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

SEE INSTRUCTIONS ON REVERSE

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

3. Committee Information

   I.D. NUMBER
   1243243

   COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)
   Newport Beach Firefighters Association PAC

   STREET ADDRESS (NO P.O. BOX)
   3605 Long Beach Blvd., Suite 426

   CITY
   Long Beach
   STATE
   CA
   ZIP CODE
   90807
   AREA CODE/PHONE
   (562) 427-2100

   MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX
   PO Box 1695

   CITY
   Newport Beach
   STATE
   CA
   ZIP CODE
   92659
   AREA CODE/PHONE

   OPTIONAL: FAX / E-MAIL ADDRESS
   info@olsonhagel.com

4. Verification
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1/19/17  
By ____________________________
Signature of Treasurer or Assistant Treasurer

Executed on  
By ____________________________
Signature of Controlling Officerholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on  
By ____________________________
Signature of Controlling Officerholder, Candidate, State Measure Proponent

Executed on  
By ____________________________
Signature of Controlling Officerholder, Candidate, State Measure Proponent

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5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

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

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

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

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE? YES NO

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

CITY STATE ZIP CODE AREA CODE/PHONE

6. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER JURISDICTION

SUPPORT NO OPPOSE

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

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPOSER

OFFICE SOUGHT OR HELD DISTRICT NO. IF ANY

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

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT NO OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT NO OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT NO OPPOSE

NAME OF OFFICEHOLDER OR CANDIDATE OFFICE SOUGHT OR HELD

SUPPORT NO OPPOSE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER

CONTROLLED COMMITTEE? YES NO

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

CITY STATE ZIP CODE AREA CODE/PHONE

Attach continuation sheets if necessary
**Contributions Received**

1. Monetary Contributions .................................. Schedule A, Line 3 $ 5,594.00
2. Loans Received ............................................. Schedule B, Line 3 0.00
3. SUBTOTAL CASH CONTRIBUTIONS ..................... Add Lines 1 + 2 $ 5,594.00
4. Nonmonetary Contributions ............................... Schedule C, Line 3 0.00
5. TOTAL CONTRIBUTIONS RECEIVED .................... Add Lines 3 + 4 $ 5,594.00

**Expenditures Made**

6. Payments Made ............................................ Schedule E, Line 4 $ 1,659.28
7. Loans Made .................................................. Schedule H, Line 3 0.00
8. SUBTOTAL CASH PAYMENTS ............................. Add Lines 6 + 7 $ 1,659.28
9. Accrued Expenses (Unpaid Bills) ....................... Schedule F, Line 3 0.00
10. Nonmonetary Adjustment .............................. Schedule C, Line 3 0.00
11. TOTALEXPENDITURES MADE ......................... Add Lines 8 + 9 + 10 $ 1,659.28

**Current Cash Statement**

12. Beginning Cash Balance .................................. Previous Summary Page, Line 16 $ 64,615.67
13. Cash Receipts ............................................. Column A, Line 3 above 5,994.00
14. Miscellaneous Increases to Cash ..................... Schedule I, Line 4 0.07
15. Cash Payments ............................................. Column A, Line 8 above 1,659.28
16. ENDINGCASHBALANCE ............................... Add Lines 12 + 13 + 14, then subtract Line 15 $ 68,950.46

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

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ........................................ See instructions on reverse 0.00
19. Outstanding Debts ....................................... Add Line 2 + Line 9 in Column B above 0.00

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

- Contributions Received $ .......................... $
- Expenditures Made $ .............................. $
- Expenditure Limit Summary for State Candidates
  - Date of Election (mm/ddyy) Total to Date
    - / / $
    - / / $

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

---

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

---

**Campaign Disclosure Statement**

**Summary Page**

Amounts may be rounded to whole dollars.

