**Recipient Committee Campaign Statement Cover Page**

(Government Code Sections 84200-84216.5)

**Type or print in ink.**

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>Date of election if applicable:</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 10/01/2014</td>
<td>(Month, Day, Year)</td>
</tr>
<tr>
<td>through 10/18/2014</td>
<td>11/04/2014</td>
</tr>
</tbody>
</table>

**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)
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  (Also Complete Part 6)
- Primarily Formed Candidate/Officer Committee
  (Also Complete Part 7)

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

**3. Committee Information**

<table>
<thead>
<tr>
<th>COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon for City Council 2014</td>
<td>1362246</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>STREET ADDRESS (NO P.O. BOX)</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>3419 Via Lido #197</td>
<td>Newport Beach</td>
<td>CA</td>
<td>92663</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX</th>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
</tr>
</thead>
<tbody>
<tr>
<td>603 E Alton Ave STE H</td>
<td>Santa Ana</td>
<td>CA</td>
<td>92705</td>
</tr>
</tbody>
</table>

**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 10/18/2014

By: [Signature]

Signature of Treasurer or Assistant Treasurer

Optional: Fax / E-mail Address:
lysaray.campaignservices@gmail.com

**Treasurer(s)**

- NAME OF TREASURER: Lysa Ray
- MAILING ADDRESS: 603 E Alton Ave STE H
- CITY: Santa Ana | STATE: CA | ZIP CODE: 92705 | AREA CODE/PHONE: (714) 540-2295

Optional: Fax / E-mail Address:
lysaray.campaignservices@gmail.com

**www.netfile.com**
### 5. Officeholder or Candidate Controlled Committee

**NAME OF OFFICEHOLDER OR CANDIDATE**

Diane Dixon

**OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)**

City Council Member: Newport Beach District 1

**RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP**

3419 Via Lido #197 Newport Beach CA 92663

**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>
<th>CONTROLLED COMMITTEE?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>[ ] YES [ ] NO</td>
</tr>
</tbody>
</table>

**COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)**

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
<th>AREA CODE/PHONE</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 6. Primarily Formed 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 PROONENT**

**OFFICE SOUGHT OR HELD**

**DISTRICT NO. IF ANY**

### 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></td>
<td>[ ] SUPPORT [ ] OPPOSE</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
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<th>OFFICE SOUGHT OR HELD</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>[ ] SUPPORT [ ] OPPOSE</td>
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</tbody>
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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  
   $ 1,700.00  

2. Loans Received .................................................. Schedule B, Line 3  
   $ 0.00  

3. SUBTOTAL CASH CONTRIBUTIONS .................................. Add Lines 1 + 2  
   $ 1,700.00  

4. Nonmonetary Contributions ........................................ Schedule C, Line 3  
   $ 1,141.00  

5. TOTAL CONTRIBUTIONS RECEIVED .................................. Add Lines 3 + 4  
   $ 2,841.00  

### Expenditures Made

6. Payments Made .................................................. Schedule E, Line 4  
   $ 3,085.05  

7. Loans Made ..................................................... Schedule H, Line 3  
   $ 0.00  

8. SUBTOTAL CASH PAYMENTS ........................................... Add Lines 6 + 7  
   $ 3,085.05  

9. Accrued Expenses (Unpaid Bills) .................................. Schedule F, Line 3  
   $ 0.00  

10. Nonmonetary Adjustment .......................................... Schedule C, Line 3  
    $ 1,141.00  

11. TOTAL EXPENDITURES MADE ......................................... Add Lines 8 + 3 + 10  
    $ 4,226.05  

### Current Cash Statement

12. Beginning Cash Balance ........................................... Previous Summary Page, Line 16  
    $ 31,646.94  

13. Cash Receipts ................................................... Column A, Line 3 above  
    $ 1,700.00  

14. Miscellaneous Increases to Cash .................................. Schedule I, Line 4  
    $ 0.00  

15. Cash Payments .................................................. Column A, Line 8 above  
    $ 3,085.05  

16. ENDING CASH BALANCE ........................................... Add Lines 12 + 13 + 14, then subtract Line 15  
    $ 30,261.89  
    
    **If this is a termination balance, Line 16 must be zero.**

### Cash Equivalents and Outstanding Debts

18. Cash Equivalents .................................................. See instructions on reverse  
    $ 0.00  

19. Outstanding Debts .................................................. Add Line 2 + Line 9 in Column B above  
    $ 11,200.00  

---

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

20. Contributions Received ........................................... $ 81,747.00  

21. Expenditures Made .................................................. $ 70,046.77  

### Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made*  
    (If Subject to Voluntary Expenditure Limit)  
    
    **Dates of Election**  
    **Total to Date**  
    
    $ 65,112.77  
    $ 70,046.77  
    
    **Amounts in this section may be different from amounts reported in Column B.**

---

*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).
### Schedule A
Monetary Contributions Received

