Recipient Committee Campaign Statement	Type or print in ink		RECENTED COVE CALIFORNIA 2001/02 2015 FEB - 5 FM FORM				
Cover Page	Statement covers period	Date of election if applicable:					
(Goverment Code Sections 84200-84216.5)	from 07/01/2014	(Month, Day, Year)		Page -	0ffiicial Use Only		
	through <u>10/18/2014</u>	11/04/2014	CITY OF COM	Y CLERK PORT BLACH			
1. Type of Recipient Committee: All Committees- Comple	ete Parts 1, 2, 3, and 4.	2. Type of Staten	nent:				
Officeholder, Candidate Controlled Committee	ly Formed Ballot Measure	✓ Preelection Statem	ent	Quarterly Statem	nent		
State Candidate Election Committee Comm	ittee	Semi-annual Stater	nent	Special Odd-Yea	r Report		
☐ Recall ☐ Co	ntrolled	Termination Staten	nent	Supplemental Pr	•		
(Also Complete Part 5)	onsored	(Also file a Form 410 T	ermination)	Statement-Attac			
General Purpose Committee (Also C	omplete Part 6)	Amendment (Expla	in below)				
	ly Formed Candidate/	Amend Summary Page,	Schedule A. C. F				
	holder Committee	,, _,	,,, _,		,		
	omplete Part 7)						
I.D. NUM	BER	T					
3. Committee Information		Treasurer(s)					
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)		NAME OF TREASURER	and the second				
Newport Beach Firefighters Association PAC		John Kluve					
		MAILING ADDRESS California Political Law	Inc. 3605 Long Be	ach Blud Ste 426			
		CITY	STATE	ZIP CODE	AREA CODE/PHONE		
STREET ADDRESS (NO P.O. BOX) California Political Law, Inc. 3605 Long Beach Blvd., Ste. 426		Long Beach	CA	90807	(562) 427-2100		
CITY STATE ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREAS	URER, IF ANY				
Long Beach CA 90807	(562) 427-2100						
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX PO Box 1695		MAILING ADDRESS					
CITY STATE ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE		
Newport Beach CA 92659							
OPTIONAL: FAX/E-MAIL ADDRESS		OPTIONAL: FAX/E-MAIL ADDF	RESS				
johnkluve@gmail.com							
4. Verification Executed on	ving this statement and to the best omia that the foregoing is true and	of my knowledge the information co Correct.	ntained herein and in the a	attached schedules is true	and complete. I certify		
Date	Ву	Signature of Treasurer or A	Assistant Treasurer		FPPC Form 460 (January/05)		
Executed on	By V	olling Officeholder, Candidate, State Me	agura Drananani ar Doranani	ble Officer of Second	_ FPPC Toll-Free Helpline:		
Date Executed on	By	oning Onicerioider, Candidate, State Me	asure Froponent of Responsi	Die Officer of Sponsor	866/ASK-FPPC (866/275-3772)		
Date	s	Signature of Controlling Officeholder, Car	ndidate, State Measure Propo	nent	- State of California		
Executed on Date	Ву	Signature of Controlling Officeholder, Car	ndidate, State Measure Propo	nent	_		

## **Recipient Committee** Campaign Statement Cover Page-Part 2

Type or print in ink

COVER PAGE-PART 2



Officeholder or (	Candidate Controlle	ed Committee	6.Primarily F
NAME OF OFFICEHOLDER O	R CANDIDATE		NAME OF BALLOT
OFFICE SOUGHT OR HELD(II	NCLUDE LOCATION AND DISTRIC	CT NUMBER IF APPLICABLE)	BALLOT NO. OR L
RESIDENTIAL/BUSINESS AD	DRESS (NO. AND STREET) CITY	ŚTATE ZIP	
			Identify the co
			NAME OF OFFICE
Related Committees N	lot Included in this State	ment: List any committees	
not included in this statemen	Iot Included in this State t that are controlled by you or are ditures on behalf of your candida	e primarily formed to receive	
not included in this statemen	t that are controlled by you or are	e primarily formed to receive	
not included in this statemen contributions or make expen	t that are controlled by you or are	e primarily formed to receive cy.	OFFICE SOUGHT
not included in this statemen contributions or make expen	t that are controlled by you or are	e primarily formed to receive cy.	OFFICE SOUGHT
not included in this statemen contributions or make expen COMMITTEE NAME	t that are controlled by you or are	e primarily formed to receive cy.	OFFICE SOUGHT 7. Primarily F officeholder(s) or ca
not included in this statemen contributions or make expen COMMITTEE NAME	t that are controlled by you or are	e primarily formed to receive cy.	OFFICE SOUGHT 7. Primarily F officeholder(s) or ca
not included in this statemen contributions or make expen COMMITTEE NAME NAME OF TREASURER	t that are controlled by you or ard ditures on behalf of your candida	e primarily formed to receive cy.	OFFICE SOUGHT  OFFICE SOUGHT  Officeholder(s) or ca  NAME OF OFFICE

## ormed Ballot Measure Committee

MEASURE

ALLOT NO. OR LETTER	JURISDICTION					
		OPPOSE				
lentify the controlling of	ficeholder, candidate	, or state measure proponent, if any.				
AME OF OFFICEHLOLDER, CA	ANDIDATE, OR PROPONE	NT				
FFICE SOUGHT OR HELD		DISTRICT NO. IF ANY				
rimarily Formed C		cholder Committee List names of marily formed.				

IAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
		OPPOSE

Attach continuation sheets if necessary

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

Campaign Disclosure Statement Summary Page	Type or print Amounts may be to whole do	e rounded	Statement covers period from 07/01/2014 through 10/18/2014	SUMMARY PAGE CALIFORNIA FORM Page 3 of 166
NAME OF FILER Newport Beach Firefighters Association PAC				I.D. NUMBER 1243243
Contributions Received	<b>Column A</b> Total This Period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE		nmary for Candidates he State Primary and
1. Monetary Contributions Schedule A, Line 3	\$7,920.00	\$35,724.0	00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3	\$0.00	\$0.0	_	In though 0/30 //1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1+ 2	\$7,920.00	\$35,724.0		
4. Nonmonetary Contributions Schedule C, Line 3	\$758.37	\$930.8	I	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$8,678.37	\$36,654.8		
Expenditures Made		n an an an an Arbitraria		Summary for State
6. Payments Made Schedule E, Line 4	\$13,281.24	\$13,337.2	Candidates	
7. Loans Made Schedule H, Line 3	\$0.00	\$0.0	—	e Expenditures Made *
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$13,281.24	\$13,337.2	(If Subject to )	Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-\$300.00	\$0.0	—	Total to Date
10. Nonmonetary AdjustmentSchedule C, Line 3	\$758.37	\$930.8	(mm/dd/aaaa)	· · · · · · · · · · · · · · · · · · ·
11. TOTAL EXPENDITURES MADEAdd Lines 8 +9 + 10	\$13,739.61	\$14,268.1	-	
Current Cash Statement				
12. Beginning Cash Balance Previous Summary Page, Line 16	\$90,119.90	To calculate Column B, add		
13. Cash ReceiptsColumn A, Line 3 above		amounts in Column A to the corresponding amounts from		
14. Miscellaneous Increases to CashSchedule I. Line 4	<u> </u>	Column B of your last report. Some amounts in Column A		
15. Cash Payments	\$13,281,24	may be negative figures that		
16. ENDING CASH BALANCEAdd Lines 12+13+14, then substract Line 15	· · · · · · · · · · · · · · · · · · ·	should be subtracted from previous period amounts. If	*Amounts in this sec reported in schedule	tion may be different from amounts
If this is a termination statement, Line 16 must be zero.		this is the first report being filed for this calendar year, only carry over the amounts		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2		from Lines 2, 7, and 9 (if any).		
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	\$0.00			
	·		FPPC Toll-Fr	FPPC Form 460 (January/05 ee Helpline: 866/ASK-FPPC (866/275-3772