**CALIFORNIA FORM 460**

SUMMARY PAGE

I.D. NUMBER
1243243

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Newport Beach Firefighters Association PAC

FFPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

www.netfile.com
### Schedule A
Monetary Contributions Received

**Amounts may be rounded to whole dollars.**

**Statement covers period**
from 10/23/2016 through 12/31/2016

**NAME OF FILER**
Newport Beach Firefighters Association PAC

**I.D. NUMBER**
1243243

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor (If Committee, Also Enter I.D. Number)</th>
<th>Contributor Code</th>
<th>If an Individual, Enter Occupation and Employer (If Self-Employed Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date CALENDAR YEAR (Jan. 1 - Dec. 31)</th>
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<td>12/31/2016</td>
<td>Alex Amat</td>
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<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
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<td>Casey Blythe</td>
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</table>

**Subtotal** 270.00

### Schedule A Summary

1. Amount received this period – itemized monetary contributions.
   (Include all Schedule A subtotals.) .......................................................... $ 5,832.00

2. Amount received this period – unitemized monetary contributions of less than $100 ........................................ $ 162.00

3. Total monetary contributions received this period.
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ........................................ TOTAL $ 5,994.00

*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

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FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
### Schedule A (Continuation Sheet)
**Monetary Contributions Received**

**Amounts may be rounded to whole dollars.**

**Statement covers period**

*from* 10/23/2016  
*through* 12/31/2016

**GRID**

| DATE RECEIVED | FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR  
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<td>James Boland</td>
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<td>Bill Boullianne</td>
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<td>Chris Brown</td>
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<td>Erin Brown</td>
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<tr>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
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**SUBTOTAL$** 270.00

---

*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

---

www.netfile.com
### Schedule A (Continuation Sheet)
**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and ZIP Code of Contributor (If Committee, Also Enter I.D. Number)</th>
<th>Contributor Code *</th>
<th>Occupation and Employer (If Self-Employed, Enter Name of Business)</th>
<th>Amount Received This Period</th>
<th>Cumulative to Date Calendar Year (Jan. 1 - Dec. 31)</th>
<th>Per Election to Date (If Required)</th>
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<td>Geoffrey Cathey</td>
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**Subtotal $270.00**

---

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- IND – Individual
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- OTH – Other (e.g., business entity)
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---

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www.fppc.ca.gov

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## Schedule A (Continuation Sheet)
**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
<th>Page 7 of 28</th>
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<tr>
<td>from 10/23/2016</td>
<td></td>
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**NAME OF FILER**

Newport Beach Firefighters Association PAC

**I.D. NUMBER**

1243243

<table>
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<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
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<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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**SUBTOTAL $**

270.00

*Contributor Codes

IND – Individual
COM – Recipient Committee
(considered other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
<table>
<thead>
<tr>
<th>Date Received</th>
<th>Full Name, Street Address and Zip Code of Contributor (if Committee, also enter I.D. Number)</th>
<th>Contributor Code *</th>
<th>Contributor Occupation and Employer (if self-employed, enter name of business)</th>
<th>Amount Received This Period</th>
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<th>Per Election To Date (if required)</th>
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<td>12/31/2016</td>
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</table>

**Subtotal:** $270.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
### Schedule A (Continuation Sheet)
#### Monetary Contributions Received

**NAME OF FILER**
Newport Beach Firefighters Association PAC

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
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<td>12/31/2016</td>
<td>Brian Frasz</td>
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<td>Firefighter City of Newport Beach</td>
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<td>Firefighter City of Newport Beach</td>
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<td>Mark Garman</td>
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**SUBTOTAL $**
270.00

*Contributor Codes
IND – Individual
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(OTHER THAN PTY OR SCC)
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www.fppc.ca.gov
Schedule A (Continuation Sheet)  
Monetary Contributions Received

Amounts may be rounded to whole dollars.

