

Recipient Committee Campaign Statement Cover Page
(Government Code Sections 84200-84216.5)

Type or print in ink

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 10-21-07 through 12-31-07

Date of election if applicable: (Month, Day, Year) 11-6-07

Date Stamp
Received
JAN 31 2008
D. H. S. LITV CLERK

CALIFORNIA FORM 460
Page 1 of 11
For Official Use Only

- 1. Type of Recipient Committee:** All Committees - Complete Parts 1, 2, 3, and 4.
- Officerholder, 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/Officerholder Committee (Also Complete Part 6)

- 2. Type of Statement:**
- Pre-election Statement
 - Semi-annual Statement
 - Termination Statement (Also file a Form 410 Termination)
 - Amendment (Explain below)
 - Quarterly Statement
 - Special Odd-Year Report
 - Supplemental Pre-election Statement - Attach Form 495

3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
COMMITTEE FOR ELDER YOUNG PARS 2007

I.D. NUMBER 1299651

Treasurer(s)

NAME OF TREASURER
YVONNE PARKS

Mailing Address
65877 ADELIDA PI^{CO}
DESERT HOT SPRINGS CA 92240
(760) 329-2676

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 1-30-08 Date

Executed on 1-30-08 Date

Executed on _____ Date

By [Signature] Signature of Treasurer or Assistant Treasurer

By [Signature] Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer or Sponsor

By _____ Signature of Controlling Officerholder, Candidate, State Measure Proponent

**Recipient Committee
Campaign Statement
Cover Page — Part 2**

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
YUDDUZE PARKS

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
MAYOR CITY OF DESERT HOT SPRINGS

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
65807 Avenida Pico Desert Hot Springs CA 92240

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	

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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> 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 10-21-07
through 12-31-07

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I.D. NUMBER

1299657

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
YVONNE PARKS

Contributions Received

	Column A TOTAL THIS PERIOD (PRO RATED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ <u>7849</u>	\$ <u>20664</u>
2. Loans Received	Schedule B, Line 3 \$ <u>0</u>	\$ <u>500</u>
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ <u>7849</u>	\$ <u>21164</u>
4. Nonmonetary Contributions	Schedule C, Line 3 \$ <u>0</u>	\$ <u>1724</u>
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ <u>7849</u>	\$ <u>22888</u>

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ <u>16730</u>	\$ <u>20739</u>
7. Loans Made	Schedule H, Line 3 \$ <u>0</u>	\$ <u>0</u>
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ <u>16730</u>	\$ <u>20739</u>
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 \$ <u>1349</u>	\$ <u>1349</u>
10. Nonmonetary Adjustment	Schedule G, Line 3 \$ <u>0</u>	\$ <u>0</u>
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ <u>18079</u>	\$ <u>22088</u>

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ <u>9306</u>
13. Cash Receipts	Column A, Line 3 above \$ <u>7849</u>
14. Miscellaneous Increases to Cash	Schedule I, Line 4 \$ <u>0</u>
15. Cash Payments	Column A, Line 8 above \$ <u>16730</u>
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ <u>425</u>

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

LOAN GUARANTEES RECEIVED

Schedule G, Part 2

\$

Cash Equivalents and Outstanding Debts

18. Cash Equivalents	See instructions on reverse	\$
19. Outstanding Debts	Add Line 2 + Line 9 in Column B above	\$ <u>1849</u>

**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 \$ _____

_____ \$ _____

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

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).

**Schedule A
Monetary Contributions Received**

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

Statement covers period
from 10-21-07
through 12-31-07

CALIFORNIA
FORM
460
Page 4 of 11

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER YODDIE PARKS I.D. NUMBER 1299651

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID 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)
10-21-07	THE TAN + BRIAN HARVIK LIVING TRUST 73901 SHADOLAKE DR PALM DESERT CA 92260	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> BOTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250	0	250
10-22-07	BRIAN WESTHADE 80507 THINGELD CT INDIO, CA. 92201	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CONSULTANT	500	0	500
10-22-07	SASABUE MITCHELL 66540 5TH ST DESERT HOT SPRINGS CA.	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Business Personal	100	0	100
10-24-07	ALVARO SANDOVAL 12106 PALM DR #2 DESERT HOT SPRINGS CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Welder	100	0	100
10-24-07	LIAUBL CLUB OF PALM SPRINGS 1717 E VISTA CHINO STE 7 PMB 182 PALM SPRINGS CA 92262	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID# 1261808	1,000	0	1,000
SUBTOTAL \$				1950		

Schedule A Summary

- Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) \$ 7750
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 99
- Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL \$ 7849

*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.

