

**Officeholder, Candidate, and Controlled Committee Campaign Statement - Long Form**  
(Government Code Sections 84200-84216.5)

COVER PAGE - LONG FORM

Statement covers period from 1/1/94 through 6/30/94  
Date Stamp  
CITY OF GARDEN GROVE  
CITY CLERK'S OFFICE  
JUL 27 11 20 AM '94  
Page 1 of 21  
For Official Use Only

Date of election if applicable: (Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE  
Check one of the following boxes to indicate the type of statement being filed:  
 Pre-election Statement  
 Supplemental Pre-election Statement (Attach a completed Form 495 to this statement.)  
 Special Odd-Year Campaign Report  
 Semi-annual Statement  
 Termination Statement (Attach a completed Form 415 to this statement.)

**Officeholder, Candidate, and Controlled Committee Included in this Statement**  
NAME OF OFFICEHOLDER OR CANDIDATE  
Ho Chung

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
City Council - Garden Grove  
RESIDENTIAL OR BUSINESS ADDRESS (NO. AND STREET)  
8744 Garden Grove Blvd  
CITY Garden Grove STATE CA ZIP CODE 92644 AREA CODE/DAYTIME PHONE (714) 539-4699  
COMMITTEE NAME  
Ho Chung Campaign Committee I.D. NUMBER 921776

COMMITTEE ADDRESS (NO. AND STREET)  
8744 Garden Grove Blvd  
CITY Garden Grove STATE CA ZIP CODE 92644 AREA CODE/DAYTIME PHONE (714) 539-2255  
NAME OF TREASURER  
Dick Hain  
PERMANENT ADDRESS OF TREASURER (NO. AND STREET)  
9447 Stonehaven Circle  
CITY Garden Grove STATE CA ZIP CODE 92644 AREA CODE/DAYTIME PHONE (714) 539-5056

COMMITTEE NAME  
Ho Chung Campaign Committee I.D. NUMBER  
COMMITTEE ADDRESS (NO. AND STREET)  
8744 Garden Grove Blvd  
CITY Garden Grove STATE CA ZIP CODE 92644 AREA CODE/DAYTIME PHONE (714) 539-2255  
NAME OF TREASURER  
Dick Hain I.D. NUMBER  
COMMITTEE ADDRESS (NO. AND STREET)  
8744 Garden Grove Blvd  
CITY Garden Grove STATE CA ZIP CODE 92644 AREA CODE/DAYTIME PHONE (714) 539-2255

**Verification**

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 6/30/94 DATE At Garden Grove, CA CITY AND STATE  
An officeholder or candidate who controls a committee must also verify the campaign statement. I have used all reasonable diligence and to the best of my knowledge the treasurer has used all reasonable diligence in preparing this statement. I have reviewed 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 6/30/94 DATE At Garden Grove, CA CITY AND STATE  
Executed on \_\_\_\_\_ DATE At \_\_\_\_\_ CITY AND STATE  
Executed on \_\_\_\_\_ DATE At \_\_\_\_\_ CITY AND STATE  
FOR INFORMATION REQUIRED TO BE PROVIDED TO YOU PURSUANT TO THE INFORMATION PRACTICES ACT OF 1977, SEE INFORMATION MANUAL ON CAMPAIGN DISCLOSURE PROVISIONS OF THE POLITICAL REFORM ACT.

Attach additional information on appropriately labeled continuation sheets.

By Dick Hain SIGNATURE OF TREASURER  
By John Hain SIGNATURE OF CANDIDATE/OFFICEHOLDER  
By \_\_\_\_\_ SIGNATURE OF CANDIDATE/OFFICEHOLDER  
By \_\_\_\_\_ SIGNATURE OF CANDIDATE/OFFICEHOLDER

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

Statement covers period  
from 1/1/94  
through 6/30/94

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I.D. NUMBER  
921776

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
Ho Chung Campaign Committee

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B* TOTAL PREVIOUS PERIOD (SEE NOTE BELOW)	Column C TOTAL TO DATE (ADD COLUMNS A + B)
1. Monetary Contributions	Schedule A, Line 3 \$ 17,805.00	\$ 0	\$ 17,805.00
2. Loans Received	Schedule B, Line 7 \$ 2,000.00	\$ 0	\$ 2,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ 15,805.00	\$ 0	\$ 15,805.00
4. Non-monetary Contributions	Schedule C, Line 3 \$ 0	\$ 0	\$ 0
5. SUBTOTAL CONTRIBUTIONS (Exclude Enforceable Promises)	Add Lines 3 + 4 \$ 15,805.00	\$ 0	\$ 15,805.00
6. Enforceable Promises (Exclude Loan Guarantees, Line 18 below)	Schedule D, Line 7 \$ 0	\$ 0	\$ 0
7. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 5 + 6 \$ 15,805.00	\$ 0	\$ 15,805.00
<b>Expenditures Made</b>			
8. Cash Payments (Other than Loans Made)	Schedule E, Line 5 \$ 8,153.00	\$ 0	\$ 8,153.00
9. Loans Made	Schedule H, Line 7 \$ 0	\$ 0	\$ 0
10. SUBTOTAL CASH PAYMENTS	Add Lines 8 + 9 \$ 8,153.00	\$ 0	\$ 8,153.00
11. Accrued Expenses (Unpaid Bills)	Schedule F, Line 5 \$ 0	\$ 0	\$ 0
12. TOTAL EXPENDITURES MADE	Add Lines 10 + 11 \$ 8,153.00	\$ 0	\$ 8,153.00
<b>Current Cash Statement</b>			
13. Beginning Cash Balance	Previous Summary Page, Line 17 \$ 735.00		
14. Cash Receipts	Column A, Line 3 above \$ 15,805.00		
15. Miscellaneous Increases to Cash	Schedule I, Line 4 \$ 0		
16. Cash Payments	Column A, Line 10 above \$ 8,153.00		
17. ENDING CASH BALANCE	Add Lines 13 + 14 + 15, then subtract Line 16 \$ 8,387.00		
<i>If this is a termination statement, Line 17 must be zero.</i>			
18. LOAN GUARANTEES RECEIVED	Schedule B, Part I, Column (b) \$ 0		
<b>Cash Equivalents and Outstanding Debts</b>			
19. Cash Equivalents	See instructions on reverse \$ 0		
20. Outstanding Debts	Add Line 2 + Line 11 in Column C above \$ 2,000		

\* From previous Statement Summary Page, Column C. However, if this is the first report filed for the calendar year, Column B should be blank except for Loans Received (Line 2), Enforceable Promises (Line 6), Loans Made (Line 9), and Accrued Expenses (Line 11).