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORNI FORM Page 4 I.D. NUMBER 1243243		IA of	<b>460</b> 166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DA ENDAR YEAR N. 1-DEC, 31)	TE	TC	ELECTION ) DATE EQUIRED)
08/05/2014	Alex Amat	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$300	5.00		
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC							
10/09/2014	Alex Amat	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$300	5.00		

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	1	CALIFORM FORM Page 5	SCHEDULE A
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Matt Ambrose	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00			
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC)		
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee		
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ol>	\$7,920.00	FPPC Form 460 (January/05)		

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20		CALIFORN FORM Page 6	SCHEDULE A
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC, 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Matt Ambrose	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Bryce Anderson	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER	Statement cover from 07/01/2014 through 10/18/20	4 )14	CALIFORM FORM Page 7 I.D. NUMBER 1243243 ATIVE TO DATE	SCHEDULE A
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					
10/09/2014	Bryce Anderson	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary	0.04 y ( , , , , , , , , , , , , , , , , , ,	*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC)
Amount received this period -unitemized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20		CALIFORN FORM Page 8		166
VAME OF FILER	ch Firefighters Association PAC					I.D. NUMBER 1243243		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	то	LECTION DATE QUIRED)
08/05/2014	Matthew Anderson	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC						
10/09/2014	Matthew Anderson	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
<ul> <li>Amount received this period -uniternized monetary contributions of less than \$100</li></ul>	\$7,920.00	SCC- Small Contributor Committee

Monetary	Schedule A Monetary Contributions Received		netary Contributions Received to whole dollars.			Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 9	SCHEDULE A <b>IIA 460</b> of <u>166</u>
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
	Intermediary: Newport Beach Firefighters Association	IND   COM   OTH   PTY   SCC							
08/05/2014	Casey Blythe	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00			
	Intermediary: Newport Beach Firefighters Association	IND   COM   OTH   PTY   SCC							

SUBTOTAL	- \$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) TOTAL	\$7,920.00	FPPC Form 460 (Januar

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	Schedule A Monetary Contributions Received		ry Contributions Received to whole dollars.			Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	114 I.D. NUMBER	400
DATE RECEIVED	Th Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	AMOUNT RECEIVED THIS PERIOD	1243243 CUMULATIVE TO DATE CALENDAR YEAR	PER ELECTION TO DATE		
10/09/2014	Casey Blythe	✓ IND COM OTH PTY SCC	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) Firefighter City of Newport Beach	\$30.00	(JAN. 1-DEC. 31) \$306.00	(IF REQUIRED)		
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC						
08/05/2014	Jeff Bogin	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	)		

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Monetary	Schedule A Monetary Contributions Received		to whole dollars.			Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 11	SCHEDULE A
	ch Firefighters Association PAC					1243243			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)		
	Intermediary: Newport Beach Firefighters Association	IND   COM   OTH   PTY   SCC							
10/09/2014	Jeff Bogin	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00			
	Intermediary: Newport Beach Firefighters Association	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC							

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

SCHEDU	LE A
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Schedule A         Monetary Contributions Received         NAME OF FILER         Newport Beach Firefighters Association PAC		Amoi	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORM FORM Page 12 I.D. NUMBER 1243243 ATIVE TO DATE	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	James Boland	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					
10/09/2014	James Boland	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar)

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from $\frac{07/01/2014}{10/18/2014}$		CALIFORN FORM Page 13	SCHEDULE A
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					
08/05/2014	Bill Boullianne	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary	a a ta a fad da da a ta a a a a a a a a a a a a a	*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

	Monetary Contributions Received		ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM           14         Page 14           I.D. NUMBER	SCHEDULE A
Newport Bead	ch Firefighters Association PAC				1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Bill Boullianne	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC				
08/05/2014	Jeff Boyles	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary I. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	SCC- Small Contributor Committee

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 15	400
Newport Beac	ch Firefighters Association PAC					1243243	I
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	LATIVE TO DATE ENDAR YEAR NN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					
10/09/2014	Jeff Boyles	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTA	L \$30.00	\$30.00		
Schedule A Summary		*Contributor Codes IND- Individual		
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee		
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)		
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar		

Schedule A Monetary Contributions Received					1 14	CALIFORN FORM Page 16	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULA CALEI	TIVE TO DATE NDAR YEAR . 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Chris Brown	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association	IND COM OTH PTY SCC					
10/09/2014	Chris Brown		Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 17	400
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Erin Brown 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
- 2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Association PAC			s period 	CALIFORN FORM Page 18 I.D. NUMBER 1243243	of 166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Erin Brown 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Ryan Bullock 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	ļ	CALIFORM FORM Page 19	SCHEDULE A
NAME OF FILER	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Ryan Bullock 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$30.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
3. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua	

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	COMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Ryan Callinan 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Ryan Callinan 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$276.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	SCHEDULE A		
Newport Bear DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR IN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Justin Carr 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

\$36.00	
	*Contributor Codes
	IND- Individual COM- Recipient Committee
\$7,656.00	(other than PTY or SCC)
\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
	SCC- Small Contributor Committee
\$7,920.00	FPPC Form 460 (Janua
	\$7,656.00 \$264.00

SCHEDU	LE A
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Schedule A Monetary Contributions Received         NAME OF FILER Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers period         from       07/01/2014       CALIFOR         through       10/18/2014       Page       22         I.D. NUMBER       1243243         AMOUNT       CUMULATIVE TO DATE			of 166
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Justin Carr 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Bryan Carter 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	CALIFORM FORM Page 23 I.D. NUMBER	<u>400</u>	
Newport Bea DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Bryan Carter 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

Schedule A Monetary Contributions Received		from 07/01/2014 through 10/18/20				SCHEDULE A	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Geoffrey Cathey 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Geoffrey Cathey 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		T Amo	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORM FORM Page 25 I.D. NUMBER 1243243	of <u>166</u>	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	R AMOUNT CUMULATIVE TO DATI RECEIVED THIS CALENDAR YEAR PERIOD (JAN. 1-DEC. 31)			PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Dan Chapman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

SUBTOTA	L \$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	EPPC Form 460 (January/05

Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from 07/01/2014	CALIF FC		<b>460</b>	
	from $07/01/2014$ through $10/18/2014$	Page	26	of	166
		I.D. NUME 1243243			

## **Monetary Contributions Received**

Schedule A

NAME OF FILER Newport Bea	ch Firefighters Association PAC				I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Dan Chapman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY				
08/05/2014	Joel Chidley 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/

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

SCHEDULE A

Schedule A Monetary Contributions Received					s period I 114	CALIFORM FORM Page 27 I.D. NUMBER 1243243	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Joel Chidley 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05

Monetary	Schedule A Amounts may be rounded to whole dollars.		TILER A Amounts may be rounded to whole dollars. Statement to whole dollars.				y Contributions Received to whole dollars.				Ļ	CALIFO FOR Page			460 166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)		то	LECTION DATE QUIRED)						
08/05/2014	Brent Conklin 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.0	00								
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC													
10/09/2014	Brent Conklin 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.0	00								

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		T Amo	Statement covers from 07/01/2014 through 10/18/20	L	CALIFOR FORM Page 29 I.D. NUMBER 1243243	NIA	<b>460</b>	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS CALE		ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	Т	ELECTION TO DATE REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
08/05/2014	Kelly Conte 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$36.00			
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						

SUBTOTAL	\$36.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.):	\$7,656.00 \$264.00	*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
<ul> <li>3. Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ul>	\$7,920.00	FPPC Form 460 (January/0

SCHEDU	ULE A
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NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	Ļ	CALIFORM FORM Page 30	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Kelly Conte 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Charlie Dall 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTA	AL \$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.		*Contributor Codes IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00 \$264.00	(other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ol>	\$7,920.00	SCC- Small Contributor Committee