Statement covers period
from 10-21-07
through 12-31-07

SCHEDULE A (CONT.)
CALIFORNIA
FORM **460**
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I.D. NUMBER
1299651

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)
10-26-07	PHIL KERR P.O. BOX 269 DESERT HOT SPRINGS CA 92240	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	RETIRED	200	299	299
10-30-07	WINTER ENERGY LTD 1890 N PALM CANYON DR STE A PALM SPRINGS CA 92262	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500	4000	4000
10-30-07	PALM DESERT DEVELOPMENT P.O. BOX 3958 PALM DESERT CA 92261	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2500	3000	3000
11-3-07	DESERT FRIENDS OF TIM BATTIN P.O. BOX 1071 PALM DESERT, CA 92261	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID# 1285699	300	0	300
11-6-07	COMMITTEE TO ELECT MARY STEPHENS 13461 MOUNTAIN TOP DESERT HOT SPRINGS CA 92240	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID# 1300917	300	0	300
SUBTOTAL \$				5800		

*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 B - Part 1
Loans Received

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

YVONNE PARKS

Statement covers period
from 10-21-07
through 12-31-07

SCHEDULE B - PART 1
CALIFORNIA
FORM **460**
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I.D. NUMBER
12996571

FULL NAME, STREET ADDRESS AND ZIP CODE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAID OR FORGIVEN THIS PERIOD *	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CALENDAR YEAR PER ELECTION **	(h) CALENDAR YEAR PER ELECTION **	(i) CALENDAR YEAR PER ELECTION **	(j) CALENDAR YEAR PER ELECTION **	(k) CALENDAR YEAR PER ELECTION **
YVONNE PARKS 65877 WHELDIA PIKE DEBERT HT SPRNGS CA 92440		RETIRED	\$ 500	\$ 0	\$ 0 PAID	\$ 500 10/21/07 PAID	0%	\$ 500	7-13-07				
SUBTOTALS \$			\$ 0	\$ 0	\$ 0	\$ 500	\$ 0	\$ 0					

Schedule B Summary

- Loans received this period
(Total Column (b) plus unitemized loans of less than \$100.) \$ 0
- Loans paid or forgiven this period
(Total Column (c) plus loans under \$100 paid or forgiven.) \$ 0
(Include loans paid by a third party that are also itemized on Schedule A.)
- Net change this period. (Subtract Line 2 from Line 1.) NET \$ 0
Enter the net here and on the Summary Page, Column A, Line 2.

* Amounts forgiven or paid by another party also must be reported on Schedule A
** If required.

Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

**Schedule E
Payments Made**

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

Statement covers period
from 10-21-07
through 12-31-07

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I.D. NUMBER
1299651

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

YVONNE PARKS

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| OWP | campaign paraphernalia/misc. | MBR | member communications | RAD | radio airtime and production costs |
| ONS | campaign consultants | MTG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PEI | petition circulating | TEL | t.v. or cable airtime and production costs |
| FL | 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 |
| ND | 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 |
| LT | 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
DAVE MORGAN 29090 LIGHTSAILS CT ROMOLAND, CA 92585	CNS			1500.00
KINIER COMMUNICATIONS 73101 HWY 111 #4 PALM DESERT, CA 92260	LIT SIGNS			2907.28
JON LILU DESIGN 65639 AVENIDA P120 DESERT HET SPRINGS, CA 92240	WEB			72.73
SUBTOTAL \$				4480.01

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

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 16730
- Unitemized payments made this period of under \$100 \$ 0
- Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
- Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL \$ 16730

Schedule E
(Continuation Sheet)
Payments Made

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

STATEMENT E (CONT)

