

Late Independent Expenditure Report

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

LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Committee for Good School Governance		Date of This Filing 10/12/2010	Date Stamp SANTA CRUZ CO. ELECTION 10 OCT 12 PM 12:25	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 831-769-2143	I.D. NUMBER (if applicable) 1291357	Report No. 2010-1		
STREET ADDRESS _____		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Watsonville, CA	STATE	ZIP CODE 95076	No. of Pages 2	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Willie Yahiro			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED _____			
OFFICE SOUGHT OR HELD/DISTRICT NO. Trustee Pajaro Valley School District	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/11/2010	Printing & processing of mailer	574.32

Reason for Amendment: _____

Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM **496**

I.D. NUMBER (# applicable)

1291357

NAME OF FILER

Committee for Good School Governance

3. Contributions of \$100 or More Received*

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	INTEREST RATES
10/01/2010	Christine A. Quinn La Selva Beach, CA 95076	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Superintendent Hayward Unified School District	300.00	If loan, enter interest rate, if any _____ %
10/07/2010	Jess D. Brown Capitola, CA 95010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Santa Cruz County Farm Bureau	100.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****Contributor Codes**

- IND - Individual
- COM - Recipient Committee (other than PTY or SCC)
- OTH - Other
- PTY - Political Party
- SCC - Small Contributor Committee

FPPC Form 496 (November/07)
FPPC Toll-Free Helpline: 866/ASK-FPPC
866/275-3772

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LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Committee for Good School Governance		Date of This Filing 10/12/2010	SANTA CRUZ CO. ELECTIONS FILED 10 OCT 12 PM 12:25	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 831-768-2143	I.D. NUMBER (if applicable) 1291357	Report No. 2010-4		
STREET ADDRESS		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Watsonville, CA	STATE	ZIP CODE 95076	No. of Pages 2	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Leslie DeRose			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. Trustee Pajaro Valley School District	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/11/2010	Printing & processing of mailer	574.31

Reason for Amendment: _____

10/12/2010 22:33 9166861813 VONA CAPP PAGE 07

Late Independent Expenditure Report

LATE INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496
 I.D. NUMBER (if applicable)
 1291357

NAME OF FILER
 Committee for Good School Governance

3. Contributions of \$100 or More Received*

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	INTEREST RATES
10/01/2010	Christine A. Quinn La Selva Beach, CA 95076	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Superintendent Hayward Unified School District	300.00	If loan, enter interest rate, if any _____ %
10/07/2010	Jess D. Brown Capitola, CA 95010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Santa Cruz County Farm Bureau	100.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

*Major donor and independent expenditure committees that do not receive contributions are not required to complete Part 3.

****Contributor Codes**
 IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

FPPC Form 496 (November 07)
 FPPC Toll-Free Helpline: 866/ASK-FPPC
 866/275-3772

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LATE INDEPENDENT EXPENDITURE REPORT

NAME OF FILER Committee for Good School Governance		Date of This Filing 10/12/2010	Date Stamp FILED SANTA CRUZ CO. ELECTIONS 10 OCT 12 PM 12:25	CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 831-768-2143	I.D. NUMBER (if applicable) 1291357	Report No. 2010-2		
STREET ADDRESS 		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Watsonville, CA STATE CA ZIP CODE 95076		No. of Pages 2		

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Patrice Edwards			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. Trustee Pajaro Valley Unified School District.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/11/2010	Printing & processing of mailer	574.32

Reason for Amendment: _____

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LATE INDEPENDENT EXPENDITURE REPORT

CALIFORNIA FORM 496
 I.D. NUMBER (if applicable)
 1291357

NAME OF FILER
 Committee for Good School Governance

3. Contributions of \$100 or More Received*

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	INTEREST RATES
10/01/2010	Christine A. Quinn La Selva Beach, CA 95076	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Superintendent Hayward Unified School District	300.00	If loan, enter interest rate, if any _____ %
10/07/2010	Jess D. Brown Capitola, CA 95010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Santa Cruz County Farm Bureau	100.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

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 866/275-3772

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NAME OF FILER Committee for Good School Governance		Date of This Filing 10/12/2010	FILED Date Stamp CALIFORNIA FORM 496 For Official Use Only
AREA CODE/PHONE NUMBER 831-768-2143	I.D. NUMBER (if applicable) 1293357	Report No. 2010 10 OCT 12 PH 12:25	
STREET ADDRESS CITY: Watsonville, CA STATE: ZIP CODE: 95076		<input type="checkbox"/> Amendment to Report No. (explain below)	
		No. of Pages 2	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Kimberly DeSerpa			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. Trustee Pajaro Valley Unified School District.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/11/2010	Printing & processing of mailer	574.32

Reason for Amendment: _____

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CALIFORNIA FORM **496**

I.D. NUMBER (if applicable)

1291357

NAME OF FILER

Committee for Good School Governance

3. Contributions of \$100 or More Received*

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	INTEREST RATES
10/01/2010	Christine A. Quinn La Selva Beach, CA 95076	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Superintendent Hayward Unified School District	100.00	If loan, enter interest rate, if any _____ %
10/07/2010	Jess D. Brown Capitola, CA 95010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Santa Cruz County Farm Bureau	100.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
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AREA CODE/PHONE NUMBER 831-768-2143	I.D. NUMBER (if applicable) 1291357	Report No. 2010-5		
STREET ADDRESS 		<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
CITY Watsonville, CA	STATE	ZIP CODE 95076	No. of Pages 2	

1. List Only One Candidate or Ballot Measure

NAME OF CANDIDATE SUPPORTED OR OPPOSED Francisco Diaz			NAME OF BALLOT MEASURE SUPPORTED OR OPPOSED			
OFFICE SOUGHT OR HELD/DISTRICT NO. Trustee Pajaro Valley Unified School District.	SUPPORT X	OPPOSE	BALLOT NO./LETTER	JURISDICTION	SUPPORT	OPPOSE

2. Independent Expenditures Made *Attach additional information on appropriately labeled continuation sheets.*

DATE	DESCRIPTION OF EXPENDITURE	AMOUNT
10/11/2010	Printing & processing of mailer	574.31

Reason for Amendment: _____

10/12/2010 22:33 9166861813 VONA CPPP PAGE 09

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CALIFORNIA FORM 496

I.D. NUMBER (if applicable)

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NAME OF FILER

Committee for Good School Governance

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10/01/2010	Christine A. Quinn La Selva Beach, CA 95076	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Associate Superintendent Hayward Unified School District	300.00	If loan, enter interest rate, if any _____ %
10/07/2010	Jess D. Brown Capitola, CA 95010	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Executive Director Santa Cruz County Farm Bureau	100.00	If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC			If loan, enter interest rate, if any _____ %

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10/12/2010 22:33 9166861813 VONA COPP PAGE 10