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 31	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Charlie Dall 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00		
		FPPC Form 460 (Janu	

NAME OF FILER Newport Bead	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORN FORM Page 32 I.D. NUMBER 1243243	SCHEDULE A
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALE	NDAR YEAR	TO DATE (IF REQUIRED)
08/05/2014	Adam Davenport 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Adam Davenport 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	1	CALIFORM FORM Page 33	400
DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Justin Dean 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	. \$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	FORM	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Justin Dean 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
08/05/2014	Chad Duncan 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$276.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

NAME OF FILER Newport Bea DATE	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	- 14 CUMUL	CALIFORN FORM Page 35 I.D. NUMBER 1243243 ATIVE TO DATE	of 166
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER) Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	1	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Chad Duncan 100 Civic Center Dr. Newport Beach, CA 92660	Г IND Сом ОТН РТҮ SCC	Firefighter City of Newport Beach	\$30.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

SCHEDL	JLΕ	А
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Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORN FORM Page 36	SCHEDULE A
NAME OF FILER Newport Bead	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Chip Duncan 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Chip Duncan 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00						
Schedule A Summary		*Contributor Codes					
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee					
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)					
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee					
3. Total monetary contributions received this period.							
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0					
	FPPC Tol	II-Free Helpline: 866/ASK-FPPC (866/275-377					
Schedule A Monetary Contributions Received         NAME OF FILER Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER	Statement cover from 07/01/2014 through 10/18/20	CALIFORN FORM Page 37 I.D. NUMBER 1243243 ATIVE TO DATE	400	
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RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALI	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Oscar Dykesten 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

	ewport Beach Firefighters Association PAC         DATE RECEIVED       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO (IF COMMITTEE, ALSO ENTER I.D. NUMBER)         Oscar Dykesten 100 Civic Center Dr.	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers	CALIFORM FORM Page 38	400	
NAME OF FILER Newport Bead	ch Firefighters Association PAC			through <u>10/18/20</u>		I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014		<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

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08/05/2014

Dennis Edwards

100 Civic Center Dr.

Newport Beach, CA 92660

SUBTOTA	L \$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00	OTH- Other (e.g. business entity)
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	- FPPC Form 460 (January/0) C Toll-Free Helpline: 866/ASK-FPPC (866/275-377)

Firefighter

City of Newport Beach

\$36.00

\$306.00

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	SCHEDULE A IIA 460 		
Newport Bea DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Dennis Edwards 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTA	NL \$30.00			
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC)		
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	EPPC Form 460 (January/0		

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	SCHEDULE A	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Lloyd Ellis 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Lloyd Ellis 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers period         from       07/01/2014       CALIFORNI         from       10/18/2014       Page       41         I.D. NUMBER       10/12/12       10/12/12			SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				MM	
08/05/2014	Chris Fanti 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

	*Contributor Codes
	IND- Individual COM- Recipient Committee
\$7,656.00	(other than PTY or SCC)
\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
	SCC- Small Contributor Committee
\$7,920.00	FPPC Form 460 (Janua
-	\$264.00

SCHEDULE	А
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Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 42 I.D. NUMBER 1243243	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Chris Fanti 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND СОМ ОТН РТҮ SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Jason Fernandez 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORM FORM Page 43 I.D. NUMBER 1243243	of
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Jason Fernandez 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>◯ COM</li> <li>◯ OTH</li> <li>◯ PTY</li> <li>❑ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   СОМ   ОТН   РТҮ   SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	
———		FPPC Form 460 (Janua)

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	-	CALIFORM FORM Page 44	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER J.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Brian Frasz 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Brian Frasz 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li> </ol>	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORM FORM Page 45	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Cory Freeman 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00			
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)		
Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januarvi		

Schedule A Monetary Contributions Received		Contributions Received to whole dollars.			s period	d CALIFORN FORM Page 46 I.D. NUMBER 1243243 UMULATIVE TO DATE			HEDULE A 460 166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ENDAR YEAR		TO	DATE
10/09/2014	Cory Freeman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$30.00		\$306.	00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC							
08/05/2014	Ron Gamble 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.	00		

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes IND- Individual
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORM FORM Page 47	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Ron Gamble 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

SUBTOTAL	\$30.00	.00		
Schedule A Summary	1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	*Contributor Codes		
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee		
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)		
	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00			
—		FPPC Form 460 (Jan		

Schedule A Monetary Contributions Received		ociation PAC			A period CALIFORI FORM Page 48 I.D. NUMBER 1243243	of <u>166</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Peter Garcia 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
10/09/2014	Peter Garcia 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 49	SCHEDULE
NAME OF FILER Newport Bea DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CALE	I.D. NUMBER 1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	OF BUSINESS)				(IF REQUIRED)
08/05/2014	Mark Garman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januarv/0

Schedule Monetary	A Contributions Received	Amo	Type or print in ink. Amounts may be rounded to whole dollars. from 07/01/2014 through 10/18/20			CALIFORM FORM Page 50	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	········
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Mark Garman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Kevin Gonzalez 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

	Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		s period	CALIFORM FORM Page 51	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Kevin Gonzalez 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOT	FAL \$30.00	\$30.00		
Schedule A Summary	<ul> <li>Stability in the other interactions are an ended on the other interaction of the Stability of t</li></ul>	*Contributor Codes		
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee		
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)		
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0		

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 52 I.D. NUMBER 1243243	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Ron Gutierrez 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Ron Gutierrez 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		$\frac{\text{Statement covers period}}{\text{from } \frac{07/01/2014}{10/18/2014}}$		CALIFORN FORM Page 53 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Susan Guzzetta 100 Civic Center Dr. Newport Beach, CA 92660	IND ICOM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
B. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January)	

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	Id         Id <thid< th="">         Id         Id         Id<!--</th--><th>4_of</th></thid<>	4_of
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Susan Guzzetta 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC				
08/05/2014	Joe Harrison 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.0	)

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 55	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR IN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Joe Harrison 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTA	L \$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		T; Amo	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORM FORM Page 56 I.D. NUMBER 1243243	of	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR I. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Keith Hedenberg 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Keith Hedenberg 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.		*Contributor Codes IND- Individual
(Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua)

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from $\frac{07/01/2014}{10/18/20}$	Ļ	CALIFORN FORM Page 57	SCHEDULE A
DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	LATIVE TO DATE ENDAR YEAR NN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Thomas Herr 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$36.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.		*Contributor Codes IND- Individual
(Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		T Amo	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 58	of	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Thomas Herr 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Andrew Hopper 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A         Monetary Contributions Received         NAME OF FILER         Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		T Amo	Statement cover from 07/01/2014 through 10/18/20	14	CALIFORN FORM Page 59 I.D. NUMBER 1243243 ATIVE TO DATE	400	
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Andrew Hopper 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 60	of <u>166</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Cameron Hutzler 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Cameron Hutzler 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00		
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua LEros Holpline: 866/ASK-EPPC (866/27	

	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 61	SCHEDULE A
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Andy Janis 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0)

NAME OF FILER	Contributions Received			Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFOR FORM Page 62 I.D. NUMBER 1243243	NIA of	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	LATIVE TO DATE ENDAR YEAR NN. 1-DEC. 31)	ר	RELECTION TO DATE REQUIRED)
10/09/2014	Andy Janis 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
08/05/2014	Jim Jeziorski 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00		

SUBTOTAL	\$66.00		
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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	
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar	

Schedule A Monetary Contributions Received		T Amo	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	1	CALIFORM FORM Page 63	400	
DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Jim Jeziorski 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

SCHEDU	LE A
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Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 64	400
NAME OF FILER Newport Bear	ch Firefighters Association PAC		I			I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Matt Johnston 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Matt Johnston 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$276.00	

SUBTOTAL	- \$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORM FORM Page 65	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Drew Kaford 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
Amount received this period -unitemized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	CALIFORN FORM Page 66	<sup>IIA</sup> 4	DULE A 60 166	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELEC TO DA (IF REQU	TE
10/09/2014	Drew Kaford 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
08/05/2014	Ray Kang 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00		\$306.00		