**Summary for Candidates in Both June and November Elections**

1/1 through 6/30 7/1 to Date

21. Contributions Received ..... \$

22. Expenditures Made ..... \$

**Schedule A  
Monetary Contributions Received**

Type or Print in Ink.  
Amounts may be rounded  
to whole dollars.

Statement covers period  
from 04/01/94  
through 06/30/94

CALIFORNIA  
1991 FORM **490**

SEE INSTRUCTIONS ON REVERSE

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I.D. NUMBER  
921776

NAME OF OFFICERHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE:  
HO CHUNG CAMPAIGN COMMITTEE

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME & ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
1/28/94	Francis Mitchell Jr Joe Ok Mitchell 17700 Avalon Blvd No 76 Carson, CA 90746	Restaurant Owner	250		
1/30/94	Ja Hee Han - Jung Hee Han 1521 Pinewood Place La Habra, CA 90631	Jewelry Store Owner	250		
1/31/94	Sun Hee Kim, Bong He Kim 7902 Collins Lane La Palma, CA 90623	Jewelry Store Owner	250		
1/28/94	Kyabok Han - Jean S. Han 1027 Kildonan Dr Glendale, CA 91207	Restaurant Store Owner	250		
2/1/94	Kyu-Ho Yun, M.D. Young-Sook Shin Yug M.D. 12852 Palm St Ste 202 Garden Grove, CA 92640	Physician	100		

**SUBTOTAL \$ 1,100<sup>00</sup>**

**Monetary Contributions Summary**

- Amount received this period — contributions of \$100 or more.  
(Include all Schedule A subtotals.) ..... \$ 11,350
- Amount received this period — contributions of less than \$100.  
(Do not itemize.) ..... \$ 6,455
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$ 17,805**

Statement covers period

from 1/1/94

through 6/30/94

490

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I.D. NUMBER

921776

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

Schedule A (Continuation Sheet)  
Monetary Contributions Received

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
*Ho Chung Campaign Committee*

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
1/31/94	Western Graphics Associates 420 S. Euclid Anaheim, CA 92802	Graphic's Designer	100		
2/1/94	Young Sup Lee 690 Wilshire Place Los Angeles, CA 90005	Publisher	100		
2/1/94	Chang Ho Paek Sooyel Paek 12376 Kicking Horse Diamond Bar, CA 91765	Trader	1,000		
2/1/94	Ellen and Co, Inc 13621 Cimarron Ave Gardena, CA 90249	Trader	100		
1/28/94	Kwon H. Min Suk S. Min 155 Aturmn Rd Diamond Bar, CA 91765	Mini Market Owner	100		
01/29/94	Sparkling Cleaners 17867 Valley View St. Garden Grove, CA 92645	Dry Cleaners Owner	100		

SUBTOTAL \$ 1,500.00

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

Schedule A (Continuation Sheet)  
Monetary Contributions Received

Statement covers period  
from 1/1/94  
through 6/30/94

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NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE		I.D. NUMBER			
<i>Ho Chung Campaign Committee</i>		<i>921776</i>			
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<i>2/2/94</i>	<i>Kyo Hwan Kim Chong Suk Kim 18906 S. Bogart Circle Cerritos, CA 90701</i>	<i>Market Owner</i>	<i>100</i>		
<i>2/1/94</i>	<i>Young S. Lee D.D.S. 4088 Wh. Hier Blvd Los Angeles, CA 90028</i>	<i>Dentist</i>	<i>100</i>		
<i>2/2/94</i>	<i>WACHEON USA Inc 1957 Obispo Ave Long Beach, CA 90809</i>	<i>Trader</i>	<i>200</i>		
<i>2/3/94</i>	<i>In Chon Won Restaurant 13621 Brookhurst St Garden Grove, CA 92643</i>	<i>Restaurant Owner</i>	<i>100</i>		
<i>2/4/94</i>	<i>Lee's Discount Liquor General Account 3480 Flamingo Las Vegas, NV 89121</i>	<i>Liquor Store Company President</i>	<i>250</i>		
<i>2/5/94</i>	<i>Dr Sue Ann Harris Kim AKA Dr Sue Ann Kim 334 Anita Drive Pasadena, CA 91105</i>	<i>Educator</i>	<i>100</i>		

<b>SUBTOTAL \$</b>			<i>850.00</i>
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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

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

Statement covers period  
from 1/1/94  
through 6/30/94

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NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

I.D. NUMBER

921776

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
2/6/94	ZLAKET'S MEAT MARKET 12921 Main Street Garden Grove, CA 92640	Market Owner	100		
2/7/94	BoonJa Lee 8642 On The Nail Buena Park CA 90620	Food Chain Store Owner	100		
2/7/94	Winston Kyongsun Choe 2011 Sherer Ln Glendale, CA 91208	President CEO Shopping Center	100		
2/7/94	Young K. Cho 3525 W. 3rd St Los Angeles, CA 90020	Tire Mart Owner	100		
2/8/94	Sunny Investment-Management Company 9944 Garden Grove Blvd Garden Grove, CA 92644	Real Estate Broker	100		
2/9/94	Dusan Pipe Agency, Inc 16200 S. Figueroa St Suite B Garden, CA 90248	Trader	100		

**SUBTOTAL \$ 600.00**

Type or print in ink.  
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to whole dollars.

