

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84700-84710.5)

Type or print in ink.

JWER:PADE

*Rec'd
8-18-05
pic*

**CALIFORNIA
2004/02
FORM 460**

Page 1 of 14 2

For Official Use Only

Statement covers period
from Jan. 1, 2005
through June 30, 2005

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

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Official/State Candidate Controlled Committee**
- State Candidate Election Committee
 - Recall
 - Initiative/Proposition
- Ballot Measure Committee**
- Primarily Funded
 - Controlled
 - Sponsored (Also Complete 101)
- General Purpose Committee**
- Sponsored
 - Small Contributor Committee
 - Political Party/Central Committee
- Primarily Funded Candidate/Official/State Candidate** (Also Complete 101)

2. Type of Statement:

- Preliminary Statement
- Quarterly Statement
- Semi-annual Statement
- Special Odd-Year Report
- Termination Statement
- Supplemental Preliminary Statement - Attach Form 495
- Amendment (Explain below)**

Amendment to summary page (page 3 of 14)

3. Committee Information

ID NUMBER
1245607

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

Friends of Otto Lee

STREET ADDRESS (NO P.O. BOX)

12 S. First St., #1205

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Jose	CA	95113	408-286-8966

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL FAX/E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Jennifer Cheng

MAILING ADDRESS

12 South First St., #1205

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Jose	CA	95113	408-286-8933

NAME OF ASSISTANT TREASURER, IF ANY

Otto O. Lee

MAILING ADDRESS

12 South First St., #1205

CITY	STATE	ZIP CODE	AREA CODE/PHONE
San Jose	CA	95113	408-286-8933

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.

Prepared by 8/16/05
Date

Reviewed by 8/16/05
Date

Prepared by _____
Date

Reviewed by _____
Date

By Jennifer Cheng
Signature of Treasurer or Assistant Treasurer

By [Signature]
Signature of Certifying Officer for Candidate, State Measure, Initiative or Responsible Officer of Sponsor

By _____
Signature of Certifying Officer for Candidate or Official/State Candidate

By _____
Signature of Certifying Officer for Candidate or Official/State Candidate

**Campaign Disclosure Statement
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>Jan. 1, 2005</u>	CALIFORNIA FORM 460
through <u>June 30, 2005</u>	
Page <u>2</u> of <u>14</u>	LD NUMBER <u>1245607</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Otto C. Lee

	Column A TOTAL THIS PERIOD (FROM PAID SUBSEQUENCES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions Schedule A, Line 3	\$ 10,137.00	\$ 10,137.00
2. Loans Received Schedule B, Line 3	-10,000.00	4,000.00
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 137.00	\$ 137.00
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0.00
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 137.00	\$ 137.00

**Calendar Year Summary for Candidates
Running in Both the State Primary and
General Elections**

_____ through 6/30 _____ P1 is Late

20. Contributions Received \$ _____ \$ _____

21. Expenditures Made \$ _____ \$ _____

	Column A	Column B
6. Payments Made Schedule E, Line 1	\$ 3,319.51	\$ 3,319.51
7. Loans Made Schedule F, Line 3	0.00	0.00
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 3,319.51	\$ 3,319.51
9. Accrued Expenses (Unpaid Bills) Schedule G, Line 3	0.00	0.00
10. Nonmonetary Adjustment Schedule D, Line 3	0.00	0.00
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 3,319.51	\$ 3,319.51

**Expenditure Limit Summary for State
Candidates**

27. Cumulative Expenditures Made*
(* Subject to Voluntary Expenditure Limits)

Date of Election (month/day)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____
____/____/____	\$ _____

Current Cash Statement

12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 8902.96
13. Cash Receipts Column A, Line 3 above	137.00
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00
15. Cash Payments Column A, Line 8 above	3,319.51
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 5,720.45

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

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).

17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00
Cash Equivalents and Outstanding Debts	
18. Cash Equivalents See instructions on reverse	\$ 0.00
19. Outstanding Debts Add Line 2 + Line 8 in Column B above	\$ 4,000.00

*Since January 1, 2001, amounts in this section may be different from amounts reported in Column B.