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		$\begin{array}{c} \text{Statement covers period} \\ \text{from } \underline{07/01/2014} \\ \text{through } \underline{10/18/2014} \end{array}$		CALIFORM FORM Page 67	SCHEDULE A
Newport Bea	ch Firefighters Association PAC	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT		1243243 ATIVE TO DATE	PER ELECTION
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Ray Kang 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar)

Schedule A Monetary Contributions Received         NAME OF FILER Newport Beach Firefighters Association PAC         DATE RECEIVED       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		Type or print in ink. Amounts may be rounded to whole dollars.				CALIFORN FORM Page 68 I.D. NUMBER 1243243 ATIVE TO DATE NDAR YEAR	SCHEDULE A
08/05/2014	Charles Keen 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) Firefighter City of Newport Beach	PERIOD \$36.00	AAL)	N. 1-DEC. 31) \$306.00	(IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	□ IND □ COM □ OTH □ PTY □ SCC					
10/09/2014	Charles Keen 100 Civic Center Dr. Newport Beach, CA 92660	IND ICOM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	L	CALIFORM FORM Page 69	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Justin Keene 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)	
Amount received this period -unitemized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	PTY- Political Party SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar	

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14 1.D.	CALIFORNIA FORM Page 70 of I.D. NUMBER 1243243		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAI (JAN. 1-DI	R YEAR	PER ELECTION TO DATE (IF REQUIRED)	
10/09/2014	Justin Keene 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC						
08/05/2014	Brandon Kent 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00		

SUB	<b>STOTAL</b> \$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) TC	**************************************	FPPC Form 460 (Januar

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20		CALIFORN FORM Page 71	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Brandon Kent 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.				CALIFORNIA FORM 460 Page 72 of 166 I.D. NUMBER 1243243 ATIVE TO DATE PER ELECTION			
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)		TO DATE (IF REQUIRED)	
08/05/2014	Justin Kime 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00			
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC							
10/09/2014	Justin Kime 100 Civic Center Dr. Newport Beach, CA 92660	IND  COM  OTH  PTY  SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		10,000	

SUBTO	DTAL \$66.00	\$66.00					
Schedule A Summary		*Contributor Codes					
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee					
(Include all Schedule A subtotals.)	. \$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)					
2. Amount received this period -unitemized monetary contributions of less than \$100	. \$264.00	PTY- Political Party SCC- Small Contributor Committee					
3. Total monetary contributions received this period.							
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	AL \$7,920.00	FPPC Form 460 (Januar					
Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	L	CALIFORN FORM Page 73	400
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NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Michael Kimoto 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary	·	*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) TOTAL	\$7,920.00	
	\$7,920.00	FPPC Forr

Schedule A Monetary Contributions Received		Amo	Type or print in ink. Amounts may be rounded to whole dollars.		s period	CALIFORM FORM Page 74 I.D. NUMBER 1243243 ATIVE TO DATE	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Michael Kimoto 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	John Kluve 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00		\$306.00	

S	JBTOTAL	\$66.00	
Schedule A Summary			*Contributor Codes
1. Amount received this period -itemized monetary contributions.			IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)		\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100		\$264.00	PTY- Political Party
3. Total monetary contributions received this period.			SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)		\$7,920.00	FPPC Form 460 (January/0

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 75	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	John Kluve 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -uniternized monetary contributions of less than \$100\$	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers from 07/01/2014 through 10/18/20	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	COMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Todd Knipp 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Todd Knipp 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li> </ol>	\$7,920.00	FPPC Form 460 (January/C

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 77	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Joseph Laser 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORNI FORM Page 78 I.D. NUMBER 1243243		<b>460</b>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	1 1	ELECTION TO DATE REQUIRED)
10/09/2014	Joseph Laser 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
08/05/2014	Jon Lauderdale 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00		

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.         (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	SCC- Small Contributor Committee FPPC Form 460 (January

Schedule A Monetary Contributions Received		Т	ype or print in ink.					SC	HEDULE A
		Amo	unts may be rounded to whole dollars.	$\begin{array}{c} \text{Statement covers period} \\ \text{from } \underline{07/01/2014} \\ \text{through } \underline{10/18/2014} \\ \end{array}$		CALIFORM FORM Page 79		A of	<b>460</b>
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBE 1243243	R		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD (JAN. 1-DEC. 31)				тс	ELECTION DATE EQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC							
10/09/2014	Jon Lauderdale 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND	Firefighter City of Newport Beach	\$30.00	\$306		5.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC							

SUBTOTAL	\$30.00	
Schedule A Summary	· · · · · · · · · · · · · · · · · · ·	*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	
		FPPC Form 460 (Janua

SCHEDU	JLE A
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Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORNIA 460 FORM 460 Page 80 of 166		
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	LATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
08/05/2014	Garrick Lazar 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00			
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
10/09/2014	Garrick Lazar 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		

SUBTOTAL	\$66.00	
Schedule A Summary         . Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)         P. Amount received this period -unitemized monetary contributions of less than \$100         B. Total monetary contributions received this period.	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 81	SCHEDULE A
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	D THIS CALENDAR YEAR		PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Jerry Lazar 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND     IND       □ COM     Firefighter       □ OTH     Firefighter       ○ TH     City of Newport Beach       ○ PTY     Scc			\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	\$36.00		
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee		
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)		
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/		

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

NAME OF FILER	A Contributions Received ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	Statement covers from 07/01/2014 through 10/18/20 AMOUNT RECEIVED THIS	14	CALIFORM FORM Page 82 I.D. NUMBER 1243243 ATIVE TO DATE NDAR YEAR	400
RECEIVED	(IF GOWINT IEE, ALSO ENTER I.D. NOWBERY		(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	(JAI)	N. 1-DEC. 31)	(IF REQUIRED)
10/09/2014	Jerry Lazar 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Jason Leftige 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SU	BTOTAL	\$66.00	
Schedule A Summary			*Contributor Codes
1. Amount received this period -itemized monetary contributions.			COM- Recipient Committee
(Include all Schedule A subtotals.)		\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	·····	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.			SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) T	OTAL	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received         NAME OF FILER Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers	114	CALIFORN FORM Page 83 I.D. NUMBER 1243243 ATIVE TO DATE	of <u>166</u>
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER) Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Jason Leftige 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00			
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC)		
2. Amount received this period -unitemized monetary contributions of less than \$100     3. Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar		

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14 14 1.D. NI 1243	CALIFORNIA FORM 46 Page 84 of 16 I.D. NUMBER 1243243			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)		CALENDAR YEAR		PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Michael Liberto 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00					
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC							
10/09/2014	Michael Liberto 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00			

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC)
Amount received this period -unitemized monetary contributions of less than \$100      Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	ŀ	CALIFORN FORM Page 85	SCHEDULE A
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Tom Lloy 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$36.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
3. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/	

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORN FORM Page 86 I.D. NUMBER 1243243 ATIVE TO DATE	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CAL	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Tom Lloy 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ СОМ</li> <li>○ ОТН</li> <li>○ РТҮ</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Jacob Long 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period           from         07/01/2014           through         10/18/2014		CALIFORN FORM Page 87	SCHEDULE A
NAME OF FILER Newport Bea DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMUL	I.D. NUMBER 1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Jacob Long 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Nic Lucas 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Nic Lucas 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
Amount received this period -itemized monetary contributions.     (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		T: Amo	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 89	SCHEDULE A	
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Ty Lunde 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$36.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee	
3. Total monetary contributions received this period.			
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January)	