Schedule A (Continuation Sheet)  
Monetary Contributions Received

Statement covers period  
from 1/1/94  
through 6/30/94

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NAME OF OFFICER/HOLDER OR CANDIDATE AND CONTROLLED COMMITTEE		I.D. NUMBER			
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
	<u>Ho Chung Campaign Committee</u>				
2/6/94	<u>ZLAKET'S MEAT MARKET</u> <u>12921 Main Street</u> <u>Garden Grove, CA 92640</u>	<u>Market Owner</u> <del>tee</del>	<u>100</u>		
2/7/94	<u>BoonJa Lee</u> <u>8642 On The Mall</u> <u>Buena Park CA 90620</u>	<u>Food Chain Store Owner</u> <del>tee</del>	<u>100</u>		
2/7/94	<u>Winston Kyongsun Choe</u> <u>2011 Sherer Ln</u> <u>Glendale, CA 91208</u>	<u>President CEO</u> <u>Shopping Center</u> <del>tee</del>	<u>100</u>		
2/7/94	<u>Young K. Cho</u> <u>3525 W. 3rd St</u> <u>Los Angeles, CA 90020</u>	<u>Tire Mart</u> <u>Owner</u>	<u>100</u>		
2/8/94	<u>Funny Investment-Management</u> <u>Company</u> <u>9944 Garden Grove Blvd</u> <u>Garden Grove, CA 92644</u>	<u>Real Estate</u> <u>Broker</u>	<u>100</u>		
2/9/94	<u>Dusan Pipe America, Inc</u> <u>16200 S. Figueroa St Suite B</u> <u>Garden, CA 90248</u>	<u>Trader</u>	<u>100</u>		

**SUBTOTAL \$ 600.00**

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to whole dollars.

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period

from 1/1/94  
through 6/30/94

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NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

I.D. NUMBER

921776

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
2/9/94	Gold Optical - 1 8901 Garden Grove Blvd Garden Grove, CA 92644		200		
2/10/94	Samuel Y. Juhn, M.D. Christina J. Juhn 9812 Ryan Circle Villa Park, CA 92667	Physician	100		
2/10/94	Chun Deug Choo 2181 Avenida Soledad Fullerton, CA 92633	Manufacturing Company Owner	100		
2/10/94	A.L. Investment, Ltd 12057 Garden Grove Blvd Garden Grove, CA 9264		100		
2/10/94	Cho, Yoo + Co 3250 Wilshire Blvd, No 1702 Los Angeles, CA 90010	C P A	100		
2/10/94	FASHION A'S 425 W 112 St Los Angeles, CA 90015		100		

SUBTOTAL \$ 700.00



Type or print in Ink.  
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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period  
from 1/1/94  
through 6/30/94

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NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE		I.D. NUMBER			
<u>Ho Chung Campaign Committee</u>		<u>921776</u>			
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<u>2/10/94</u>	<u>KOREAN INSTITUTE OF SOUTHERN CALIFORNIA 4900 Wilshire Blvd Los Angeles CA 90010</u>	<u>Real Estate</u>	<u>200</u>		
<u>2/10/94</u>	<u>BRIDGECREEK REALTY INVESTMENT CORP 9039 Bolsa Ave, Ste 312 Westminster, CA 92683</u>	<u>Investor</u>	<u>150</u>		
<u>2/10/94</u>	<u>Insook Rhee Suh Han Kyu Suh 760 Pinchurst Drive Pasadena, CA 91106</u>	<u>Physician</u>	<u>200</u>		
<u>2/11/94</u>	<u>David J. Chung Linda S. Chung 635 N. Plymouth Blvd, No 3 Los Angeles, CA 90004</u>	<u>Shopping Center Owner</u>	<u>100</u>		
<u>2/11/94</u>	<u>Tae Soo Kim 9837 Garden Grove Blvd Garden Grove, CA 92644</u>	<u>Insurance Broker</u>	<u>100</u>		
<u>2/11/94</u>	<u>R. Conger + Associates 12391 Nutwood St Garden Grove, CA 92640-3026</u>	<u>Consultants</u>	<u>100</u>		

**SUBTOTAL \$ 850**

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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period  
from 1/1/94  
through 6/30/94

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I.D. NUMBER  
921776

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE <u>Ho Chung Campaign Committee</u>						
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)	
<u>2/11/94</u>	<u>Pa Gill Gwon Bok Hee Gwon 5857 Arden Highland, CA 92346</u>	<u>Mechanics</u>	<u>100</u>			
<u>2/11/94</u>	<u>Yeong D. Park Sung H. Park 10065 Aspen Circle Santa Fe Springs CA 90670</u>	<u>Liquor Store Owner</u>	<u>100</u>			
<u>2/11/94</u>	<u>Korea University Alumni Assoc. of S.C. 3530 Wilshire Blvd # 1414 Los Angeles, CA 90010</u>		<u>100</u>			
<u>2/11/94</u>	<u>Jay H. Chung Sue C. Chung 6762 Vista Del Sol Drive Huntington Beach CA 92647</u>	<u>Space Scientist</u>	<u>100</u>			
<u>2/11/94</u>	<u>Du Y. Chung Doon H. Chung 2210 N. Serrano Pl Fullerton, CA 92633</u>	<u>Retail Store Owner</u>	<u>100</u>			
<u>2/11/94</u>	<u>Soo Bae Kim D.D. S. 3972 Barrancataway Suite M Irvine, CA 92714</u>	<u>Doctor of Dental Surgery</u>	<u>100</u>			

**SUBTOTAL \$** 600<sup>00</sup>

Type or print in ink.  
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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period

from 1/1/94  
through 6/30/94

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I.D. NUMBER  
921776

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE  
Ho Chung Campaign Committee

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
2/1/94	Dae Z. Chub 9061 Garden Grove Blvd Garden Grove, CA 92644	Restaurant	100		
2/1/94	Thomas H. Kim - M.D. Clara Kee Kim 24712 Hemlock Ct Calabasas, CA 91302	Physician	100		
2/1/94	Sung Hwan Cho 19618 Arida Ave Cerritos, CA 90701	Retired	100		
2/1/94	Chul Jung Kang #40 Jooh Kang 3530 Wilshire Blvd No 145 Los Angeles 90010	Trader	100		
2/1/94	Daegyung Im Susan J. Im 1331 S. Sandown Ct #209 La Mirada, CA 90638	Housewife	100		
2/1/94	Hanin Mission Research Center 11737 Lampson Ave Garden Grove, CA 92640		100		