**CALIFORNIA FORM 460**

<table>
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<tr>
<th>NAME OF FILER</th>
<th>Newport Beach Firefighters Association PAC</th>
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</thead>
<tbody>
<tr>
<td>I.D. NUMBER</td>
<td>1243243</td>
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<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
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**SUBTOTAL $** 270.00

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www.netfile.com
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<td>Thomas Herr</td>
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<td>Firefighter City of Newport Beach</td>
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**SUBTOTAL** $ 270.00

*Contributor Codes*
- IND - Individual
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- SCC - Small Contributor Committee
Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

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NAME OF FILER
Newport Beach Firefighters Association PAC

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SUBTOTAL $  270.00

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FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
# Schedule A (Continuation Sheet)
## Monetary Contributions Received

**NAME OF FILER**
Newport Beach Firefighters Association PAC

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<tr>
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<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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**SUBTOTAL $** 270.00

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**NAME OF FILER**

Newport Beach Firefighters Association PAC

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**SUBTOTAL $**

270.00

*Contributor Codes*

- IND – Individual
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www.netfile.com
Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

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Subtotal: $270.00

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**Subtotal**: $270.00

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**Schedule A (Continuation Sheet)**

**Monetary Contributions Received**

Amounts may be rounded to whole dollars.

**STATEMENT COVERS PERIOD**

- **From:** 10/23/2016
- **Through:** 12/31/2016

**NAME OF FILER**

Newport Beach Firefighters Association PAC

**I.D. NUMBER**

1243243

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<tr>
<td>12/31/2016</td>
<td>Phillip Puhak</td>
<td>X IND</td>
<td>Firefighter City of Newport Beach</td>
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<tr>
<td>12/31/2016</td>
<td>Aaron Reed</td>
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<tr>
<td>12/31/2016</td>
<td>Jim Reidler</td>
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<td>Firefighter City of Newport Beach</td>
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<td>186.82</td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL $**

270.00

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

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
## Schedule A (Continuation Sheet)
### 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)** | **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)** |
---|---|---|---|---|---|---|
12/31/2016 | Matthew Reis | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 |
12/31/2016 | Rich Ruffini | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 |
12/31/2016 | Dean Rush | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 |
12/31/2016 | Bobby Salerno | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 |
12/31/2016 | Adam Schwegman | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 |

**SUBTOTAL $** 270.00

---

*Contributor Codes*
- IND – Individual
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  (other than PTY or SCC)
- OTH – Other (e.g., business entity)
- PTY – Political Party
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www.netfile.com
## Schedule A (Continuation Sheet)

### 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) | **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)** |
--- | --- | --- | --- | --- | --- | --- |
12/31/2016 | David Shank | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 | |
12/31/2016 | Travis Shook | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 | |
12/31/2016 | Matt Skelly | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 | |
12/31/2016 | Brad Smith | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 | |
12/31/2016 | Megan Smith | X IND | Firefighter City of Newport Beach | 54.00 | 186.82 | |

**SUBTOTAL $** 270.00

---

*Contributor Codes
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- PTY – Political Party
- SCC – Small Contributor Committee

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<td>12/31/2016</td>
<td>Michael Sodergren</td>
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<td>12/31/2016</td>
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<td>X IND</td>
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<td>12/31/2016</td>
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**SUBTOTAL $** 270.00

*Contributor Codes
IND - Individual
COM - Recipient Committee
OTH - Other (e.g., business entity)
PTY - Political Party
SCC - Small Contributor Committee
Schedule A (Continuation Sheet)
Monetary Contributions Received

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE; ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<tbody>
<tr>
<td>12/31/2016</td>
<td>Roman Taiferon</td>
<td>IND</td>
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<tr>
<td>12/31/2016</td>
<td>Anthony Terzo</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
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<td></td>
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<tr>
<td>12/31/2016</td>
<td>John Testa</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.82</td>
<td></td>
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<tr>
<td>12/31/2016</td>
<td>Kevin Tiscareno</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.80</td>
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<tr>
<td>12/31/2016</td>
<td>Tommy Van Andel</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.80</td>
<td></td>
</tr>
</tbody>
</table>