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.			s period 	CALIFORN FORM Page 90 I.D. NUMBER 1243243	of
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR J. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Ty Lunde 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660						
08/05/2014	Brian Mahnken 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Monetary	Schedule A Monetary Contributions Received		ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 91	SCHEDULE A
NAME OF FILER Newport Bea	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Brian Mahnken 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	L \$30.00	\$30.00		
Schedule A Summary         1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party		
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ol>	\$7,920.00	SCC- Small Contributor Committee		

Schedule A Monetary Contributions Received         NAME OF FILER Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		Type or print in ink. Amounts may be rounded to whole dollars.		from 07/01/2014 through 10/18/2014		CALIFORN FORM Page 92 I.D. NUMBER 1243243 ATIVE TO DATE	SCHEDULE A
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALI	ENDAR YEAR	TO DATE (IF REQUIRED)
08/05/2014	Jeremiah Martin 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Jeremiah Martin 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00		
Schedule A Summary	an an an an an Alight Abili 2017 an	*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee	
3. Total monetary contributions received this period.			
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua	

Schedule A Monetary Contributions Received		ТАто	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 93	400	
DATE	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT		1243243 ATIVE TO DATE	PER ELECTION
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Steven Martin 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   СОМ   ОТН   РТҮ   SCC					

SUBTOTAL	\$36.00	\$36.00		
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)		
Amount received this period -unitemized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar		

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		from 07/01/2014 through 10/18/2014 I.D. NUM 124324		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAI (JAN. 1-DEC. 31)	
10/09/2014	Steven Martin 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00	\$30	6.00
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
08/05/2014	Brett McAllister 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$30	6.00

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/

Schedule A Monetary Contributions Received		T Amo	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 95	of <u>166</u>	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Brett McAllister 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.0		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
- 2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.			14 P	ALIFORN FORM Page 96 D. NUMBER 243243	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)		TO DATE (IF REQUIRED)
08/05/2014	Matthew McClarey 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Matthew McClarey 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.		*Contributor Codes IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00 \$264.00	(other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule A Monetary Contributions Received		T Amo	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	L	CALIFORN FORM Page 97	SCHEDULE A	
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Brian McDonough 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	\$36.00		
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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		
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05		

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORN FORM Page 98 I.D. NUMBER 1243243	SCHEDULE A
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Brian McDonough 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Carlos Medina 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		to whole dollars. from 07/01			Statement covers period           from         07/01/2014           through         10/18/2014		SCHEDULE A
	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Carlos Medina 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	- \$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Steve Michael 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC				
10/09/2014	Steve Michael 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	

\$66.00	
	*Contributor Codes
	COM- Recipient Committee
\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
\$264.00	PTY- Political Party
	SCC- Small Contributor Committee
\$7,920.00	FPPC Form 460 (Janua)
	\$7,656.00 \$264.00

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 101	400
NAME OF FILER Newport Bead	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	John Mollica 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
<ul> <li>3. Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ul>	\$7,920.00	SCC- Small Contributor Committee

FPPC Form 460 (January)05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received		T; Amo	Statement covers period from 07/01/2014 through 10/18/2014		CALIFOR FORM Page 102 I.D. NUMBER 1243243	NIA 2 2_of	166	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	тог	ECTION DATE QUIRED)
10/09/2014	John Mollica 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC						
08/05/2014	Nadine Morris 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00		

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
Total monetary contributions received this period.     (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)      TOTAL	\$7,920.00	FPPC Form 460 (Janua

	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 103	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Nadine Morris 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTO	TAL \$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	L\$7,920.00	FPPC Form 460 (Januar

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Michael Mullen 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Michael Mullen 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 105 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Matt Natelborg 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

NAME OF FILER Newport Bead	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORM FORM Page 106 I.D. NUMBER 1243243 ATIVE TO DATE	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	(IF SELF-EMPLOYED, ENTER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Matt Natelborg 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$30.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	J.C. Nessa 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTC	DTAL \$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)		(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	AL \$7,920.00	FPPC Form 460 (January

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 107	400
	ch Firefighters Association PAC		·			1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	J.C. Nessa 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$30.00		
Schedule A Summary		*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
3. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January	

SCHEDULE A	١.
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Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		SCHEDULE A CALIFORNIA 460 FORM Page 108 of 166 I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Adam Novak 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Adam Novak 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00						
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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					
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua					
	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	ŀ	CALIFORN FORM Page 109	400
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NAME OF FILER	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Ryan O'Leary 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	SCC- Small Contributor Committee
	\$7,520100	FPPC Form 460 (Janu

NAME OF FILER Newport Bead	A Contributions Received ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER	Statement covers from 07/01/2014 through 10/18/20	I.D. NUMBER 1243243	SCHEDULE A A 460 of 166
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR YEAR	TO DATE (IF REQUIRED)
10/09/2014	Ryan O'Leary 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>□ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC				
08/05/2014	Jude Olivas 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 111 I.D. NUMBER	400
DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Jude Olivas 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Armando Oseguera 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Armando Oseguera 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100     3. Tetal monetary contributions received this period	\$264.00	PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 113	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Grant Parsons 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SU	BTOTAL \$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	OTAL \$7,920.00	FPPC Form 460 (January/0

NAME OF FILER Newport Beac DATE	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORN FORM Page 114 I.D. NUMBER 1243243 ATIVE TO DATE NDAR YEAR	400
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NOMBER)		(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD	(JAI	N. 1-DEC, 31)	(IF REQUIRED)
10/09/2014	Grant Parsons 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Chad Ponegalek 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/

Schedule A         Monetary Contributions Received         NAME OF FILER         Newport Beach Firefighters Association PAC         DATE       FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 115 I.D. NUMBER 1243243 ATIVE TO DATE	400
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Chad Ponegalek 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTA	sL \$30.00	
Schedule A Summary		*Contributor Codes IND- Individual
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	EPPC Form 460 (January/05)

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 116 I.D. NUMBER 1243243	400
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD		NDAR YEAR	TO DATE (IF REQUIRED)
08/05/2014	Ryan Popovich 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Ryan Popovich 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 117	400
	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Phillip Puhek 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SI	JBTOTAL	\$36.00	
Schedule A Summary			*Contributor Codes
1. Amount received this period -itemized monetary contributions.		<b>AT</b> ( <b>T</b> ( <b>D</b> )	COM- Recipient Committee (other than PTY or SCC)
(Include all Schedule A subtotals.)		\$7,656.00 \$264.00	OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100		\$204.00	PTY- Political Party SCC- Small Contributor Committee
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li> </ol>		\$7,920.00	FPPC Form 460 (January/05

NAME OF FILER Newport Bea	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	FORM	400
DATE RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALENDAR YEAR (JAN. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Phillip Puhek 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
08/05/2014	Aaron Reed 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
<ol> <li>Total monetary contributions received this period.</li> <li>(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li> </ol>	\$7,920.00	FPPC Form 460 (Janua

	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 119	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	LATIVE TO DATE ENDAR YEAR NN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Aaron Reed 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 120 I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Jim Reideler 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Jim Reideler 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule Monetary	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 121	400
Newport Bea	ch Firefighters Association PAC					1243243	,
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Matthew Reis 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from $\frac{07/01/2014}{10/18/20}$	Ļ	CALIFORN FORM Page 122 I.D. NUMBER	400
DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Matthew Reis 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Rich Ruffini 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

S	UBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.			*Contributor Codes IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)		\$7,656.00 \$264.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>		φ204.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)		\$7,920.00	FPPC Form 460 (Janua

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from $\frac{07/01/2014}{10/18/20}$		CALIFORN FORM Page 123	400
	ch Firefighters Association PAC		· · · · · · · · · · · · · · · · · · ·			1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Rich Ruffini 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
B. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	Ļ	CALIFORN FORM Page 124	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Dean Rush 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Dean Rush 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar)

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20		CALIFORN FORM Page 125	400
Newport Bead DATE RECEIVED	Ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Bobby Salerno 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTA	AL \$36.00	•
Schedule A Summary		*Contributor Codes IND- Individual
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) TOTAL	\$7,920.00	FPPC Form 460 (January)