**Instructions:**
- Type or print in ink. Amounts may be rounded to whole dollars.
- Statement covers period from 10/01/2014 through 10/18/2014.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR</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 (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/09/2014</td>
<td>Phillip Belling</td>
<td>IND</td>
<td>Managing Principal LBA Realty</td>
<td>250.00</td>
<td>250.00 G2014</td>
<td>$250.00</td>
</tr>
<tr>
<td>10/14/2014</td>
<td>Business &amp; Community PAC (ID# 821754)</td>
<td>COM, OTH</td>
<td></td>
<td>500.00</td>
<td>500.00 G2014</td>
<td>$500.00</td>
</tr>
<tr>
<td>10/09/2014</td>
<td>Ali Jahangiri</td>
<td>IND, OTH</td>
<td>President EBS Investors</td>
<td>250.00</td>
<td>250.00 G2014</td>
<td>$250.00</td>
</tr>
<tr>
<td>10/17/2014</td>
<td>Newport Terrace Mobile Home Park</td>
<td>COM, OTH</td>
<td></td>
<td>200.00</td>
<td>200.00 G2014</td>
<td>$200.00</td>
</tr>
<tr>
<td>10/15/2014</td>
<td>Orange County Automobile Dealers Assoc. PAC (ID# 870777)</td>
<td>COM, OTH</td>
<td></td>
<td>500.00</td>
<td>500.00 G2014</td>
<td>$500.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL $** 1,700.00

### Schedule A Summary
1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) $1,700.00
2. Amount received this period – unitemized monetary contributions of less than $100 $0.00
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) TOTAL $1,700.00

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

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

**Loans Received**

**SEE INSTRUCTIONS ON REVERSE**

**NAME OF FILER**

**Diane Dixon for City Council 2014**

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

<table>
<thead>
<tr>
<th>LENDER</th>
<th>OCCUPATION</th>
<th>AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>INTEREST PAID THIS PERIOD</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon</td>
<td>Owner</td>
<td>$5,000.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Diane Dixon</td>
<td>Owner</td>
<td>$5,000.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Statement covers period from 10/01/2014 through 10/18/2014**

**SUBTOTALS**

$0.00  $0.00  $0.00  $0.00  $0.00

<table>
<thead>
<tr>
<th>Contributor Codes</th>
</tr>
</thead>
<tbody>
<tr>
<td>IND – Individual</td>
</tr>
<tr>
<td>COM – Recipient Committee</td>
</tr>
<tr>
<td>OTH – Other (e.g., business entity)</td>
</tr>
<tr>
<td>PTY – Political Party</td>
</tr>
<tr>
<td>SCC – Small Contributor Committee</td>
</tr>
</tbody>
</table>

---

**Schedule B Summary**

1. Loans received this period ........................................... $ 0.00
   (Total Column (b) plus unitemized loans of less than $100.)

2. Loans paid or forgiven this period ................................... $ 0.00
   (Total Column (c) plus loans under $100 paid or forgiven.)
   (Include loans paid by a third party that also itemized on Schedule A.)

3. Net change this period. (Subtract Line 2 from Line 1) .......... NET $ 0.00
   Enter the net here and on the Summary Page, Column A, Line 2.

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

**www.netfile.com**
**Schedule C Summary**

1. **Amount received this period – itemized nonmonetary contributions.**
   
   (Include all Schedule C subtotals.) .......................................................... $ 1,141.00

2. **Amount received this period – unitemized nonmonetary contributions of less than $100** .................................. $ 0.00

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 $ 1,141.00
**Schedule C (Continuation Sheet)**

Nonmonetary Contributions Received

**Name of Filer**
Diane Dixon for City Council 2014

**Date Received** | **Full Name, Street Address and Zip Code of Contributor** | **Contributor Code** * | **If an Individual, Enter Occupation and Employer** (If Self-Employed, Enter Name of Business) | **Description of Goods or Services** | **Amount/Fair Market Value** | **Cumulative To Date Calendar Year (Jan 1 - Dec 31)** | **Per Election To Date (If Required)** |
<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>10/09/2014</td>
<td>Scott Peotter for City Council 2014 (ID# 1364694)</td>
<td>□ IND</td>
<td>LIT</td>
<td></td>
<td>200.00</td>
<td>200.00</td>
<td>$200.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ COM</td>
<td></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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<td></td>
<td></td>
</tr>
<tr>
<td>10/03/2014</td>
<td>Byron Tarnutzer</td>
<td>□ IND</td>
<td>Real Estate Tarnutzer &amp; Co</td>
<td></td>
<td>241.00</td>
<td>241.00</td>
<td>$241.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td>□ COM</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td>□ OTH</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>

**Statement covers period from 10/01/2014 through 10/18/2014**

**I.D. Number**
1362246

**Attach additional information on appropriately labeled continuation sheets.**

**Subtotal $**
441.00

---

FPPC Form 460 (January/05)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>CODES</th>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>CMP</td>
<td>Anedot</td>
<td>cc processing</td>
<td>10.05</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CNS</td>
<td>Roger Bloom</td>
<td>CNS</td>
<td>2,000.00</td>
</tr>
<tr>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>IND</td>
<td>Joshua Canter</td>
<td>CMP</td>
<td>450.00</td>
</tr>
<tr>
<td>LEG</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>LIT</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**SUBTOTAL** $2,460.05

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)
   
   $3,085.05

2. Unitemized payments made this period of under $100
   
   $0.00

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 $3,085.05
**Schedule E (Continuation Sheet)**  
**Payments Made**

**NAME OF FILER:** Diane Dixon for City Council 2014

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

<table>
<thead>
<tr>
<th>Name and Address of Payee</th>
<th>Code (If Committee, Also Enter I.D. Number)</th>
<th>Description of Payment</th>
<th>Amount Paid</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lysa Ray Campaign Services</td>
<td>PRO</td>
<td>professional services (legal, accounting)</td>
<td>250.00</td>
</tr>
<tr>
<td>Midnite Oil</td>
<td>WEB</td>
<td>information technology costs (internet, e-mail)</td>
<td>375.00</td>
</tr>
</tbody>
</table>

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

**AMOUNT PAID**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
</table>

**SUBTOTAL $**

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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</table>

**FPPC Form 460 (January/05)**

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)