

TO DGS 4/12/11

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APR 08 2011

COPY

REQUEST FOR PAYMENT - PER DIEM

Regulatory Authority: Proposition 11, Voters FIRST Act  
Form No. CRC - 001

Per JA

Date (12/10)

Please type or print clearly in the appropriate sections of this form. Failure to do so could delay the processing of this document.

Submit original only

Last Name	First Name	MI	Social Security (Last 4 only)	
Ancheta	Angelo	[REDACTED]	XXX	XX [REDACTED]

Date Engaged in Business			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
2	10	2011	\$ 300	00	CRC Business Meeting - Claremont, CA 2✓
2	11	2011	\$ 300	00	CRC Business Meeting - Claremont, CA 2✓
2	12	2011	\$ 300	00	CRC Business Meeting - Claremont, CA 2✓
2	23	2011	\$ 300	00	CRC Business Meeting - Sacramento, CA 2✓
2	24	2011	\$ 300	00	CRC Business Meeting - Sacramento, CA 2✓
2	25	2011	\$ 300	00	CRC Business Meeting - Sacramento, CA 2✓
2	26.00	2011	\$ 300	00	CRC Business Meeting - Sacramento, CA 2✓
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
TOTAL:			\$ 2,100	00	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

[Redacted Signature]

Deborah R. Davis  
[Redacted Signature]

4/8/11  
Date:

PERSONNEL USE ONLY

Position Number			

Processed By	
Print Name	
Title	
Signature	Date

State of California TO DGS 4/12/11

Citizens Redistricting Commission

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REQUEST FOR PAYMENT - PER DIEM  
Regulatory Authority: Proposition 11, Voters FIRST Act  
Form No. CRC - 001

Per [Signature]

Date (12/10)

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Last Name:	First Name:	MI:	Social Security (Last 4 only)		
Ancheta	Angelo	[Redacted]	XXX	XX	[Redacted]

Date Engaged in Business:			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
3	2	2011	\$300	00	Preparation/Travel/Attendance - Sacramento Bee Meeting, Sacramento, CA ✓
3	14	2011	\$300	00	Preparation/Review Materials for CRC Legal Advisory Committee Meeting ✓ 1
3	15	2011	\$300	00	CRC Legal Advisory Committee Meeting - Sacramento, CA ✓ 22
3	17	2011	\$300	00	CRC Business Meeting - Sacramento, CA ✓ 2
3	18	2011	\$300	00	CRC Business Meeting - Sacramento, CA ✓ 2
3	19	2011	\$300	00	CRC Business Meeting - Sacramento, CA ✓ 2
3	24.00	2011	\$300	00	CRC Business Meeting - Sacramento, CA ✓ 2
3	25	2011	\$300	00	CRC Business Meeting - Sacramento, CA ✓ 2
3	31	2011	\$300	00	Preparation/Travel/Attendance - New America Media Briefing - Burlingame, CA ✓
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
TOTAL:			\$2,700	00	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

Commissioner's Signature [Redacted]

Deborah R. Davis

[Redacted Signature]

4/8/11  
Date:

PERSONNEL USE ONLY

Position Number:			

Processed By:			
Print Name:			
Title:			
Signature:		Date:	

State of California

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Citizens Redistricting Commission

*JP*

MAY 05 2011

**COPY**

**REQUEST FOR PAYMENT - PER DIEM**

Regulatory Authority: Proposition 11, Voters FIRST Act  
Form No. CRC - 001

Per *JP*

Date (12/10)

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Last Name	First Name	M	Social Security (Last 4 digits)	
Ancheta	Angelo		xxx	xx

Date Engaged in Business			Amount per Day (\$300 or day)	Per Diem	Activity
Month	Day	Year			
4	7	2011	\$300	00	BM
4	8	2011	\$300	00	BM
4	9	2011	\$300	00	PI
4	10	2011	\$300	00	PI
4	13	2011	\$300	00	PI
4	14	2011	\$300	00	PI
4	15.00	2011	\$300	00	PI
4	16	2011	\$300	00	PI
4	19	2011	\$300	00	PI
4	25	2011	\$300	00	CP, BM (Prep and Meeting with VRA Counsel and Staff)
4	27	2011	\$300	00	MT
4	28	2011	\$300	00	B/I
4	28	2011	\$300	00	B/I
4	29	2011	\$300	00	CP, PI
4	30	2011	\$300	00	B/I
<b>TOTAL:</b>			<b>\$4,200</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