**SUBTOTAL \$ 600**

Type or print in ink.  
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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period

from 1/1/94

through 6/30/94

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NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

*Ho Chung Campaign Committee*

I.D. NUMBER

*921776*

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<i>2/11/94</i>	<i>Benjamin B. Kim Susan Y. Kim 2235 S. Bristol St Santa Ana, CA 92706</i>	<i>Liquor Store Owner</i>	<i>100</i>		
<i>2/11/94</i>	<i>Dr. Kwang E. Kim, D.C. Ph.D. A Chiropractic Corporation 252 Oxford Ste 100 Los Angeles, CA 90004-5792</i>	<i>Chiropractor</i>	<i>100</i>		
<i>2/11/94</i>	<i>Law Offices of Young Gill Kook 1605 W. Olympic Blvd Ste 9101 Los Angeles, CA 90015</i>		<i>100</i>		
<i>2/11/94</i>	<i>Quyen, Inc. DBA Van Restaurant Club 14241 Euclid St - Ste 0101 Garden Grove CA 92643</i>	<i>Restaurant Owner</i>	<i>100</i>		
<i>2/11/94</i>	<i>Newkoo Construction Co., Inc 2624 W. Pico Ste 200 Los Angeles, CA 90006</i>		<i>100</i>		
<i>2/11/94</i>	<i>Excel Lube &amp; Tune 2401 W. El Segundo Blvd Hawthorne, CA 90250</i>	<i>Auto Car Company Service Owner</i>	<i>100</i>		

**SUBTOTAL \$ 600**

Statement covers period

from 1/1/94

through 6/30/94

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I.D. NUMBER

921776

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Schedule A (Continuation Sheet)  
Monetary Contributions Received

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<u>2/11/94</u>	<u>Glenhaven Mobilodge 13181 Lampson Ave Garden Grove, CA 92640</u>	<u>Mobile Home Park Owner</u>	<u>250</u>		
<u>2/11/94</u>	<u>Union Auto Sales Inc 9943 Garden Grove Blvd Garden Grove, CA 92644</u>	<u>Auto Dealer</u>	<u>250</u>		
<u>2/11/94</u>	<u>Eui Shik Chung 12360 Willowbranch Lane Cerritos, CA 90701</u>	<u>President of Senior Citizens Assn</u>	<u>125</u>		
<u>2/11/94</u>	<u>Joon Sik Pak - Jong-Ja Pak 65 Paseo De Cdsbana Rancho Palos Verdes, CA 90274</u>	<u>Fish Market Owner</u>	<u>250</u>		
<u>2/11/94</u>	<u>Ken Lee 18228 Cabrillo Ct Fountain Valley, CA 92708</u>	<u>Market Owner</u>	<u>250</u>		
<u>2/11/94</u>	<u>Korean Chamber of Commerce of Orange County 9562 Garden Grove Blvd Suite K Garden Grove, CA 92644</u>		<u>250</u>		

SUBTOTAL \$ 1375

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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period

from 1/1/94  
through 6/30/94

Page 13 of 21

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

I.D. NUMBER

921776

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<u>2/11/94</u>	<u>Korean Traders Club of Los Angeles 4801 Wilshire Blvd Suite # 230 Los Angeles, CA 90010</u>		<u>250</u>		
<u>2/11/94</u>	<u>Young Kil Choe 4851 Sandy Circle La Palma, CA 90623</u>	<u>Retailer</u>	<u>100</u>		
<u>2/11/94</u>	<u>In H. Cho 8523 Norwich Ave Sepulveda, CA 91343</u>	<u>Retailer</u>	<u>100</u>		
<u>2/11/94</u>	<u>Poong Un In 3921 Wilshire Blvd - N310 Los Angeles, CA 90010</u>	<u>Optician</u>	<u>100</u>		
<u>2/11/94</u>	<u>Young S. Shin Jae A. Shin 22521 Killly St F.L. Toro, CA 92630</u>	<u>Dry Cleaner Store Owner</u>	<u>100</u>		
<u>2/11/94</u>	<u>Garden Restaurant 9738 Garden Grove Blvd Garden Grove, CA 92644</u>		<u>100</u>		

**SUBTOTAL \$ 750**

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

Schedule A (Continuation Sheet)  
Monetary Contributions Received

Statement covers period  
from 1/1/94  
through 6/30/94

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490

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE		I.D. NUMBER			
<u>Ho Chung Campaign Committee</u>		<u>921776</u>			
DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<u>2/11/94</u>	<u>DR Clyde W. Oden Velma L. Oden 749 Athens Blvd Los Angeles, CA 90044</u>	<u>President/CEO Foundation</u>	<u>100</u>		
<u>2/11/94</u>	<u>James L. Parky Inhee C. Parky 5352 Franklin Circle Westminster, CA 92683</u>	<u>V.P. Teding Company</u>	<u>100</u>		
<u>2/11/94</u>	<u>Kyoung K. Oh - M.D. 12665 Garden Grove Blvd Ste 614 Garden Grove, CA 92643</u>	<u>Physician</u>	<u>100</u>		
<u>2/11/94</u>	<u>Hyung Man Pak Sook Hee Pak 44 Bowie Road Rolling Hills, CA 90274</u>	<u>Investment Broker</u>	<u>100</u>		
<u>2/11/94</u>	<u>NEW MODE T-SHIRTS COMPANY 10612 Trask Ave Garden Grove, CA 92643</u>	<u>Silk Screen Printing Company</u>	<u>100</u>		
<u>2/12/94</u>	<u>Soo Chul Kah - Chong He Yi 12524 Everglades St Los Angeles, CA 90066</u>	<u>Trading Business Owner</u>	<u>300</u>		
<b>SUBTOTAL \$</b>			<b>800</b>		

