Recipient Committee
Campaign Statement
Cover Page
(Government Code Sections 84200-84216.5)

Type or print in ink.

Statement covers period
from 01/01/2014
through 06/30/2014

Date of election if applicable:
(Month, Day, Year)
11/04/2014

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

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

   ________________________________
   ________________________________
   ________________________________

3. Committee Information
   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Muldoon for NB City Council 2014
   I.D. NUMBER
   1367652

   STREET ADDRESS (NO P.O. BOX)
   803 Amigos Way
   CITY
   Newport Beach
   STATE
   CA
   ZIP CODE
   92660
   AREA CODE/PHONE
   (949) 383-6045

   MAILING ADDRESS
   170 E. 17th Street Suite 110
   CITY
   Costa Mesa
   STATE
   CA
   ZIP CODE
   92627
   AREA CODE/PHONE
   (949) 734-0353

   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 07/24/2014
   By ________________________________
   Signature of Treasurer or Assistant Treasurer

   Executed on 07/24/2014
   By ________________________________
   Signature of Controlling Officer/Founder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

   Executed on ________________________________
   By ________________________________
   Signature of Controlling Officer/Founder, Candidate, State Measure Proponent

   Executed on ________________________________
   By ________________________________
   Signature of Controlling Officer/Founder, Candidate, State Measure Proponent

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
State of California
5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Kevin Muldoon

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Newport Beach City Council District 4

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
803 Amigos Way Newport Beach CA 92660

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>
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<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td>controls COMMITTEE? YES NO</td>
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<tr>
<td>COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)</td>
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<tr>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

[ ] SUPPORT [ ] OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

7. Primarily Formed 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>
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<td>[ ] SUPPORT [ ] OPPOSE</td>
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<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
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<td>[ ] SUPPORT [ ] OPPOSE</td>
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<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] SUPPORT [ ] OPPOSE</td>
</tr>
</tbody>
</table>

Attach continuation sheets if necessary.
## Contributions Received

1. Monetary Contributions .................................................. Schedule A, Line 3 $18,750.00 $18,750.00  
2. Loans Received ............................................................... Schedule B, Line 3 $1,750.00 $1,750.00  
3. SUBTOTAL CASH CONTRIBUTIONS ............................ Add Lines 1 + 2 $20,500.00 $20,500.00  
4. Nonmonetary Contributions ............................................ Schedule C, Line 3 $1,000.00 $1,000.00  
5. TOTAL CONTRIBUTIONS RECEIVED .......................... Add Lines 3 + 4 $21,500.00 $21,500.00  

## Expenditures Made

6. Payments Made ............................................................. Schedule E, Line 4 $376.05 $376.05  
7. Loans Made ................................................................. Schedule H, Line 3 $0 $0  
8. SUBTOTAL CASH PAYMENTS .................................. Add Lines 6 + 7 $376.05 $376.05  
9. Accrued Expenses (Unpaid Bills) ....................... Schedule F, Line 3 $0 $0  
10. Nonmonetary Adjustment ............................................... Schedule C, Line 3 $0 $0  
11. TOTAL EXPENDITURES MADE ........................ Add Lines 8 + 9 + 10 $376.05 $36.05  

## Current Cash Statement

12. Beginning Cash Balance ........................................... Previous Summary Page, Line 16 $0  
13. Cash Receipts ............................................................. Column A, Line 3 above $20,500.00  
14. Miscellaneous Increases to Cash ................................ Schedule I, Line 4 $0  
15. Cash Payments ............................................................. Column A, Line 8 above $376.05  
16. ENDING CASH BALANCE ....................... Add Lines 12 + 13 + 14, then subtract Line 15 $20,123.95  
   If this is a termination statement, Line 16 must be zero.  