*DEBORAH R. DINE*

*5/5/11*  
Date:

PERSONNEL USE ONLY

Position Number	Department	Division	Office	Date

TO DOS 5/6/11

Secretary of State  
Attn: Human Resources

**REQUEST FOR PAYMENT - PER DIEM**

Regulatory Authority: Proposition 11, Voters FIRST Act  
Form No. CRC - 001

Date (12/10)

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Last Name:	First Name	MI	Social Security (Last 4 only)		
Ancheta	Angelo	[REDACTED]	XX	XX	[REDACTED]

Date Engaged in Business:			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
5	1	2011	\$ 300	00	B/I
5	4	2011	\$ 300	00	CP
5	5	2011	\$ 300	00	B/I
5	6	2011	\$ 300	00	PI
5	11	2011	\$ 300	00	CP (Vice Chair)
5	12	2011	\$ 300	00	PI (Vice Chair)
5	13.00	2011	\$ 300	00	PI (Vice Chair)
5	14	2011	\$ 300	00	PI (Vice Chair)
5	15	2011	\$ 300	00	CP (Chair)
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
<b>TOTAL:</b>			<b>\$ 2,700</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

[REDACTED Signature]

DEBORAH R. DAVIS

[REDACTED Signature]

5/1/11

Signature

Date:

PERSONNEL USE ONLY

Position Number:	Processed By:	
	Print Name:	
	Title:	
	Signature:	Date:

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JUN 0 1 2011

**REQUEST FOR PAYMENT – PER DIEM**  
 Regulatory Authority: Proposition 11, Voters FIRST Act  
 Form No. CRC – 001

Date (12/10)

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Submit original only

Last Name:	First Name	MI	Social Security (Last 4 only)	
Ancheta	Angelo	[REDACTED]	XXX	XX [REDACTED]

Date Engaged in Business:			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
5	16	2011	\$ 300	00	CP (Chair)
5	17	2011	\$ 300	00	CP (Chair)
5	18	2011	\$ 300	00	CP (Chair)
5	19	2011	\$ 300	00	PI (Chair)
5	20	2011	\$ 300	00	B/I (Chair)
5	21	2011	\$ 300	00	PI (Chair)
5	22.00	2011	\$ 300	00	PI (Chair)
5	23	2011	\$ 300	00	PI (Chair)
5	24	2011	\$ 300	00	PI (Chair)
5	25	2011	\$ 300	00	CP
5	26	2011	\$ 300	00	BM
5	27	2011	\$ 300	00	LD
5	28	2011	\$ 300	00	LD
5	31	2011	\$ 300	00	CP
<b>TOTAL:</b>			<b>\$ 4,200</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

Commissioner's Signature  
 [REDACTED]

DEBORAH R. DAVIS

Signature  
 [REDACTED]

Date: 6/1/11

PERSONNEL USE ONLY

Position Number:

--	--	--	--

Processed By:

Print Name:	
Title:	
Signature:	
Date:	

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JUN 01 2011



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Last Name	First Name	MI	Social Security (Last 4 only)		
Ancheta	Angelo	[REDACTED]	XXX	XX	[REDACTED]

Date Engaged in Business			Amount per Day		Activity
Month	Day	Year	Amount	Rate	
6	11	2011	\$ 300	00	CP
6	13	2011	\$ 300	00	CP
6	14	2011	\$ 300	00	CP
6	15	2011	\$ 300	00	CP
6	16	2011	\$ 300	00	B/I
6	17	2011	\$ 300	00	PI
6	18.00	2011	\$ 300	00	PI
6	19	2011	\$ 300	00	PI
6	20	2011	\$ 300	00	CP/PI
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
<b>TOTAL:</b>			<b>\$2,700</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

