO/Owner Star Milling Co.	250.00	250.00	P 06 250.00
02/26/2006	Jack M. Dangelo	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Developer GDC, LLC	250.00	250.00	P 06 750.00
03/06/2006	Richard Davenport	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	300.00	300.00	P 06 900.00
03/06/2006	Janet Davis	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Homemaker None	200.00	200.00	P 06 350.00
02/09/2006	Mr. Conrad DeWitte	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Broker Lender CD Financial Services	100.00	100.00	P 06 300.00
			SUBTOTAL $	1,100.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

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from 01/01/2006
through 03/17/2006

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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)
01/11/2006	Doug Bender & Associates	☐IND ☐COM ☒OTH ☐PTY ☐SCC		500.00	500.00	P 06 600.00
02/09/2006	Cline Duff	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	100.00	P 06 150.00
03/06/2006	Socorra Duran	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker None	100.00	100.00	P 06 200.00
02/15/2006	Theodore E. Eck F	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Sales Manager Sopp Chevrolet	100.00	100.00	P 06 100.00
02/26/2006	Janice Frates	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Professor Cal State University Long Beach	250.00	250.00	P 06 250.00
			SUBTOTAL $	1,050.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

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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)
02/06/2006	Thomas N. Fuelling	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	250.00	250.00	P 06 250.00
02/26/2006	G Companies	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		250.00	250.00	P 06 250.00
02/09/2006	Lois J. Godfrey	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	250.00	250.00	P 06 250.00
02/09/2006	Edward Goldstein	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Attorney Edward Goldstein Esq	500.00	500.00	P 06 1,000.00
03/06/2006	Mr. Carl Gregory	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	President Fullerton Savings and Loan	200.00	200.00	P 06 250.00
			SUBTOTAL $	1,450.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

Statement covers period
from 01/01/2006
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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)
02/09/2006	Mr. Phil Grenkavich	[X] IND	Retired	100.00	100.00	P 06 200.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
02/15/2006	Mr. Richard Gunter	[X] IND	Retired	250.00	250.00	P 06 700.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
02/26/2006	John E. Hoagland	[X] IND	Consultant/Principal	250.00	250.00	P 06 250.00
		[ ] COM	John E. Hoagland & Associates			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
03/06/2006	Mary B. Homme	[X] IND	Homemaker	100.00	100.00	P 06 200.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
02/09/2006	Richard L. Hopping, O.D.	[X] IND	Retired	100.00	100.00	P 06 100.00
		[ ] COM	None			
		[ ] OTH				
		[ ] PTY				
		[ ] SCC				
			SUBTOTAL $	800.00		

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

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

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

NAME OF FILER
Norby for Supervisor

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1237231

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)
01/21/2006	HRP Landesign	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	250.00	P 06 250.00
02/26/2006	JR Enterprises	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		250.00	250.00	P 06 250.00
02/14/2006	KB Homes	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		500.00	500.00	P 06 500.00
02/06/2006	Law Offices of Linda Hilsen	☐ IND ☐ COM ☒ OTH ☐ PTY ☐ SCC		100.00	100.00	P 06 100.00
02/26/2006	Barbara Love	☒ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Director of Case Management/Social Services Tenet Healthcare	250.00	250.00	P 06 250.00
			SUBTOTAL $	1,350.00		

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Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM **460**

Statement covers period
from 01/01/2006
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NAME OF FILER
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I.D. NUMBER
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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	Mrs. Betty Lundgren	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 150.00
02/15/2006	Mr. Joseph Maag	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 150.00
02/26/2006	MJF Consulting, Inc.	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		100.00	100.00	P 06 150.00
03/06/2006	Bettina Murphy	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Homemaker None	100.00	100.00	P 06 100.00
02/09/2006	Bernard Novak	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Surgeon National Ambulatory Hernia	250.00	250.00	P 06 250.00
			SUBTOTAL $	650.00		

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PTY – Political Party
SCC – Small Contributor Committee

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

CALIFORNIA FORM 460

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

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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)
02/26/2006	Rick Engineering Company	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	P 06 250.00
02/23/2006	Robert A. Owen, A Professional Corp.	☐IND ☐COM ☒OTH ☐PTY ☐SCC		250.00	250.00	P 06 250.00
01/21/2006	Mr. Howard Roob	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Medical Officer Manager Orange Coast Oncology	100.00	100.00	P 06 200.00
02/09/2006	Mrs. Margaret Salisbury	☒IND ☐COM ☐OTH ☐PTY ☐SCC	Retired None	100.00	100.00	P 06 375.00
02/26/2006	Bruce R. Scherer	☒IND ☐COM ☐OTH ☐PTY ☐SCC	General Contractror BRS Inc.	150.00	150.00	P 06 150.00
			SUBTOTAL $	850.00		

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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.)