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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Statement covers period

from 1/1/94  
through 6/30/94

430

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I.D. NUMBER

921776

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

DATE RECEIVED	FULL NAME AND ADDRESS OF CONTRIBUTOR (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	CUMULATIVE TO DATE OTHER (IF APPLICABLE)
<u>2/14/94</u>	<u>Hamm Bank 3660 Wilshire Blvd - Penthouse A Los Angeles, CA 90010</u>	<u>Bank Manager</u>	<u>100</u>		
<u>2/16/94</u>	<u>Hamm Bank 3660 Wilshire Blvd - P.H.A. Los Angeles, CA 90010</u>	<u>Bank Chairman of the Board</u>	<u>300</u>		
<u>2/17/94</u>	<u>John W. Williams 13262 Amarillo Drive Westminster, CA 92683</u>	<u>Laborer</u>	<u>100</u>		
<u>2/18/94</u>	<u>Realty World - NewStar Inc. 9625 Garden Grove Blvd Garden Grove, CA 92644</u>	<u>Real Estate Brokers</u>	<u>125</u>		
<u>2/18/94</u>	<u>Jong Soak Lee Nicholas S.C. Lee, M.D. 5451 Parque St Long Beach, CA 90815</u>	<u>Physician</u>	<u>100</u>		
<u>3/31/94</u>	<u>Sunny Investment Management Co 9944 Garden Grove Blvd Garden Grove, CA 92644</u>	<u>Realty Brokers</u>	<u>100</u>		

**SUBTOTAL \$ 825**





# Schedule E Payments and Contributions (Other Than Loans) Made

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

SCHEDULE E

STATEMENT OF EXPENSES **490**

Statement covers period

from 1/1/94

through 6/30/94

Page 17 of 21

SEE INSTRUCTIONS ON REVERSE

I.D. NUMBER

Ho Chung Campaign Committee

921776

## CODES FOR CLASSIFYING EXPENDITURES

If one of the following codes accurately describes the expenditure, you may enter the code and leave the "Description of Payment" column blank. Refer to the back of Schedule E-Continuation Sheet for detailed explanations of each category.

- "C" -- MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES
- "B" -- BROADCAST ADVERTISING
- "N" -- NEWSPAPER AND PERIODICAL ADVERTISING
- "O" -- OUTSIDE ADVERTISING
- "S" -- SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- "F" -- FUNDRAISING EVENTS
- "I" -- INDEPENDENT EXPENDITURES
- "L" -- LITERATURE
- "G" -- GENERAL OPERATIONS AND OVERHEAD
- "T" -- TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED)
- "P" -- PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	CODE	OR		AMOUNT PAID
		DESCRIPTION OF PAYMENT		
Garden Grove Community Meeting Center 11300 Stanford Ave Garden Grove, CA 92640	F	Room for Fund Raising Meeting event		580
Hyang Chon Restaurant 8754 Garden Grove Blvd Garden Grove, CA 92644	F	Catered for for Fund Raising event		1,500
Korea House 12118 Brookhurst Garden Grove, CA 92641	F	Catered food for Event		1,500

Important: Contributions and expenditures made out of campaign funds to or on behalf of other officeholders, candidates, committees, or ballot measures must also be entered on the Allocation Page, Part I.

## Payments and Contributions Made Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ 3,580
2. Payments made this period of under \$100. (Do not itemize.) ..... \$ 8153
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part II, Column (d).) ..... \$ \_\_\_\_\_
4. Total accrued expenses paid this period. (Do not itemize. Enter amount from Schedule F, Line 4.) ..... \$ \_\_\_\_\_
5. Total payments made this period. (Add Lines 1, 2, 3, and 4. Enter here and on the Summary Page, Column A, Line 8.) ..... TOTAL \$ 8153

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

**Schedule E  
(Continuation Sheet)  
Payments and Contributions  
(Other Than Loans) Made**

Statement covers period  
from 1/1/94  
through 6/30/94

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490

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

*Ho Chung Campaign Committee*

I.D. NUMBER

*921776*

**CODES FOR CLASSIFYING EXPENDITURES**

- "C" -- MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES
- "B" -- BROADCAST ADVERTISING
- "N" -- NEWSPAPER AND PERIODICAL ADVERTISING
- "O" -- OUTSIDE ADVERTISING
- "S" -- SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
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- "T" -- TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED)
- "P" -- PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE, IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
<i>Family Printing 8575 Garden Grove Blvd Garden Grove, CA 92644</i>	<i>L</i>		<i>Invitation and letter printing for event</i>	<i>879</i>
<i>Sun Shine Sign &amp; Maintenance Co 12945 Brookhurst Way Garden Grove, CA 92641</i>	<i>L</i>		<i>Special banner for display at event</i>	<i>50</i>
<i>Sunny Chung 8744 Garden Grove Blvd Garden Grove, CA 92644</i>	<i>G</i>		<i>Paper Supplies, Favors, table decorations, flags,</i>	<i>871</i>
<i>Zakets Family Market 12921 Main Street Garden Grove, CA 92640</i>	<i>F</i>		<i>Food catered for fund raising event</i>	<i>349</i>
<i>U.S. Postmaster - Ho Chung Starford Avenue Garden Grove, CA 92640</i>	<i>L</i>		<i>Mailing costs for all literature relating to event</i>	<i>725</i>

SUBTOTAL \$ *2874*

**Schedule E  
(Continuation Sheet)  
Payments and Contributions  
(Other Than Loans) Made**

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

SCHEDULE E (cont.)

Statement covers period  
from 1/1/94  
through 6/30/94

Page 19 of 21

I.D. NUMBER  
921776

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

Ho Chung Campaign Committee

**CODES FOR CLASSIFYING EXPENDITURES**

- "C" -- MONETARY AND IN-KIND (NON-MONETARY) CONTRIBUTIONS TO OTHER CANDIDATES AND COMMITTEES
- "I" -- INDEPENDENT EXPENDITURES
- "L" -- LITERATURE
- "B" -- BROADCAST ADVERTISING
- "N" -- NEWSPAPER AND PERIODICAL ADVERTISING
- "O" -- OUTSIDE ADVERTISING
- "S" -- SURVEYS, SIGNATURE GATHERING, DOOR-TO-DOOR SOLICITATIONS
- "F" -- FUNDRAISING EVENTS

- "G" -- GENERAL OPERATIONS AND OVERHEAD
- "T" -- TRAVEL, ACCOMMODATIONS AND MEALS (MUST BE DESCRIBED)
- "P" -- PROFESSIONAL MANAGEMENT AND CONSULTING SERVICES