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORN FORM Page 126	of
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC, 31) -	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Bobby Salerno 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Adam Schwegman 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janu

0	A	т	ype or print in ink.				SCHEDULE A
Schedule Monetary	A Contributions Received	Amo	unts may be rounded to whole dollars.	Statement covers from $\frac{07/01/2014}{10/18/20}$	ļ	CALIFORM FORM Page 127	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Adam Schwegman 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

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NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 128 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE NDAR YEAR I. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	David Shank 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	David Shank 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)</li></ol>	\$264.00 \$7,920.00	PTY- Political Party SCC- Small Contributor Committee

	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	ļ	CALIFORN FORM Page 129	400
NAME OF FILER Newport Bea DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	AMOUNT RECEIVED THIS PERIOD	CALE	I.D. NUMBER 1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	OF BUSINESS)				
08/05/2014	Travis Shook 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	\$36.00		
Schedule A Summary		*Contributor Codes		
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee		
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)		
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party		
3. Total monetary contributions received this period.		SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05)		

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	14	CALIFORM FORM Page 130 I.D. NUMBER 1243243 ATIVE TO DATE	of 166
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	1	NDAR YEAR	TO DATE (IF REQUIRED)
10/09/2014	Travis Shook 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Matt Skelly 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$276.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

NAME OF FILER Newport Bea	ch Firefighters Association PAC	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 131 I.D. NUMBER 1243243	of <u>166</u>
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Matt Skelly 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100 \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	
		FPPC Form 460 (Januar

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	FORM	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Brad Smith 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Brad Smith 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary	vermented of Cald	*Contributor Codes IND- Individual
Amount received this period -itemized monetary contributions.     (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	- C/ 	ALIFORN FORM age 133	400
	ch Firefighters Association PAC					13243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE CALENDAF (JAN. 1-DE	R YEAR	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
08/05/2014	Megan Smith 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20	I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN, 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Megan Smith 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00	\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
08/05/2014	Michael Sodergren 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00	\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	ŀ	CALIFORM FORM Page 135	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					1.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Michael Sodergren 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$30.00			
Schedule A Summary 1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	*Contributor Codes IND- Individual COM- Recipient Committee (other than PTY or SCC)		
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/0		

Schedule Monetary	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	FORM	400
	ch Firefighters Association PAC			AMOUNT	1243243	PER ELECTION
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	COMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Chad Spiker 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00	\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC				
10/09/2014	Chad Spiker 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00	\$306.00	

s	UBTOTAL	\$66.00	
Schedule A Summary			*Contributor Codes
1. Amount received this period -itemized monetary contributions.			IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)		\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100		\$264.00	PTY- Political Party
3. Total monetary contributions received this period.			SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	TOTAL	\$7,920.00	FPPC Form 460 (Janua

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NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORM FORM Page 137 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Nick Stocks 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☐ ОТН ☐ РТҮ ☐ SCC					

\$36.00	
With me.	*Contributor Codes
	IND- Individual COM- Recipient Committee
\$7,656.00	(other than PTY or SCC)
\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
	SCC- Small Contributor Committee
\$7,920.00	FPPC Form 460 (January)
	\$7,656.00 \$264.00

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from 07/01/2014 through 10/18/20		CALIFORM FORM Page 138	400_
DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Nick Stocks 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Jimmy Strack 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -uniternized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	
		FPPC Form 460 (Janu

	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	ļ	CALIFORN FORM Page 139	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					I.D. NUMBER 1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Jimmy Strack 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00		
Schedule A Summary	· · · · · · · · · · · · · · · · · · ·	*Contributor Codes	
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee	
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)	
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party	
3. Total monetary contributions received this period.		SCC- Small Contributor Committee	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05	

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers	period			
				from 07/01/2014 through 10/18/20	07/01/2014 FOR		400	
NAME OF FILER Newport Beac	ch Firefighters Association PAC					I.D. NUMBER 1243243		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
08/05/2014	Dustin Suppe 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$276.00		
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC						
10/09/2014	Dustin Suppe 100 Civic Center Dr. Newport Beach, CA 92660	V IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$276.00		

SUBTOTAL	\$66.00		
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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	
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar	

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	1	CALIFORM FORM Page 141 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Brett Sutherland 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	•
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January

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Schedule A Monetary Contributions Received						CALIFORM FORM Page 142 I.D. NUMBER 1243243 ATIVE TO DATE ENDAR YEAR	400
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	PERIOD		N. 1-DEC. 31)	(IF REQUIRED)
10/09/2014	Brett Sutherland 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Roman Taijeron 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBT	OTAL \$66.00	\$66.00		
Schedule A Summary		*Contributor Codes IND- Individual		
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)		COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)		
<ol> <li>Amount received this period -uniternized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	<b>FAL</b> \$7,920.00	FPPC Form 460 (January/		

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement cover from 07/01/2014 through 10/18/20	1	CALIFORM FORM Page 143 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Roman Taijeron 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 144	SCHEDULE A IIA 460 of 166
NAME OF FILER Newport Bead	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CAL	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Anthony Terzo 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$276.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Anthony Terzo 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$276.00	

SUBTO	TAL \$66.00						
Schedule A Summary		*Contributor Codes IND- Individual					
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity)					
<ol> <li>Amount received this period -unitemized monetary contributions of less than \$100</li> <li>Total monetary contributions received this period.</li> </ol>	\$264.00	PTY- Political Party SCC- Small Contributor Committee					
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	L \$7,920.00	FPPC Form 460 (Januar					
NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from <u>07/01/2014</u> through <u>10/18/20</u>	L	CALIFORM FORM Page 145	SCHEDULE A
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DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	John Testa 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND Сом ОТН РТҮ SCC	Firefighter City of Newport Beach	\$36.00		\$156.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	EPPC Form 460 / January/

_	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>		CALIFORN FORM Page 146	400
NAME OF FILER Newport Bea	ch Firefighters Association PAC					1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	John Testa 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$156.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Kevin Tiscareno 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar)

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 147 I.D. NUMBER 1243243 ATIVE TO DATE	400
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					
10/09/2014	Kevin Tiscareno 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$30.00	
Schedule A Summary	the second s	*Contributor Codes
I. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	
		FPPC Form 460 (Jan

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Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	14	CALIFORN FORM Page 148 I.D. NUMBER 1243243 ATIVE TO DATE	400_
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Tommy Van Andel 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND       ○ COM       ○ OTH       ○ PTY       ○ SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Tommy Van Andel 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	PTY- Political Party SCC- Small Contributor Committee
B. Total monetary contributions received this period.		
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 149 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALI	LATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Glenn White 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
Amount received this period -unitemized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar)

NAME OF FILER	A Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars. IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER	Statement covers from 07/01/2014 through 10/18/20 AMOUNT RECEIVED THIS	CUMUL CALE	I.D. NUMBER 1243243 ATIVE TO DATE ENDAR YEAR	of 166
10/09/2014	Glenn White 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) Firefighter City of Newport Beach	PERIOD \$30.00	AL)	N. 1-DEC. 31) \$306.00	(IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	□ IND □ COM □ OTH □ PTY □ SCC					
08/05/2014	Ed Wick 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORNIA FORM 46 Page 151 of 166	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Ed Wick 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>○ COM</li> <li>○ OTH</li> <li>○ PTY</li> <li>○ SCC</li> </ul>	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC			,		

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
Amount received this period -itemized monetary contributions.     (Include all Schedule A subtotals.)      Amount received this period -unitemized monetary contributions of less than \$100	\$7,656.00 \$264.00	IND- Individual COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January,

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period       CALIFO         from       07/01/2014       Page       Page         through       10/18/2014       I.D. NUMBER       1243243		52 of 166
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
08/05/2014	Keith Winokur 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>COM</li> <li>OTH</li> <li>PTY</li> <li>SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00	\$306.0	0
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC				
10/09/2014	Keith Winokur 100 Civic Center Dr. Newport Beach, CA 92660		Firefighter City of Newport Beach	\$30.00	\$306.0	0