## Cash Equivalents and Outstanding Debts

18. Cash Equivalents .......................................................... See instructions on reverse $0  
19. Outstanding Debts ....................................................... Add Line 2 + Line 9 in Column B above $0  

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

- Contributions Received $1/1 through 6/30 $7/1 to Date
- Expenditures Made $0 $0

## Expenditure Limit Summary for State Candidates

- Cumulative Expenditures Made* *(If Subject to Voluntary Expenditure Limit)  
  Date of Election (mm/dd/yy) Total to Date $0 $0 $0 $0 $0 $0 $0 $0 $0 $0

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.
## Schedule A Summary

1. Amount received this period – contributions of $100 or more.
   (Include all Schedule A subtotals.) ........................................... $ 18,750.00

2. Amount received this period – unitemized contributions of less than $100 ......................... $ 0

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .............. TOTAL $ 18,750.00

---

### Schedule A

**Monetary Contributions Received**

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-Employed, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>Joe Daichendt</td>
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<td>CEO</td>
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<td>$500.00</td>
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<td>Theory R Properties</td>
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<td></td>
<td>SCC</td>
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<tr>
<td>06/30/2014</td>
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</table>

**SUBTOTAL** $ 1,500.00

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*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
# Schedule A (Continuation Sheet)
## Monetary Contributions Received

Amounts may be rounded to whole dollars. 

### Statement covers period

- **from:** 01/01/2014
- **through:** 06/30/2014

#### NAME OF FILER
Muldoon for NB City Council 2014

#### I.D. NUMBER
1367652

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<tr>
<td>06/09/2014</td>
<td>Aero-Zone, Inc.</td>
<td></td>
<td></td>
<td>$1,100.00</td>
<td>$1,100.00</td>
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<td>06/30/2014</td>
<td>John M Clarey</td>
<td>☑ IND</td>
<td>Owner</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
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<td></td>
<td>Clarey Capital</td>
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<td>06/29/2014</td>
<td>Robert McCaffrey</td>
<td>☑ IND</td>
<td>Retired</td>
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<td>$250.00</td>
<td>$250.00</td>
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<td>06/13/2014</td>
<td>Larry T. Smith</td>
<td>☑ IND</td>
<td>President</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
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<tr>
<td></td>
<td></td>
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<td>MHI Real Co</td>
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<tr>
<td>06/30/2014</td>
<td>Scott Peotter</td>
<td>☑ IND</td>
<td>President</td>
<td>$100.00</td>
<td>$100.00</td>
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<td></td>
<td></td>
<td></td>
<td>ASLAN Companies, Inc.</td>
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**SUBTOTAL $** 3,450.00

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*Contributor Codes
- IND – Individual
- COM – Recipient Committee (other than PTY or SCC)
- OTH – Other
- PTY – Political Party
- SCC – Small Contributor Committee

---

**FPSC Form 460 (June/01)**
FPSC Toll-Free Helpline: 866/ASK-FPPC
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE #</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/30/2014</td>
<td>Lon Hurwitz</td>
<td>X IND</td>
<td>Judge, State of California</td>
<td>$200.00</td>
<td>$200.00</td>
<td>$200.00</td>
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<tr>
<td>06/30/2014</td>
<td>Serge Tomassian</td>
<td>X IND</td>
<td>Managing Partner, Tomassian, Throckmorton &amp; Inouye</td>
<td>$250.00</td>
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<td>06/11/2014</td>
<td>Thomas Larkin</td>
<td>X IND</td>
<td>Manager, Tommar, LLC</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
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<tr>
<td>06/11/2014</td>
<td>Margaret Larkin</td>
<td>X IND</td>
<td>Artist, Self</td>
<td>$1,100.00</td>
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<td>06/19/2014</td>
<td>The Family Action PAC</td>
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<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
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</table>

**SUBTOTAL $ 3,150.00**

*Contributor Codes
IND – Individual
COM – Recipient Committee
(Other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee
## Schedule A (Continuation Sheet)
**Monetary Contributions Received**