[REDACTED]

Commissioner's Signature

DEREK R DAVIS

[REDACTED]

7/19/11  
Date:

**PERSONNEL USE ONLY**

Position Number	[REDACTED]			Processed By	[REDACTED]
				Signature	[REDACTED]
				Date	[REDACTED]

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JUL 13 2011

Secretary of State  
Attn: Human Resources  
1500 11<sup>th</sup> Street, Room 475  
Sacramento, Ca 95814

BY: [Signature]



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**REQUEST FOR PAYMENT – PER DIEM**

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Last Name	First Name	M	Social Security (Last 4 only)	
Ancheta	Angelo		XXX	XX

Date Engaged in Business			Amount per Day (\$400.00/day)	Activity	
Month	Day	Year			
7	1	2011	\$300	00	LD
7	2	2011	\$300	00	LD
7	3	2011	\$300	00	LD
7	5	2011	\$300	00	CP (Vice Chair)
7	6	2011	\$300	00	CP/BM (Vice Chair)
7	7	2011	\$300	00	LD (Vice Chair)
7	8.00	2011	\$300	00	LD (Vice Chair)
7	9	2011	\$300	00	LD (Vice Chair)
7	10	2011	\$300	00	CP (Vice Chair/Chair)
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
<b>TOTAL:</b>			<b>\$2,700</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

Commissioner's Signature

DEBORAH R. DAVIS

[Redacted Signature]

7/13/11  
Date:

**PERSONNEL USE ONLY**

Position Number	Processed By
	Date

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R JUL 13 2011 D  
MA

Secretary of State  
Attn: Human Resources  
1500 11<sup>th</sup> Street, Room 475  
Sacramento, Ca 95814

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Last Name	First Name	MI	Social Security (Last 4 only)		
Ancheta	Angelo		XXX	XX	

Date Engaged In Business			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
7	11	2011	\$ 300	00	CP (Chair)
7	12	2011	\$ 300	00	CP (Chair)
7	13	2011	\$ 300	00	LD (Chair)
7	14	2011	\$ 300	00	LD (Chair)
7	15	2011	\$ 300	00	LD (Chair)
7	16	2011	\$ 300	00	LD (Chair)
7	18.00	2011	\$ 300	00	CP
7	20	2011	\$ 300	00	CP
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
<b>TOTAL:</b>			<b>\$ 2,400</b>	<b>00</b>	

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Commissioner's Signature

Print Authorizing Name:

Signature Date:

**PERSONNEL USE ONLY**

Position Number	Processed By
	Print Name
	Title
	Signature
	Date

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R JUL 21 2011 D  
BY: *[Signature]*

Secretary of State  
Attn: Human Resources  
1500 11<sup>th</sup> Street, Room 475  
Sacramento, Ca 95814



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Last Name	First Name	MI	Social Security (Last 4 only)
Ancheta	Angelo		XXX XX

Date Engaged in Business			Amount per Day (\$300.00/day)		Activity
Month	Day	Year			
8	1	2011	\$ 300	00	CP
8	6	2011	\$ 300	00	CP
8	7	2011	\$ 300	00	CP
8	9	2011	\$ 300	00	CP
8	13	2011	\$ 300	00	BM
8	14	2011	\$ 300	00	BM
8	15.00	2011	\$ 300	00	BM
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
			\$	00	
<b>TOTAL:</b>			<b>\$ 2,100</b>	<b>00</b>	

I understand that as a Commissioner of the Citizens Redistricting Commission, I shall receive payment in accordance with Proposition 11, Voters FIRST Act and certify that the information above is accurate to the best of my knowledge

\_\_\_\_\_  
 Print Authorizing Name:

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date:

**PERSONNEL USE ONLY**

Position Number	Processed By
	Print Name:
	Title:
	Signature:
	Date:

Secretary of State  
 Attn: Human Resources  
 1500 11<sup>th</sup> Street, Room 475  
 Sacramento, Ca 95814

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 AUG 29 2011  
 BY: *[Signature]*