NAME AND ADDRESS OF PAYEE, CREDITOR, OR RECIPIENT OF CONTRIBUTION (IF COMMITTEE. IN ADDITION TO COMMITTEE'S NAME AND ADDRESS, ENTER I.D. NUMBER OR, IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER TREASURER'S NAME AND ADDRESS)

JAY'S CATERING  
10581 Garden Grove Blvd  
Garden Grove, CA

LIQUOR BAR AND DELI  
17320 Marquardt Ave  
Cerritos, CA 90701

SHEILA WORKS BULLOCK  
35737 Beach Road  
Capistrano Beach, CA 92608

SYSCOM COMPANY  
10015 Garden Grove Blvd  
Garden Grove, CA 92644

CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
F		Catered American food for fund raising event	1000
F		Refreshment for fund raising event	249
P		Consultant services for fund raising event planning	150
L		Computer program for fund raising event names, addresses, etc	300

SUBTOTAL \$ 1,699

**Schedule B — Part I  
Loans Received**

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

SCHEDULE B - Part I

Statement covers period  
from 1/1/94  
through 6/30/94

Page 20 of 21

SEE INSTRUCTIONS ON REVERSE

NAME OF OFFICEHOLDER OR CANDIDATE AND CONTROLLED COMMITTEE

*Ho Chung Campaign Committee*

I.D. NUMBER

921776

DATE RECEIVED	LENDER OR GUARANTOR'S FULL NAME AND ADDRESS (IF COMMITTEE, ENTER FULL NAME, ADDRESS AND I.D. NUMBER. IF NO I.D. NUMBER HAS BEEN ASSIGNED, ENTER THE TREASURER'S NAME AND ADDRESS)	LENDER / GUARANTOR'S OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER BUSINESS NAME)	LENDER INFORMATION			GUARANTOR INFORMATION		
			DUE DATE/ INTEREST RATE	AMOUNT OF LOAN	CUMULATIVE TO DATE	AMOUNT GUARANTEED	CUMULATIVE TO DATE	
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR	
			INTEREST RATE		OTHER		OTHER	
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR	
			INTEREST RATE		OTHER		OTHER	
	<input type="checkbox"/> Lender <input type="checkbox"/> Guarantor*		DUE DATE		CALENDAR YEAR		CALENDAR YEAR	
			INTEREST RATE		OTHER		OTHER	

\*See important instructions on reverse.

(a) SUBTOTAL \$ (b) \$

**Loans Received — Part I Summary**

- Loans of \$100 or more received this period. (Include all Loans Received — Part I (a) subtotals.) ..... \$
- Loans under \$100 received this period. (Do not itemize.) ..... \$
- Total loans received this period. (Add Lines 1 and 2.) ..... TOTAL \$

**Loans Received — Part II Summary**

- Loans of \$100 or more repaid, forgiven, or paid by a third party this period. (Include all Part II (c) subtotals. If forgiven or paid by a third party, also itemize the transaction on Schedule A.) ..... \$ 2000.00
- Loans under \$100 repaid, forgiven, or paid by a third party. (Do no itemize.) If forgiven or paid by a third party, include this amount on Schedule A Summary, Line 2. .... \$
- Total loans repaid, forgiven, or paid by a third party this period. (Add Lines 4 + 5) ..... TOTAL \$ (2000.00)
- Net change this period. (Subtract Line 6 from Line 3.) ..... NET \$ (2000.00)

Enter the net here and on the Summary Page, Column A, Line 2. ....  
May be a negative number.



Date Received by FPPC

# FORM 721

Date Received by Filing Official

## STATEMENT OF ECONOMIC INTERESTS

*A Public Document*

1993/94

PLEASE TYPE OR PRINT IN INK

RECEIVED  
CITY OF GARDEN GROVE  
CITY CLERK

APR 8 10 23 AM '94

NAME

Ho Chung

TELEPHONE NUMBER

(714) 539-2255

MAILING ADDRESS

STREET

CITY

ZIP CODE

8744 Garden Grove Bl. Garden Grove, CA 92644

### OFFICE HELD OR SOUGHT (See instructions on page 3):

STATE OF CALIFORNIA OFFICE: \_\_\_\_\_ DISTRICT: \_\_\_\_\_

JUDICIAL BRANCH COUNTY: \_\_\_\_\_ COURT: \_\_\_\_\_

CHECK ONE:

JUDGE

COMMISSIONER

PRO-TEM

RETIRED JUDGE

COUNTY OF: \_\_\_\_\_ OFFICE/POSITION: \_\_\_\_\_

CITY OF: Garden Grove OFFICE/POSITION: Council member

EXPANDED STATEMENT: \_\_\_\_\_  
NAME OF AGENCY \_\_\_\_\_ OFFICE/POSITION \_\_\_\_\_

### TYPE OF STATEMENT (Check the Appropriate Box(es)):

ASSUMING OFFICE STATEMENT  
(For Newly-Elected and Newly-Appointed Officials ONLY)

Date Assumed Office or, if you are an Appointed Official subject to confirmation, enter the Date Appointed or Nominated:

12 8 1992  
mo. day yr.

ELECTED OFFICIAL

APPOINTED OFFICIAL

ANNUAL STATEMENT The period covered is ~~January 1, 1993~~ DECEMBER 9, 1992 through December 31, 1993.

LEAVING OFFICE STATEMENT Date Left Office: \_\_\_\_\_  
The period covered is January 1, 19\_\_\_\_, through the date of leaving office.

CANDIDATE STATEMENT

### VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 April 8, 1993, at Garden Grove  
(month, day) (year) (city and state)

SIGNATURE

# FORM 721

NAME Ho Chung

The following summary must be completed by all filers. Do not complete this summary page until you have carefully reviewed all schedules and the instructions for each schedule.