SUBTOTAL	\$66.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Januar

NAME OF FILER	Contributions Received	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from $\frac{07/01/2014}{10/18/20}$	1	CALIFOR FORM Page 153	400
DATE RECEIVED	ch Firefighters Association PAC FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Nick Yaroma 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ СОМ</li> <li>☐ ОТН</li> <li>☐ РТҮ</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule A subtotals.)	\$7,656.00	(other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total monetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2014 through 10/18/2014		CALIFORM FORM Page 154 I.D. NUMBER 1243243 ATIVE TO DATE	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ENDAR YEAR N. 1-DEC. 31)	TO DATE (IF REQUIRED)
10/09/2014	Nick Yaroma 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
08/05/2014	Mike Ybarra 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	

SUE	TOTAL	\$66.00	
Schedule A Summary			*Contributor Codes IND- Individual
<ol> <li>Amount received this period -itemized monetary contributions.</li> </ol>			COM- Recipient Committee
(Include all Schedule A subtotals.)		\$7,656.00	(other than PTY or SCC) OTH- Other (e.g., business entity)
2. Amount received this period -unitemized monetary contributions of less than \$100		\$264.00	PTY- Political Party
3. Total monetary contributions received this period.			SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.) TC	•TAL	\$7,920.00	FPPC Form 460 (January

NAME OF FILER	ch Firefighters Association PAC	Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	1	CALIFORM FORM Page 155 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
10/09/2014	Mike Ybarra 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ○ COM ○ OTH ○ PTY ○ SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
Arnount received this period -uniternized monetary contributions of less than \$100     Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 / January

NAME OF FILER	etary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		from 07/01/2014 through 10/18/2014 I.D. 1 124 AMOUNT CUMULATIVE		SCHEDULE A
RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE *	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	RECEIVED THIS PERIOD	1 -	ENDAR YEAR .N. 1-DEC. 31)	TO DATE (IF REQUIRED)
08/05/2014	Mike Zaccaro 100 Civic Center Dr. Newport Beach, CA 92660	<ul> <li>✓ IND</li> <li>☐ COM</li> <li>☐ OTH</li> <li>☐ PTY</li> <li>☐ SCC</li> </ul>	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					
10/09/2014	Mike Zaccaro 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	

SUBTOTAL	\$66.00	
Schedule A Summary 1. Amount received this period -itemized monetary contributions.		*Contributor Codes IND- Individual
(Include all Schedule A subtotals.)	\$7,656.00 \$264.00	COM- Recipient Committee (other than PTY or SCC) OTH- Other (e.g., business entity) PTY- Political Party
Total monetary contributions received this period.     (Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)      TOTAL	\$7,920.00	SCC- Small Contributor Committee

Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement cover from 07/01/2014 through 10/18/20	1	CALIFORM FORM Page 157 I.D. NUMBER 1243243	400
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC					
08/05/2014	Rick Zaccaro 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND COM OTH PTY SCC	Firefighter City of Newport Beach	\$36.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND   COM   OTH   PTY   SCC					

SUBTOTAL	\$36.00	
Schedule A Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions. (Include all Schedule A subtotals.)	\$7,656.00	IND- Individual COM- Recipient Committee (other than PTY or SCC)
2. Amount received this period -unitemized monetary contributions of less than \$100     3. Total monetary contributions received this period.	\$264.00	OTH- Other (e.g., business entity) PTY- Political Party SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (January/05

SCHEDU	JLE A
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Schedule A Monetary Contributions Received		Amo	ype or print in ink. unts may be rounded to whole dollars.	Statement covers from <u>07/01/2014</u> through <u>10/18/20</u>	Ļ	CALIFORN FORM Page 158	400
	ch Firefighters Association PAC				-	1243243	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CALE	ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/09/2014	Rick Zaccaro 100 Civic Center Dr. Newport Beach, CA 92660	✓ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Firefighter City of Newport Beach	\$30.00		\$306.00	
	Intermediary: Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC					

SUBTOTAL	\$30.00	
Schedule A Summary         1. Amount received this period -itemized monetary contributions.         (Include all Schedule A subtotals.)	\$7,656.00 \$264.00	*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
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Line 1.)	\$7,920.00	FPPC Form 460 (Janua

Schedule C Nonmonetary Contributions Received			Type or print in ink. Amounts may be round to whole dollars,	Statement covers from 07/01/2014 through 10/18/20	Ļ	CALIFORN FORM Page 159	400	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	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	CALE	1243243 ATIVE TO DATE ENDAR YEAR N. 1-DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
09/02/2014	Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☑ ОТН ☐ РТҮ ☐ SCC		Payment of debt for campaign software	\$300.00		\$930.89	
09/08/2014	Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	☐ IND ☐ СОМ ☑ ОТН ☐ РТҮ ☐ SCC		Professional services	\$383.37		\$930.89	
10/01/2014	Newport Beach Firefighters Association 100 Civic Center Dr. Newport Beach, CA 92660	IND COM OTH PTY SCC		Campaign software	\$75.00		\$930.89	

SUBTOTAL	\$758.37	
Schedule C Summary		*Contributor Codes
1. Amount received this period -itemized monetary contributions.		IND- Individual COM- Recipient Committee
(Include all Schedule C subtotals.)	\$758.37	(other than PTY or SCC)
2. Amount received this period -unitemized nonmonetary contributions of less than \$100	\$0.00	OTH- Other (e.g., business entity) PTY- Political Party
3. Total nonmonetary contributions received this period.		SCC- Small Contributor Committee
(Add Lines 1 and 2. Enter here on the Summary Page, Comlumn A, Lines 4 and 10.)TOTAL	\$758.37	FPPC Form 460 (Janua
———————————————————————————————————————	EPPC To	II-Free Helpline: 866/ASK-EPPC (866/275

SCHEDU	JLE D
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## Schedule D Type or print in ink. Amounts may be rounded Statement covers period CALIFORNIA 460 **Summary of Expenditures** to whole dollars. FORM Supporting/Opposing Other from 07/01/2014 Page 160 of 166 Candidates, Measures and Committees 10/18/2014 through I.D. NUMBER NAME OF FILER 1243243 Newport Beach Firefighters Association PAC CUMULATIVE TO DATE PER ELECTION TO AMOUNT/FAIR TYPE OF DESCRIPTION NAME OF CANDIDATE, OFFICE, AND DATE CALENDAR YEAR MARKET DATE (IF REQUIRED) DISTRICT, OR MEASURE NUMBER OR PAYMENT VALUE LETTER AND JURISDICTION, OR (IF REQUIRED) (JAN. 1-DEC. 31) COMMITTEE Contribution Keith Curry Nonmonetary Contribution State Assembly District 74 \$500.00 \$500.00 G-14 \$500.00 10/15/2014 Independent Expenditure Support Oppose Monetary Contribution Tim Brown Nonmonetary Contribution POS supporting Tim Newport Beach City Council 2 \$6,317.74 \$6,390.62 10/15/2014 Brown for Council 2014 Lindependent Expenditure Support Oppose Monetary Contribution Tim Brown Nonmonetary Contribution LIT supporting Tim Newport Beach City Council 2 \$72.88 \$6,390.62 10/15/2014 Brown for Council 2014 Independent Expenditure Support Oppose

SUBTOTAL \$6,890.62	
Schedule D Summary	
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)	\$13,281.24
2. Unitemized contributions and indepedent expenditures made this period of under \$100	\$25,562.48
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	\$38,843.72
	C Form 460 (January/05)