SUBTOTAL $270.00

*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

www.netfile.com
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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</thead>
<tbody>
<tr>
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<td>Glenn White</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
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<td>12/31/2016</td>
<td>Ed Wick</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
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<td>Keith Winokur</td>
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<td>Firefighter City of Newport Beach</td>
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<tr>
<td>12/31/2016</td>
<td>Raymi Wun</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
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<td>156.80</td>
<td>186.80</td>
</tr>
<tr>
<td>12/31/2016</td>
<td>Nick Yaroma</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>156.80</td>
<td>186.80</td>
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</table>

**SUBTOTAL:** $270.00

*Contributor Codes:
IND – Individual
COM – Recipient Committee
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
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<tbody>
<tr>
<td>12/31/2016</td>
<td>Mike Ybarra</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.80</td>
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</tr>
<tr>
<td>12/31/2016</td>
<td>Mike Zaccaro</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.80</td>
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<tr>
<td>12/31/2016</td>
<td>Rick Zaccaro</td>
<td>IND</td>
<td>Firefighter City of Newport Beach</td>
<td>54.00</td>
<td>186.80</td>
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</table>

| SUBTOTAL $    | 162.00                                    |                  |                                                                                             |                             |                                               |                                   |

*Contributor Codes

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OTH – Other (e.g., business entity)

PTY – Political Party

SCC – Small Contributor Committee
## Schedule E
Payments Made

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>Statement covers period</th>
<th>CALIFORNIA FORM 460</th>
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<tr>
<td>from 10/23/2016</td>
<td>460</td>
</tr>
<tr>
<td>through 12/31/2016</td>
<td>Page 26 of 28</td>
</tr>
</tbody>
</table>

NAME OF FILER
Newport Beach Firefighters Association PAC

I.D. NUMBER
1243243

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the 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 supporting/opposing others (explain)*
- LEG legal defense
- LIT campaign literature and mailings
- MBR member communications
- MTG meetings and appearances
- OFC office expenses
- PET petition circulating
- PHO phone banks
- POL polling and survey research
- POS postage, delivery and messenger services
- PRO professional services (legal, accounting)
- PRT print ads
- RAD radio airtime and production costs
- 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)

### NAME AND ADDRESS OF PAYEE
(IF COMMITTEE ALSO ENTER I.D. NUMBER)

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
</tr>
</thead>
<tbody>
<tr>
<td>Olson, Hagel &amp; Fishburn LLP 555 Capitol Mall, Suite 1425 Sacramento, CA 95814</td>
<td>PRO</td>
<td>Olson, Hagel &amp; Fishburn LLP 555 Capitol Mall, Suite 1425 Sacramento, CA 95814</td>
<td>1,546.70</td>
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<tr>
<td>Olson, Hagel &amp; Fishburn LLP 555 Capitol Mall, Suite 1425 Sacramento, CA 95814</td>
<td>PRO</td>
<td>Olson, Hagel &amp; Fishburn LLP 555 Capitol Mall, Suite 1425 Sacramento, CA 95814</td>
<td>62.58</td>
</tr>
</tbody>
</table>

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

### SUBTOTAL$
1,609.28

## Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)
   $1,609.28

2. Unitemized payments made this period of under $100
   $50.00

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)
   $0.00

4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)
   TOTAL $1,659.28
Schedule I
Miscellaneous Increases to Cash

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Newport Beach Firefighters Association PAC

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>DESCRIPTION OF RECEIPT</th>
<th>AMOUNT OF INCREASE TO CASH</th>
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</thead>
<tbody>
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</tbody>
</table>

Attach additional information on appropriately labeled continuation sheets.

Schedule I Summary

1. Itemized increases to cash this period. .......................................................... $ 0.00
2. Unitemized increases to cash of under $100 this period. ................................ $ 0.07
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.) ........................................... TOTAL $ 0.07

FPPC Form 460 (Jan/2016)
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www.fppc.ca.gov
Additional Comments
For Form 460

NAME OF FILER
Newport Beach Firefighters Association PAC

Schedule A: Newport Beach Firefighters Association, 100 Civic Center Drive, Newport Beach, CA 92660, is the intermediary for all contributions.