	SCHEDULE COMPLETED AND ATTACHED	NO REPORTABLE INTERESTS
Schedule A - INVESTMENTS <i>(Not Held By A Business Entity Or Trust)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule B - INTERESTS IN REAL PROPERTY <i>(Not Held By A Business Entity Or Trust)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule C-1 - INTERESTS IN REAL PROPERTY HELD BY A BUSINESS ENTITY OR TRUST	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule C-2 - INVESTMENTS HELD BY A BUSINESS ENTITY OR TRUST	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule D - INCOME <i>(Other Than Loans, Gifts And Honoraria)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule D-1 - INCOME -- TRAVEL PAYMENTS, ADVANCES, REIMBURSEMENTS	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule E - INCOME -- LOANS <i>(Received Or Outstanding During The Reporting Period)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule F - INCOME -- GIFTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule G - INCOME -- HONORARIA	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule H-1 - COMMISSION INCOME RECEIVED BY BROKERS, AGENTS AND SALESPERSONS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule H-2 - INCOME AND LOANS TO BUSINESS ENTITIES OR TRUSTS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule H-3 - INCOME FROM RENTAL PROPERTY	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**NOTE:** AFTER THE SUMMARY PAGE HAS BEEN COMPLETED, PLEASE DISCARD THOSE SCHEDULES ON WHICH YOU HAVE NO REPORTABLE INTERESTS.



NAME Ho Chung

**Schedule B - Interests In Real Property**  
**(Not Held By A Business Entity Or Trust)**

(SEE INSTRUCTIONS ON PRECEDING PAGE)

STREET ADDRESS OR PRECISE LOCATION OF PROPERTY <i>8771 Anthony ave</i>		CITY <i>Garden Grove</i>	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input checked="" type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: <u>6-1992</u> Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*

**NOTE:** You may be required to report on Schedule D any income (\$250 or more) received by you or your spouse from rental property listed on Schedule B.

\*If you have a 10% or greater interest in a rental property, you may have additional reporting requirements on Schedule H-3.

If additional space is needed, check box and attach an additional Schedule B.

NAME \_\_\_\_\_

## Schedule C-1 - Interests In Real Property Held By A Business Entity Or Trust

(SEE INSTRUCTIONS ON PRECEDING PAGE)

**Name Of Business Entity Or Trust Holding The Real Property:** Ho chung state Farm Insurance Co

Your investment in this business entity must be reported on Schedule A-Investments.

STREET ADDRESS OR PRECISE LOCATION OF PROPERTY <u>8744 garden grove Bl</u>	CITY <u>Gardengrove</u>	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input checked="" type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST <u>ownership</u>		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: <u>8-1990</u> Date Disposed: _____</span>		
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY	CITY	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: _____ Date Disposed: _____</span>		
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY	CITY	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: _____ Date Disposed: _____</span>		
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY	CITY	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: _____ Date Disposed: _____</span>		
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY	CITY	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: _____ Date Disposed: _____</span>		
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY	CITY	FAIR MARKET VALUE <input type="checkbox"/> \$1,000-\$10,000 <input type="checkbox"/> \$10,001-\$100,000 <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST		
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year: <span style="float: right;">Date Acquired: _____ Date Disposed: _____</span>		

If additional space is needed, check box and attach an additional Schedule C-1.

NAME Ho Chung

**Schedule D - Income**  
**(Other Than Loans, Gifts And Honoraria)**

(SEE INSTRUCTIONS ON PRECEDING PAGE)

GROSS INCOME RECEIVED:

NAME OF THE SOURCE OF INCOME <u>HO Y. CHUNG State Farm Insurance Co</u>	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> Over \$10,000
ADDRESS <u>8744 Gardengrove Bl Gardengrove, CA</u>	
NATURE OF BUSINESS ACTIVITY, IF ANY <u>Insurance Agency</u>	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED <u>Commission from Insurance Service</u>	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	

If additional space is needed, check box and attach an additional Schedule D.

NAME Ho Chung

**Schedule D-1 - Income -- Travel Payments, Advances, Reimbursements**

(SEE INSTRUCTIONS ON PRECEDING PAGE)

		DATE(S): (mo, day & yr)	AMOUNT(S):	PURPOSE AND LOCATION OF TRAVEL:
NAME OF SOURCE <u>So. CA Edison Co. of Rosemead</u> ADDRESS		8-10-93	lunch \$24	IRVINE Marriott Hotel
NATURE OF BUSINESS ACTIVITY, IF ANY <u>lunches at Industrial League of C.</u>				
TYPE OF PAYMENT: (CHECK ONE) <input checked="" type="checkbox"/> GIFT <input type="checkbox"/> INCOME				
NAME OF SOURCE <u>So. CA Edison Co of Rosemead</u> ADDRESS		4-13-93	Cruise travel \$75	inspection for Desalting plant St. Catalina Island.
NATURE OF BUSINESS ACTIVITY, IF ANY <u>Catalina trip for inspection the plant.</u>				
TYPE OF PAYMENT: (CHECK ONE) <input checked="" type="checkbox"/> GIFT <input type="checkbox"/> INCOME				
NAME OF SOURCE ADDRESS NATURE OF BUSINESS ACTIVITY, IF ANY TYPE OF PAYMENT: (CHECK ONE) <input type="checkbox"/> GIFT <input type="checkbox"/> INCOME				
NAME OF SOURCE <u>Oregon Christian Businessmen Committee</u> ADDRESS <u>4625 So West aloha Oregon</u> NATURE OF BUSINESS ACTIVITY, IF ANY <u>Speech</u>		4-3-93	Travel Ticket \$215	speech at Portland CBMC Prayer Breakfast
TYPE OF PAYMENT: (CHECK ONE) <input checked="" type="checkbox"/> GIFT <input type="checkbox"/> INCOME				
NAME OF SOURCE ADDRESS NATURE OF BUSINESS ACTIVITY, IF ANY TYPE OF PAYMENT: (CHECK ONE) <input type="checkbox"/> GIFT <input type="checkbox"/> INCOME				

If additional space is needed, check box and attach an additional Schedule D-1.

