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

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees – Complete Parts 1, 2, 3, and 4.
   - [ ] Officeholder, Candidate Controlled Committee
   - [ ] State Candidate Election Committee
   - [ ] Recall
     (Also Complete Part 5)
   - [ ] Primarily Formed Ballot Measure Committee
   - [ ] Controlled
   - [ ] Sponsored
     (Also Complete Part 6)
   - [ ] General Purpose Committee
     - [ ] Sponsored
     - [ ] Small Contributor Committee
   - [ ] Primarily Formed Candidate/Officerholder Committee
     (Also Complete Part 7)

2. Type of Statement:
   - [ ] Preelection Statement
   - [ ] Semi-annual Statement
   - [ ] Termination Statement
     (Also file a Form 410 Termination)
   - [ ] Amendment (Explain below)
   - [ ] Quarterly Statement
   - [ ] Special Odd-Year Report
   - [ ] Supplemental Preelection Statement - Attach Form 495

3. Committee Information
   I.D. NUMBER 1290041
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   ED SELICH FOR CITY COUNCIL, 2012
   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 (IF 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 12 July 2012
   By __________________________
   Signature of Treasurer or Assistant Treasurer
   Executed on 16 July 2012
   By __________________________
   Signature of Controlling Offiholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor
   Executed on __________________________
   By __________________________
   Signature of Controlling Offiholder, Candidate, State Measure Proponent
   Executed on __________________________
   By __________________________
   Signature of Controlling Offiholder, Candidate, State Measure Proponent

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
State of California
**Campaign Disclosure Statement**

**Summary Page**

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

Statement covers period from JAN 1, 2012 through JUN 30, 2012

**SUMMARY PAGE**

**CALIFORNIA FORM 460**

**I.D. NUMBER**

**1290041**

### Contributions Received

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)</td>
<td>CALENDAR YEAR TOTAL TO DATE</td>
</tr>
<tr>
<td>Monetary Contributions Schedule A, Line 3</td>
<td>$ 0</td>
</tr>
<tr>
<td>Loans Received Schedule B, Line 3</td>
<td>$ 50,000</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2</td>
<td>$ 50,000</td>
</tr>
<tr>
<td>Nonmonetary Contributions Schedule C, Line 3</td>
<td>$ 0</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4</td>
<td>$ 50,000</td>
</tr>
</tbody>
</table>

### Expenditures Made

<table>
<thead>
<tr>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments Made Schedule E, Line 4</td>
<td>$ 0</td>
</tr>
<tr>
<td>Loans Made Schedule H, Line 3</td>
<td>$ 0</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS Add Lines 6 + 7</td>
<td>$ 0</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills) Schedule F, Line 3</td>
<td>$ 0</td>
</tr>
<tr>
<td>Nonmonetary Adjustment Schedule C, Line 3</td>
<td>$ 0</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10</td>
<td>$ 0</td>
</tr>
</tbody>
</table>

### Current Cash Statement

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>12</td>
<td>Beginning Cash Balance</td>
<td>Previous Summary Page, Line 16</td>
<td>$ 5,950</td>
</tr>
<tr>
<td>13</td>
<td>Cash Receipts</td>
<td>Column A, Line 3 above</td>
<td>50,000</td>
</tr>
<tr>
<td>14</td>
<td>Miscellaneous Increases to Cash</td>
<td>Schedule I, Line 4</td>
<td>0</td>
</tr>
<tr>
<td>15</td>
<td>Cash Payments</td>
<td>Column A, Line 8 above</td>
<td>0</td>
</tr>
<tr>
<td>16</td>
<td>ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15</td>
<td>$ 55,950</td>
<td></td>
</tr>
</tbody>
</table>

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

### Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Date of Election</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cumulative Expenditures Made*</td>
<td>(If Subject to Voluntary Expenditure Limit)</td>
<td>$</td>
</tr>
</tbody>
</table>

*Amounts in this section may be different from amounts reported in Column B.*

### Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Line</th>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>18</td>
<td>Cash Equivalents</td>
<td>See instructions on reverse</td>
<td>$ 0</td>
</tr>
<tr>
<td>19</td>
<td>Outstanding Debts</td>
<td>Add Line 2 + Line 9 in Column B above</td>
<td>$ 50,000</td>
</tr>
</tbody>
</table>

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Schedule B - Part 1

### Loans Received

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

**Statement covers period**
from **JAN 1, 2012**
through **JUN 30, 2012**

<table>
<thead>
<tr>
<th>Full Name, Street Address and Zip Code of Lender</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EDWARD D. SELICH</strong> 627 BAYSIDE DRIVE CORONA DEL MAR, CA 92625</td>
</tr>
</tbody>
</table>

**IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER**
(F if self-employed, enter name of business)

<table>
<thead>
<tr>
<th>(a) Outstanding Balance Beginning This Period</th>
<th>(b) Amount Received This Period</th>
<th>(c) Amount Paid or Forgiven This Period</th>
<th>(d) Outstanding Balance at Close of This Period</th>
<th>(e) Interest Paid This Period</th>
<th>(f) Original Amount of Loan</th>
<th>(g) Cumulative Contributions to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>$0</td>
<td>$50,000</td>
<td>$0</td>
<td>12-31-12 DATE DUE</td>
<td>6-28-12 DATE DUE</td>
<td>$50,000</td>
<td>$50,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IND</th>
<th>COM</th>
<th>OTH</th>
<th>PTY</th>
<th>SCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>✅</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTALS $50,000 $0 $50,000 $0**

### Schedule B Summary

1. Loans received this period .......................... $50,000
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period ................. $0
   (Total Column (c) plus loans under $100 paid or forgiven.
   (Include loans paid by a third party that are also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1.) ............... NET $50,000
   (May be a negative number)

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.

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1Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee

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