CALIFORNIA FORM 460

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

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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)
02/15/2006	Mrs. Betty Schoenberg	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 400.00
02/26/2006	Shaw Environmental, Inc.	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		250.00	250.00	P 06 500.00
03/12/2006	Scott Sommer	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Attorney Miller, Starr, Regalia	250.00	250.00	P 06 250.00
02/26/2006	SunCal Platinum Pointe, LLC **Please note that a $249 refund was made on 3/29/2006	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		1,500.00	1,500.00	P 06 1,749.00
02/26/2006	David Tanner	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Environmental Consultant David Tanner, Consultant	250.00	250.00	P 06 250.00
			SUBTOTAL $	2,350.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA FORM **460**

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

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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)
02/23/2006	Mr. Peter Templeton	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Principal Templeton Planning Group	250.00	250.00	P 06 250.00
02/15/2006	The Sheldon Group	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		-250.00	-250.00	P 06 250.00
03/12/2006	TRC Environmental Solutions Inc.	[ ] IND [ ] COM [X] OTH [ ] PTY [ ] SCC		250.00	250.00	P 06 500.00
01/21/2006	Myron B. Wacholder	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 100.00
02/15/2006	Martha Weaver	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Contractor Weaver Electric	1,000.00	1,000.00	P 06 1,000.00
			SUBTOTAL $	1,350.00		

*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 A (Continuation Sheet)
Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA FORM **460**

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

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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)
01/21/2006	Mr. Earl Weitzman 3	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	CPA Deloitte & Touche	100.00	100.00	P 06 100.00
02/06/2006	Carolyn Wood	[X] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC	Retired None	100.00	100.00	P 06 100.00
		[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC				
		[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC				
		[ ] IND [ ] COM [ ] OTH [ ] PTY [ ] SCC				
			SUBTOTAL $	200.00		

*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.

SCHEDULE D
CALIFORNIA FORM 460

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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)
01/30/2006	California Women's Leadership PAC - CWLA ☒ Support ☐ Oppose	☒ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure		100.00	100.00	
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
	☐ Support ☐ Oppose	☐ Monetary Contribution ☐ Nonmonetary Contribution ☐ Independent Expenditure				
			SUBTOTAL $	100.00		

Schedule D Summary

1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... $ 100.00
2. Unitemized contributions and independent expenditures made this period of under $100 ..... $ 0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... TOTAL $ 100.00

Schedule E
Payments Made

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

SCHEDULE E
CALIFORNIA FORM **460**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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
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
Anaheim Chamber of Commerce	MTG		500.00
Arnold Steinberg & Associates	POL		1,250.00
Betty Presley & Associates, Inc. Rn	PRO		850.00

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

SUBTOTAL $ 2,600.00

Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ..... $ 28,047.51
2. Unitemized payments made this period of under $100 ..... $ 237.77
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 $ 28,285.28

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: Norby for Supervisor

I.D. NUMBER: 1237231

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
Betty Presley & Associates, Inc.	PRO		850.00
Betty Presley & Associates, Inc.	PRO		850.00
Blackmarket Bakery	FND		345.00
Buena Park Chamber of Commerce	MTG		150.00
CA Voter Guide (#595004)	LIT	Slate Card	500.00

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

SUBTOTAL $ 2,695.00

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
Norby for Supervisor

I.D. NUMBER
1237231

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
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
CWLA PAC (#1237224)	CTB		100.00
Centralia Education Foundation	CVC		100.00
Continuing the Republican Revolution (#598041)	LIT	Slate Card	1,050.00
Copyright Printing	LIT		549.53
County of Orange	FIL		1,168.59

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

SUBTOTAL $ 2,968.12

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
Norby for Supervisor

I.D. NUMBER
1237231

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
County of Orange	FIL		6,238.00
Democratic Voters Choice (#595002)	LIT	Slate Card	2,800.00
First USA Visa Payment Center	POS		468.00
Friends of the Placentia Library	CVC		280.00
Fullerton Chamber of Commerce	MTG		320.00

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

SUBTOTAL $ 10,106.00

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT.)

CALIFORNIA FORM **460**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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
La Habra Chamber of Commerce	MTG		120.00
Mr. Chris Norby	MTG		560.11
Parents Ballot Guide (#1226502)	LIT	Slate Card	500.00
Paule Consulting, Inc	CNS		105.00
Phyllis Schneider & Associates	CNS		1,563.00

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

SUBTOTAL $ 2,848.11

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
Norby for Supervisor

I.D. NUMBER
1237231

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
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
Phyllis Schneider & Associates	CNS		1,563.00
Phyllis Schneider & Associates	FND		181.79
Phyllis Schneider & Associates	FND		237.49
Phyllis Schneider & Associates	CNS		1,563.00
The Early Voter (#1264931)	LIT	Slate Card	500.00

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

SUBTOTAL $ 4,045.28

Schedule E
(Continuation Sheet)
Payments Made

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

SCHEDULE E (CONT.)

CALIFORNIA FORM **460**

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

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
Voter Information Guide (#593003)	LIT	Slate Card	2,285.00
Your Ballot Guide (#588011)	LIT	Slate Card	500.00

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

SUBTOTAL $ 2,785.00

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 01/01/2006
through 03/17/2006

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

NAME OF AGENT OR INDEPENDENT CONTRACTOR
First USA Visa

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)

*** 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 Postmaster Main Station	POS		468.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 468.00

** 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.*

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 01/01/2006
through 03/17/2006

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Mr. Chris Norby

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)

*** 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
Ambrosia	MTG		542.94

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 542.94

** 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.*

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 01/01/2006
through 03/17/2006

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Phyllis Schneider & Associates

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
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)

*** 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
The Wine Room	FND		212.74
Where's the Party	FND		138.00

Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 350.74

** 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.*

Schedule I
Miscellaneous Increases to Cash

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

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

SCHEDULE I
CALIFORNIA FORM 460

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Norby for Supervisor

I.D. NUMBER
1237231

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
01/20/2006	Fullerton Observer	Refund of Ad due to Error	416.00

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $ 416.00

Schedule I Summary

1. Itemized increases to cash this period. ..... $ 416.00
2. Unitemized increases to cash of under $100 this period. ..... $ 0.00
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) ..... $ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) ..... **TOTAL $** 416.00