Date Received by FPPC

# FORM 721

Date Received by Filing Official

## STATEMENT OF ECONOMIC INTERESTS

RECEIVED  
CITY OF GARDEN GROVE  
CITY CLERKS OFFICE

A Public Document

Aug 15 5 01 PM '94

1993/94

PLEASE TYPE OR PRINT IN INK

NAME

Ho Chung

TELEPHONE NUMBER

(714) 539-2255

MAILING ADDRESS

STREET

CITY

ZIP CODE

8744 Garden Grove Bl. Garden Grove, CA 92644

### OFFICE HELD OR SOUGHT (See instructions on page 3):

STATE OF CALIFORNIA OFFICE: \_\_\_\_\_ DISTRICT: \_\_\_\_\_

JUDICIAL BRANCH COUNTY: \_\_\_\_\_ COURT: \_\_\_\_\_

CHECK ONE:  JUDGE  COMMISSIONER  PRO-TEM  RETIRED JUDGE

COUNTY OF: Orange OFFICE/POSITION: \_\_\_\_\_

CITY OF: Garden Grove OFFICE/POSITION: Mayor

EXPANDED STATEMENT: \_\_\_\_\_  
NAME OF AGENCY \_\_\_\_\_ OFFICE/POSITION \_\_\_\_\_

### TYPE OF STATEMENT (Check the Appropriate Box(es)):

ASSUMING OFFICE STATEMENT  
(For Newly-Elected and Newly-Appointed Officials ONLY)

Date Assumed Office or, if you are an Appointed Official subject to confirmation, enter the Date Appointed or Nominated:

\_\_\_\_\_ mo. day yr.

ELECTED OFFICIAL

APPOINTED OFFICIAL

ANNUAL STATEMENT The period covered is January 1, 1993 through December 31, 1993.

LEAVING OFFICE STATEMENT Date Left Office: \_\_\_\_\_  
The period covered is January 1, 19\_\_\_\_, through the date of leaving office.  
mo. day yr.

CANDIDATE STATEMENT

### VERIFICATION

I have used all reasonable diligence in preparing this statement. I have reviewed the 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 8-15, 1994, at City of Garden Grove  
(month, day) (year) (city and state)

SIGNATURE

# FORM 721

NAME Ho Chung

The following summary must be completed by all filers. Do not complete this summary page until you have carefully reviewed all schedules and the instructions for each schedule.

	SCHEDULE COMPLETED AND ATTACHED	NO REPORTABLE INTERESTS
Schedule A - INVESTMENTS <i>(Not Held By A Business Entity Or Trust)</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule B - INTERESTS IN REAL PROPERTY <i>(Not Held By A Business Entity Or Trust)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule C-1 - INTERESTS IN REAL PROPERTY HELD BY A BUSINESS ENTITY OR TRUST	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule C-2 - INVESTMENTS HELD BY A BUSINESS ENTITY OR TRUST	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Schedule D - INCOME <i>(Other Than Loans, Gifts And Honoraria)</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Schedule D-1 - INCOME -- TRAVEL PAYMENTS, ADVANCES, REIMBURSEMENTS	<input type="checkbox"/>	<input type="checkbox"/>
Schedule E - INCOME -- LOANS <i>(Received Or Outstanding During The Reporting Period)</i>	<input type="checkbox"/>	<input type="checkbox"/>
Schedule F - INCOME -- GIFTS	<input type="checkbox"/>	<input type="checkbox"/>
Schedule G - INCOME -- HONORARIA	<input type="checkbox"/>	<input type="checkbox"/>
Schedule H-1 - COMMISSION INCOME RECEIVED BY BROKERS, AGENTS AND SALESPERSONS	<input type="checkbox"/>	<input type="checkbox"/>
Schedule H-2 - INCOME AND LOANS TO BUSINESS ENTITIES OR TRUSTS	<input type="checkbox"/>	<input type="checkbox"/>
Schedule H-3 - INCOME FROM RENTAL PROPERTY	<input type="checkbox"/>	<input type="checkbox"/>

**NOTE:** AFTER THE SUMMARY PAGE HAS BEEN COMPLETED, PLEASE DISCARD THOSE SCHEDULES ON WHICH YOU HAVE NO REPORTABLE INTERESTS.

NAME Ho Chung

**Schedule B - Interests In Real Property  
(Not Held By A Business Entity Or Trust)**

(SEE INSTRUCTIONS ON PRECEDING PAGE)

STREET ADDRESS OR PRECISE LOCATION OF PROPERTY <u>8771 Anthony Ave</u>		CITY <u>Gardengrove CA</u>	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input checked="" type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST <u>Ownership</u>			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*
STREET ADDRESS OR PRECISE LOCATION OF PROPERTY		CITY	FAIR <input type="checkbox"/> \$1,000-\$10,000 MARKET <input type="checkbox"/> \$10,001-\$100,000 VALUE <input type="checkbox"/> Over \$100,000
NATURE OF INTEREST, E.G., OPTION, OWNERSHIP, LEASEHOLD, DEED OF TRUST			
If Acquired Or Disposed During The Reporting Period You Must Indicate Month, Day And Year:	Date Acquired: _____ Date Disposed: _____	If Rental Property, Ownership Interest Is	<input type="checkbox"/> Less than 10% <input type="checkbox"/> 10% or greater*

**NOTE:** You may be required to report on Schedule D any income (\$250 or more) received by you or your spouse from rental property listed on Schedule B.

\*If you have a 10% or greater interest in a rental property, you may have additional reporting requirements on Schedule H-3.

If additional space is needed, check box and attach an additional Schedule B.

NAME Ho Chuns

**Schedule D - Income  
(Other Than Loans, Gifts And Honoraria)**

(SEE INSTRUCTIONS ON PRECEDING PAGE)

GROSS INCOME RECEIVED:

NAME OF THE SOURCE OF INCOME <i>Ho chung state Farm Insurance Co.</i>	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> Over \$10,000
ADDRESS <i>8744 Garden Grove Bl. Garden Grove, CA 92644</i>	
NATURE OF BUSINESS ACTIVITY, IF ANY <i>Insurance service</i>	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED <i>Commission</i>	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	
NAME OF THE SOURCE OF INCOME	<input type="checkbox"/> \$250 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> Over \$10,000
ADDRESS	
NATURE OF BUSINESS ACTIVITY, IF ANY	
DESCRIPTION OF THE CONSIDERATION FOR WHICH INCOME WAS RECEIVED	

If additional space is needed, check box and attach an additional Schedule D.