Schedule D Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees			Type or print in ink. Amounts may be rounded to whole dollars.	from 07/0		CALIF FO	SCHEDULE D ORNIA 460 RM 161 of 166
NAME OF FILER Newport Beac	ch Firefighters Association PAC					і.d. numbe 1243243	R
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO CALENDAR YE (JAN. 1-DEC. 31	AR	PER ELECTION TO DATE (IF REQUIRED)
10/15/2014	Mike Toerge Newport Beach City Council 6 🔽 Support 🗌 Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure	POS supporting Mike Toerge for City Council 2014	\$6,317.74	\$6,3	390.62	
10/15/2014	Mike Toerge Newport Beach City Council 6 Support Oppose	Monetary Contribution	LIT supporting Mike Toerge for City Council 2014	\$72.88	\$6,3	390.62	

SUBTOTAL	\$6,390.62	
Schedule D Summary		
1. Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.)		\$13,281.24
2. Unitemized contributions and indepedent expenditures made this period of under \$100		\$25,562.48
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Pa	ge.) <b>TOTAL</b>	\$38,843.72
		FPPC Form 460 (January/05)

Schedule E			or print in ink. may be rounded	SCHEDULE E Statement covers period CALLEORNIA 4000			
Payments Made			tole dollars.	from 07/01/2014 through 10/18/2014	CALIFORNI FORM Page 162	400	
NAME OF FILER Newport Beach Firefighters Association PAC					I.D. NUMBER 1243243		
CODES: If one of the following codes accurately des	cribes the payn	nent, you ma	y enter the code. Otherw	ise, describe the payment	t.		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expens PET petition circuli PHO phone banks POL poling and s POS postage, deli PRO professional PRT print ads	d appearances ses ating urvey research very and messeng	counting)	RAD radio airtime and produ RFD returned contributions SAL campaign workers' sala TEL t.v. or cable airtime and TRC candidate travel, lodgir TRS staff/spouse travel, lodg TSF transfer between comm VOT voter registration WEB information technology	aries I production costs Ig, and meals ging, and meals nittees of the same cau	il)	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (	DR D	ESCRIPTION OF PAYMENT		AMOUNT PAID	
Curry for Assembly 2014 1127 11th St., Ste. 310 Sacramento, CA 95814 ID: 1362342		СТВ				\$500.00	
Firefighters Print & Design 1780 Creekside Oaks Dr. Sacramento, CA 95833		IND	POS supporting Mike To	berge for City Council 2014		\$6,317.74	
			······································				

(IF COMMITTEE, ALSO ENTER I.D. NUMBER) SUBTO	<b>STAL</b> \$6,817.74
Schedule E Summary	
1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$13,135.48
2. Unitemized payments made this period of under \$100	\$145.76
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.)	\$13,281.24
$\overline{1}$	FPPC Form 460 (January/05) 66/ASK-FPPC (866/275-3772)

Schedule E		Type or print in ink.		SCHEDULE			
Payments Made	Am	ounts may be rounded to whole dollars.	Statement covers period	CALIFORN	<sup>IIA</sup> 460		
			from 07/01/2014	FORM			
			through <u>10/18/2014</u>	Page 163	of166		
NAME OF FILER Newport Beach Firefighters Association PAC				I.D. NUMBER 1243243			
CODES: If one of the following codes accurately de	scribes the payment, you	may enter the code. Othe	rwise, describe the paymer	ıt.			
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MBR member communications MTG meetings and appearanc OFC office expenses PET petition circulating PHO phone banks POL polling and survey resear POS postage, delivery and me PRO professional services (leg PRT print ads	es ch ssenger services	RAD radio airtime and prod RFD returned contributions SAL campaign workers' sal TEL t.v. or cable airtime an TRC candidate travel, lodg TRS staff/spouse travel, lod TSF transfer between com VOT voter registration WEB information technolog	aries d production costs ng, and meals lging, and meals nittees of the same ca			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID		
Firefighters Print & Design 1780 Creekside Oaks Dr. Sacramento, CA 95833	IND	POS supporting Tim B	rown for Council 2014		\$6,317.74		

(IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TOTAL	\$6,317.74
Schedule E Summary		1. Mar 11 an 12 an
1. Itemized payments made this period. (Include all Schedule E subtotals.)		\$13,135.48
2. Unitemized payments made this period of under \$100		\$145.76
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.)		\$13,281.24
	FPPC Fo	orm 460 (January/05)

Cabadula F		Type or print in ink. Amounts may be rounded to whole dollars.		SCHEDULE F			
Schedule F Accrued Expenses (Unpaid Bills)	An			ers period CALIFO			
Accided Expenses (Onpaid Bills)			from 07/01/20	14 FOR	W		
			through 10/18/2		164_of166		
NAME OF FILER Newport Beach Firefighters Association PAC				I.D. NUMBER 1243243			
CODES: If one of the following codes accurate	tely describes the payment, yo	u may enter the code. C	Otherwise, describe th	e payment.			
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure LEG legal defense LIT campaign literature and mailings	MTG meetings and appearan OFC office expenses PET petition circulating PHO phone banks POL polling and survey resea POS postage, delivery and m	PET petition circulating       TEL t.v. or cable airtime and         PHO phone banks       TRC candidate travel, lodgin         POL polling and survey research       TRS staff/spouse travel, lod         POS postage, delivery and messenger services       TSF transfer between comm         PRO professional services (legal, accounting)       VOT voter registration			ne candidate/sponsor		
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD		
NGP VAN, Inc. 1101 15th St., NW Washington, DC 20005	OFC: PAID BY SPONSOR (not forgiven)	\$300.00	-\$300.00 (Forgiven)	\$0.00	\$0.00		

*Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$300.00	(\$300.00)	\$0.00	\$0.00
Schedule F Summary					
1. Total accrued expenses incurred this period. (Include all Schedu accrued expenses of \$100 or more, plus total unitemized payments	e F, Column (b) subtotals for on accrued expenses under \$100.)		INCURRED	TOTALS	\$0.00
2. Total accrued expenses paid this period. (Include all Schedule F accrued expenses of \$100 or more, plus total unitemized payments	Column (c) subtotals for payments on accrued expenses under \$100.)	on	PAID	TOTALS	\$300.00
3. Net change this period. (Subtract Line 2 from Line 1. Enter the di and on the Summary Page, Column A, Line 9.)				NET	\$(300.00)

Schedule G	Type or print in ink. Amounts may be rounded to whole dollars.		SCHEDULE G				
Payments Made by an Agent or Independent		Statement covers period	CALIFORNIA 460				
Contractor(on Behalf of This Committee)		from 07/01/2014	FORM <b>400</b>				
		through 10/18/2014	Page <u>165</u> of <u>166</u>				
NAME OF FILER			I.D. NUMBER				
Newport Beach Firefighters Association PAC			1243243				
NAME OF AGENT OR INDEPENDENT CONTRACTOR							
Firefighters Print & Design							
CODES: If one of the following codes accurately describes the pa	ayment, you may enter the code. O	therwise, describe the paymer	nt.				

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)\* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure 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 RFD 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)

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID
US Post Office 3101 W. Sunflower Ave. Santa Ana, CA 92799		IND: POS supporting Tim Brown for Council 2014	\$6,317.74
US Post Office 3101 W. Sunflower Ave. Santa Ana, CA 92799		IND: POS supporting Mike Toerge for City Council 2014	\$6,317.74

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$12,635.48

\* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

NAME OF FILER	I eous Increases to Cash h Firefighters Association PAC	Amount	or print in ink. s may be rounded whole dollars.	$\begin{array}{c} \text{Statement covers period} \\ \text{from } \underline{07/01/2014} \\ \text{through } \underline{10/18/2014} \end{array}$	CALIFORNIA     460       FORM     166       Page     166       I.D. NUMBER     1243243
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT		AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.       SUI	BTOTAL	\$0.00
Schedule I Summary		
1. Itemized increases to cash this period.	•	\$0.00
2. Unitemized increases to cash of under \$100 this period	•	\$0.10
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)		\$0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.)		\$0.10
	FPPC Form	1 460 (January/05)