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

### Statement covers period
- **from**: 01/01/2014
- **through**: 06/30/2014

**NAME OF FILER**
Muldoon for NB City Council 2014

**I.D. NUMBER**
1367852

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
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<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<tr>
<td>06/24/2014</td>
<td>Thomas P. Bengard</td>
<td>☑IND</td>
<td>President Bengard Group Inc.</td>
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<td>06/24/2014</td>
<td>Kim C. Bengard</td>
<td>☑IND</td>
<td>Private Investor CuraMed</td>
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<td>06/12/2014</td>
<td>John R. Saunders</td>
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<td>Business Owner Saunders Properties</td>
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<td>06/28/2014</td>
<td>Heather A Hulett</td>
<td>☑IND</td>
<td>Registered Dental Hygienist Gouvian and Grant Cosmetic Dentistry</td>
<td>$1,000.00</td>
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<td>06/30/2014</td>
<td>Pharmacy Management Associates Inc.</td>
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<td>$150.00</td>
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</table>

**SUBTOTAL $** 3,850.00

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*Contributor Codes*
- IND – Individual
- COM – Recipient Committee
- OTH – Other
- PTY – Political Party
- SCC – Small Contributor Committee

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FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER ID. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
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<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>Michael Lee</td>
<td>XIND</td>
<td>Broker</td>
<td>$1,100.00</td>
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<td>COM</td>
<td>Morgan Stanley</td>
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<tr>
<td>06/30/2014</td>
<td>Rozanne L. Lee</td>
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<td>Homemaker</td>
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<td>06/30/2014</td>
<td>Dana Whitmer</td>
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<td>President</td>
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<tr>
<td>06/30/2014</td>
<td>Mary E. Deininger</td>
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<td>J.D. Investments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>OTH</td>
<td></td>
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<td></td>
<td></td>
<td>PTY</td>
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</tr>
<tr>
<td></td>
<td></td>
<td>SCC</td>
<td></td>
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</tr>
</tbody>
</table>

**SUBTOTAL $ 3,350.00**

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule A (Continuation Sheet)
### Monetary Contributions Received

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/30/2014</td>
<td>Jennifer J. Farrell</td>
<td>XIND</td>
<td>Attorney</td>
<td>$150.00</td>
<td>$150.00</td>
<td>$150.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Rutan &amp; Tucker</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06/30/2014</td>
<td>Michael B McClellan</td>
<td>XIND</td>
<td>Attorney</td>
<td>$250.00</td>
<td>$250.00</td>
<td>$250.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Newmeyer &amp; Dillon</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>06/30/2014</td>
<td>Foresight Capital Corporation</td>
<td></td>
<td></td>
<td>$250.00</td>
<td>$250.00</td>
<td>$250.00</td>
</tr>
<tr>
<td>06/30/2014</td>
<td>William O'Neill</td>
<td></td>
<td></td>
<td>$100.00</td>
<td>$100.00</td>
<td>$100.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Lawyer</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Haynes &amp; Boone</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>06/27/2014</td>
<td>Edwin C Laird</td>
<td>XIND</td>
<td>CEO</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Laird Coating</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL:** $1,850.00

---

*Contributor Codes
- IND — Individual
- COM — Recipient Committee
- OTH — Other
- PTY — Political Party
- SCC — Small Contributor Committee

**CALIFORNIA FORM 460**

**Statement covers period from 01/01/2014 through 06/30/2014**

**NAME OF FILER**
Muldoon for NB City Council 2014

**I.D. NUMBER**
1367652

**FPPC Form 460 (June/01)**
FPPC Toll-Free Helpline: 866/ASK-FPPC
### Schedule A (Continuation Sheet)  
**Monetary Contributions Received**

**NAME OF FILER**  
Muldoon for NB City Council 2014

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/30/2014</td>
<td>Christy J Clarey</td>
<td>☑ IND</td>
<td>Homemaker</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
<td>$1,100.00</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>06/30/2014</td>
<td>Tyler Benard</td>
<td>☑ IND</td>
<td>Executive</td>
<td>$500.00</td>
<td>$500.00</td>
<td>$500.00</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>CuraMed</td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

**SUBTOTAL $ 1,600.00**

*Contributor Codes*  
- IND – Individual  
- COM – Recipient Committee  
- OTH – Other  
- PTY – Political Party  
- SCC – Small Contributor Committee

**SCHEDULE A (CONT.)**  
Statement covers period  
from 01/01/2014  
through 06/30/204  
Page 1D of 13

**CALIFORNIA FORM 460**

FPPC Form 460 (June/01)  
FPPC Toll-Free Helpline: 855/ASK-FPPC
### Schedule B - Part 1

**Loans Received**

If an individual, enter occupation and employer (if self-employed, enter name of business).

**FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER**

<table>
<thead>
<tr>
<th>Kevin Muldoon</th>
<th>Attorney</th>
<th>5 Bars Inside, LLC</th>
</tr>
</thead>
<tbody>
<tr>
<td>803 Amigos Way</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Newport Beach, CA 92660</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
<th>ORIGINAL AMOUNT OF LOAN</th>
<th>CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$0</td>
<td>$1,750.00</td>
<td>$1,750.00</td>
<td>$0</td>
<td>$1,750.00</td>
<td>CALENDAR YEAR</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$0</td>
<td>$1,750.00</td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$0</td>
<td>$1,750.00</td>
<td>PER ELECTION**</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>$0</td>
<td>$1,750.00</td>
<td>PER ELECTION**</td>
</tr>
</tbody>
</table>

**SUBTOTALS**

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>$1,750.00</td>
</tr>
<tr>
<td>0</td>
</tr>
<tr>
<td>$1,750.00</td>
</tr>
<tr>
<td>0</td>
</tr>
</tbody>
</table>

**Schedule B Summary**

1. Loans received this period ......................................................... $1,750.00
   (Total Column (b) plus unitemized loans 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 $1,750.00
   (May be a negative number)

---

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

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

Statement covers period
from 01/01/2014
through 06/30/2014

NAME OF FILER
Muldoon for NB City Council

I.D. NUMBER
1367652

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>DESCRIPTION OF GOODS OR SERVICES</th>
<th>AMOUNT/FAIR MARKET VALUE</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>06/15/2014</td>
<td>Patrick Shanahan</td>
<td>X IND</td>
<td>Project Manager</td>
<td>Designed webpage and social media consulting.</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
<td>$1,000.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ COM</td>
<td>Newport Assests</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ OTH</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ PTY</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ SCC</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL $

Schedule C Summary

1. Amount received this period – nonmonetary contributions of $100 or more. (Include all Schedule C subtotals.) ........................................ $ 1,000.00

2. Amount received this period – unitemized nonmonetary contributions of less than $100 ........................................ $ 0

3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) ......................... TOTAL $ 1,000.00

*Contributor Codes
IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

FPPC Form 460 (June/01)
FPPC Toll-Free Helpline: 866/ASK-FPPC
## Schedule E
### Payments Made

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

**Statement covers period from 01/01/2014 through 06/30/2014**

### CODES:
- CWP: campaign paraphernalia/misc.
- CNS: campaign consultants
- CTB: contribution (explain nonmonetary)*
- CVC: civic donations
- FL: candidate filing/ballot fees
- FND: fundraising events
- IND: independent expenditure supporting/opposing others (explain)*
- LEG: legal defense
- LIT: campaign literature and mailings
- MBR: member communications
- MTG: meetings and appearances
- OFC: office expenses
- PET: petition circulating
- PHO: phone banks
- POL: polling and survey research
- POS: postage, delivery and messenger services
- PRO: professional services (legal, accounting)
- PRT: print ads
- RAD: radio airtime and production costs
- RDF: returned contributions
- SAL: campaign workers' salaries
- TEL: t.v. or cable airtime and production costs
- TRC: candidate travel, lodging, and meals
- TRS: staff/spouse travel, lodging, and meals
- TSF: transfer between committees of the same candidate/spONSor
- VOT: voter registration
- WEB: information technology costs (internet, e-mail)

### NAME AND ADDRESS OF PAYEE

<table>
<thead>
<tr>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>FND</td>
<td>Food for fundraising event.</td>
<td>$250.00</td>
</tr>
<tr>
<td>FIL</td>
<td>Filing form 410.</td>
<td>$50.00</td>
</tr>
</tbody>
</table>

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL $ 300.00**

### Schedule E Summary

1. Payments made this period of $100 or more. (Include all Schedule E subtotals.) $300.00
2. Unitemized payments made this period of under $100 $76.05
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) $0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) TOTAL $376.05