Statement covers period
 from 10-21-07
 through 12-31-07

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CALIFORNIA
 FORM **460**

I.D. NUMBER
1299651

SEE INSTRUCTIONS ON REVERSE
 NAME OF FILER

YVONNE PARKS

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | MR | 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 | tv. or cable airtime and production costs |
| FL | 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) | VOI | voter registration |
| LT | campaign literature and mailings | PR | 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
RESP NEWSCHWIMMEL 3 42658 MELNIE PLAZA PALM DESERT, CA 92211	TEL			1067.50
KCBS-TV 31276 DUNHAM WAY THOUSAND PALMS CA 92276	TEL			1470
THE DESERT RADIO GROUP 1321 N. GENE AUTRY TRAIL PALM SPRINGS, CA 92262	RAD			600
R R BROADCASTING 2100 THHPUITZ CANYON WAY PALM SPRINGS CA 92262	RAD			500
CARDINAL COMMUNICATION STRATEGIES LLC 925 UNIVERSITY AVE #A SACRAMENTO CA 95825	PHD			380

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

SUBTOTAL \$ 3932.50

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

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

YUDDIWE PARKS

Statement covers period
from 11-21-07
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SCHEDULE E (CONT)
CALIFORNIA
FORM 460

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1299651

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.
 CWP campaign paraphernalia/misc.
 CNS campaign consultants
 CTB contribution (explain nonmonetary)*
 CVC civic donations
 FLD 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)
 PRI print ads
 RAD radio airtime and production costs
 RFD returned contributions
 SAL campaign workers' salaries
 TEL tv, 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 ID. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. P.O.				
DESERT HOT SPRINGS, CA 92240	POS			322.49
CASA BLANCA STUDIOS 66321 PIERSON BLVD	TEL			450
DESERT HOT SPRINGS, CA 92240				
CASA BLANCA STUDIOS 66321 PIERSON BLVD	RAD			125
DESERT HOT SPRINGS, CA 92240				
TYME WARRIOR CABLE 73321 FRED WARRIC DR STE 101	TEL			3995
RYLM DESERT, CA. 92260				
KMIR 6 75920 PARKVIEW DR	TEL			1734
PALM DESERT, CA 92260				

SUBTOTAL \$ 6626.49

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

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

Type or print in ink.
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NAME OF FILER

YUDDIE PARKS

Statement covers period
from 10-21-07
through 12-31-07

SCHEDULE E (CONT.)
CALIFORNIA 460
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I.D. NUMBER
1299651

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| OMP | campaign paraphernalia/misc. | MR | 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 | PEI | petition circulating | TEL | tv, or cable airtime and production costs |
| FIL | candidate filing/ballot fees | PHD | 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 |
| LT | campaign literature and mailings | PRT | print ads | WEB | information technology costs (internet, e-mail) |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER ID NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
KYLE DOMENIE 65461 OSPREY LAKE DESERT HOT SPRINGS, CA 92240	MTG		CATERER ELECTION NIGHT CELEBRATION	484
STANON GRAHAM 16485 SANTA CRUZ RD DESERT HOT SPRINGS, CA 92240	MTG		DJ SERVICES ELECTION NIGHT CELEBRATION	250
FIRE ROCK TAVERN HOTEL SAKULA 11000 PALM DRIVE DESERT HOT SPRINGS, CA 92240	MTG		ELECTION NIGHT VICTORY CELEBRATION	500
THE VALLEY BREEZE PUBLICATION 12561 PALM DRIVE STE B DESERT HOT SPRINGS, CA 92240	PRT			300
THE UPS STORE 14080 PALM DRIVE STE D DESERT HOT SPRINGS, CA 92240	LIT			157.06

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

SUBTOTAL \$ 1691.06

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

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

Statement covers period
from 10-21-07
through 12-31-07

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ID NUMBER
1299651

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
YVONNE PARKS

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

OMP	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	PEI	petition circulating	TEL	lv. or cable airtime and production costs
FLI	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
FND	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
LT	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	OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	AMOUNT INCURRED THIS PERIOD	AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
DAVE MORGAN 29090 LIGHTSAILS CT ROMOLAND, CA. 92585	CDS	500	1,000	1500	0
RIVER COMMUNICATIONS 73101 HWY 111 #4 PAIN DESERT CA. 92260	LIT SIGNS	1407.28	2849.15	2907.28	1349.15
JON LIL DESIGN 65639 AVENIDA CADETA DESERT HOT SPRINGS, CA 92240	WEB UPDATE	72.73	0	72.73	0
SUBTOTALS \$		1980.01	3849.15	4480.01	1349.15

* 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 \$ 3849**
- Total accrued expenses paid this period. (Include all Schedule F, Column (e) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.) **PAID TOTALS \$ 4480**
- Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$ 1349**

May be a negative number