COVER PAGE Slate Mailer Organization Type or Print in Ink Campaign Statement (Government Code Sections 84218 - 84219) 2018 JUL 31 AM 10: 06 SEE INSTRUCTIONS ON REVERSE Statement covers period Amendment (explain): 01/01/2018 from 06/30/2018 () through State Matter Organization Information Is This A General Purpose Committee? FULL NAME OF SLATE MAILER ORGANIZATION: ID NUMBER If this Slate Mailer Organization is also a "general purpose committee" as defined in Neighborhood Preservation Coalition Government Code Section 82027.5, check box and attach the committee's campaign 1368498 disclosure report to this statement. ADDRESS NO. AND STREET 603 E Alton Ave STE G STATE ZIP CODE PHONE NUMBER Committee Report ID Number if Attached Santa Ana Recipient Committee 92705 714) 540-2295 NAME OF TREASURER Lysa Ray **ADDRESS** NO. AND STREET 603 E Alton Ave STE G CITY STATE ZIP CODE DAYTIME PHONE NUMBER Santa Ana 92705 (714)540-2295 III Summary of Payments Total Cumulative to Date This Period (Since January 1 of calendar year covered) 1. TOTAL PAYMENTS RECEIVED 250.00 2. TOTAL PAYMENTS MADE 128.95 **IV** 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. Santa Ana, CA Executed on CITY AND STATE SIGNATURE OF RESPONSIBLE OFFICER Name of Responsible Officer Lysa Ray Title Treasurer TYPE OR PRINT

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 FOR SLATE MAILER ORGANIZATIONS.

SCHEDULE A Schedule A Citalement of a compu Payto-nts Received SEE INSTRUCTIONS ON REVERSE NAME OF SLATE MAILER ORGANIZATION: I.D. NUMBER Neighborhood Preservation Coalition 1368498 (4) (5) (b) IDENTIFICATION OF PERSONS FROM WHOME NALLE, OF HUE SOUGHT, AND JURISDICTION OF CANDIDATE/ CHECK BOX TO INDICATE IF AMOUNT CUMULATIVE PROPERTY OF MACINES IN SOCIETIES NUMBER OF BRICDICTION, AND REMISER OF LETTER OF BALLOT PAYMENT WAS RECEIVED TO RECEIVED AMOUNT THIS PERIOD MEASURE SUPPORTED OR OPPOSED SUPPORT OR OPPOSE THIS RECEIVED SINCE (SEE IMPORTANT INSTRUCTIONS ON (IF DIFFERENT THAN COLUMN 2) CANDIDATE OR MEASURE PERIOD JANUARY 1 REVERSE) INCLUDED IN SLATE MAILER PER CANDIDATE OR MEASURE SUPPORT OPPOSE 02/06/2018 Delta Partners LLC 250.00 250.00 3184H Airway Ave. Χ Costa Mesa, CA 92626 Summary SUBTOTAL S 250.00 1.Amount Received – Itemized payments (Include all Schedule A subtotals) 250.00 2. Amount Received - Payments of less than \$100 (not itemized).... 0.00 3. Total Payments Received (Line 1 + Line 2) Enter here and in Column A, Line 1, of the Summary of Payments section on Page 1

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FPPC Form 401 (January/05)

3. Total Payments This Period (Line 1 + Line 2) Enter here and in Column A, Line 2,

of the Summary of Payments section on Page 1......\$