Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84218.5)

Statement covers period
from JUL 1, 2011
through DEC 31, 2011

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

Type or print in ink.

2. Type of Statement:
☐ Prelection Statement
☐ Semi-annual Statement
☐ Termination Statement
☐ Amendment (Explain below)
☐ Quarterly Statement
☐ Special Odd-Year Report
☐ Supplemental Prelection
Statement - Attach Form 495
☐ Primarily Formed Ballot Measure
Committee
☐ Controlled
☐ Sponsored
☐ Primarily Formed Candidate/
Offholder Committee
☐ General Purpose Committee
☐ Sponsored
☐ Small Contributor Committee
☐ Political Party/Central Committee

3. Committee Information

COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)
ED SELICH FOR CITY COUNCIL, 2012

I.D. NUMBER
1290041

STREET ADDRESS (NO P.O. BOX)
627 BAYSIDE DRIVE

CITY
CORONA DEL MAR
STATE
CA
ZIP CODE
92625
AREA CODE/PHONE
949.723.6383

MAILING ADDRESS
Mailing Address (P. Different) No. and Street or P.O. Box

P.O. BOX 12671

CITY
NEWPORT BEACH
STATE
CA
ZIP CODE
92658
AREA CODE/PHONE
949.759.9341

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.

Executed on JUN 30, 2012
By RAYMOND J. ZARTLER
Signature of Treasurer or Assistant Treasurer

Executed on JUN 30, 2012
By Signature of Controlling Offholder, Candidate, State Measure Proprietor or Responsible Officer of Sponsor

Executed on JUN 30, 2012
By Signature of Controlling Officerholder, Candidate, State Measure Proprietor

Executed on JUN 30, 2012
By Signature of Controlling Officerholder, Candidate, State Measure Proprietor

FPPC Form 460 (January'05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
State of California
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
EDWARD D. SELICH

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
COUNCIL MEMBER, CITY OF NEWPORT BEACH, DISTRICT 5

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)  CITY  STATE  ZIP  
627 BAYSIDE DRIVE  CORONA DEL MAR, CA  92625

Related Committees Not Included in this Statement: List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>CONTROLLED COMMITTEE?</td>
</tr>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>COMMITTEE ADDRESS</th>
<th>STREET ADDRESS (NO P.O. BOX)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER  JURISDICTION  

Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROponent

<table>
<thead>
<tr>
<th>OFFICE SOUGHT OR HELD</th>
<th>DISTRICT NO. IF ANY</th>
</tr>
</thead>
</table>

7. Primarily Formed Candidate/Officeholder Committee List names of officeholder(s) or candidate(s) for which this committee is primarily formed.

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER OR CANDIDATE</td>
<td>OFFICE SOUGHT OR HELD</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary
## Contributions Received

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$0</td>
<td>$0</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$45</td>
<td>$45</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$45</td>
<td>$45</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$45</td>
<td>$45</td>
</tr>
</tbody>
</table>

## Current Cash Statement

<table>
<thead>
<tr>
<th>Item</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$5,995</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ending Cash Balance</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.
### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) .................................................. $ 0.00
2. Unitemized payments made this period of under $100 .............................................................................. $ 45.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) .............. $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $ 45.00