### Statement covers period
from ___09/23/2018___
through ___10/20/2018___

### Date of election if applicable:
(Month, Day, Year)
___11/06/2018___

---

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

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

### 3. Committee Information

<table>
<thead>
<tr>
<th>COMMITTEE NAME (OR CANDIDATE’S NAME IF NO COMMITTEE)</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon for City Council 2018</td>
<td>1362246</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>STREET ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Santa Ana</td>
<td>CA</td>
<td>92704</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>OPTIONAL: FAX / E-MAIL ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td><a href="mailto:lysaray.campaignservices@gmail.com">lysaray.campaignservices@gmail.com</a></td>
</tr>
</tbody>
</table>

### 4. Verification

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

Executed on ___10/21/2018___
By __________________________
Signature of Treasurer or Assistant Treasurer

Executed on ___10/21/2018___
By __________________________
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By __________________________
Signature of Controlling Officeholder, Candidate, State Measure Proponent

By __________________________
Signature of Controlling Officeholder, Candidate, State Measure Proponent
5. Officeholder or Candidate Controlled Committee

<table>
<thead>
<tr>
<th>NAME OF OFFICEHOLDER OR CANDIDATE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon</td>
<td></td>
</tr>
<tr>
<td>OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)</td>
<td></td>
</tr>
<tr>
<td>City Council Member: Newport Beach District 1</td>
<td></td>
</tr>
<tr>
<td>RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)</td>
<td>CITY</td>
</tr>
<tr>
<td>Newport Beach</td>
<td>CA</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>COMMITTEE NAME</th>
<th>I.D. NUMBER</th>
<th>CONTROLLED COMMITTEE?</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NAME OF TREASURER</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>COMMITTEE ADDRESS</td>
<td>STREET ADDRESS (NO P.O. BOX)</td>
<td>CITY</td>
<td>STATE</td>
</tr>
</tbody>
</table>

6. Primarily Formed Ballot Measure Committee

<table>
<thead>
<tr>
<th>NAME OF BALLOT MEASURE</th>
<th>BALLOT NO. OR LETTER</th>
<th>JURISDICTION</th>
<th>SUPPORT</th>
<th>OPPOSE</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify the controlling officeholder, candidate, or state measure proponent, if any.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT</td>
<td>OFFICE SOUGHT OR HELD</td>
<td>DISTRICT NO. IF ANY</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

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

*Attach continuation sheets if necessary*
## Contributions Received

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monetary Contributions</td>
<td>$6,350.00</td>
<td>$60,197.00</td>
</tr>
<tr>
<td>Loans Received</td>
<td>$0.00</td>
<td>$15,000.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH CONTRIBUTIONS</td>
<td>$6,350.00</td>
<td>$75,197.00</td>
</tr>
<tr>
<td>Nonmonetary Contributions</td>
<td>$0.00</td>
<td>$3,372.77</td>
</tr>
<tr>
<td>TOTAL CONTRIBUTIONS RECEIVED</td>
<td>$6,350.00</td>
<td>$78,569.77</td>
</tr>
</tbody>
</table>

## Expenditures Made

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payments Made</td>
<td>$6,098.80</td>
<td>$38,431.57</td>
</tr>
<tr>
<td>Loans Made</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>SUBTOTAL CASH PAYMENTS</td>
<td>$6,098.80</td>
<td>$38,431.57</td>
</tr>
<tr>
<td>Accrued Expenses (Unpaid Bills)</td>
<td>$5,000.00</td>
<td>$6,667.30</td>
</tr>
<tr>
<td>Nonmonetary Adjustment</td>
<td>$0.00</td>
<td>$3,372.77</td>
</tr>
<tr>
<td>TOTAL EXPENDITURES MADE</td>
<td>$11,098.80</td>
<td>$48,471.64</td>
</tr>
</tbody>
</table>

## Current Cash Statement

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beginning Cash Balance</td>
<td>$65,287.87</td>
<td></td>
</tr>
<tr>
<td>Cash Receipts</td>
<td>$6,350.00</td>
<td></td>
</tr>
<tr>
<td>Miscellaneous Increases to Cash</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>Cash Payments</td>
<td>$6,098.80</td>
<td></td>
</tr>
<tr>
<td>ENDING CASH BALANCE</td>
<td>$65,539.07</td>
<td></td>
</tr>
</tbody>
</table>

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

## Cash Equivalents and Outstanding Debts

<table>
<thead>
<tr>
<th>Description</th>
<th>Column A</th>
<th>Column B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash Equivalents</td>
<td>$0.00</td>
<td></td>
</tr>
<tr>
<td>Outstanding Debts</td>
<td>$21,667.30</td>
<td></td>
</tr>
</tbody>
</table>

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

- **Contributions Received**: $0.00 $0.00
- **Expenditures Made**: $0.00 $0.00

## Expenditure Limit Summary for State Candidates

<table>
<thead>
<tr>
<th>Description</th>
<th>Date of Election (mm/dd/yy)</th>
<th>Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cumulative Expenditures Made*</td>
<td>1/1 through 6/30</td>
<td>$0.00</td>
</tr>
<tr>
<td></td>
<td>7/1 to Date</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

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

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

1. Amount received this period – itemized monetary contributions.  
   (Include all Schedule A subtotals.) ................................................................. $ 6,300.00

2. Amount received this period – unitemized monetary contributions of less than $100 .............................. $ 50.00

3. Total monetary contributions received this period.  
   (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ......................... TOTAL $ 6,350.00
<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/13/2018</td>
<td>Fritz Duda</td>
<td>IND</td>
<td>Owner</td>
<td>1,000.00</td>
<td>1,000.00</td>
<td>1,000.00</td>
</tr>
<tr>
<td></td>
<td>Dallas, TX 75204</td>
<td></td>
<td>Fritz Duda Co</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/11/2018</td>
<td>Lincoln Club of Orange County (ID# 970861)</td>
<td>IND</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Irvine, CA 92618</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/19/2018</td>
<td>Hugh Logan</td>
<td>IND</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td>100.00</td>
</tr>
<tr>
<td></td>
<td>Newport Beach, CA 92660</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/11/2018</td>
<td>MHET PAC (ID# 820165)</td>
<td>IND</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Irvine, CA 92618</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/19/2018</td>
<td>Newport Mooring Assoc</td>
<td>IND</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Newport Beach, CA 92660</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**SUBTOTAL** $2,950.00

*Contributor Codes

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

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### Schedule A (Continuation Sheet)

**Monetary Contributions Received**

**Statement covers period**

<table>
<thead>
<tr>
<th>Amounts may be rounded to whole dollars.</th>
</tr>
</thead>
<tbody>
<tr>
<td>from 09/23/2018</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>I.D. NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon for City Council 2018</td>
<td>1362246</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>DATE RECEIVED</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/26/2018</td>
<td>Awin MGMT  Allied Waste Services Republic Services Phoenix, AZ  85054</td>
<td>□ IND</td>
<td></td>
<td>500.00</td>
<td>500.00</td>
<td>G2018  $500.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/11/2018</td>
<td>Tod Ridgeway Newport Beach, CA  92663</td>
<td>X IND</td>
<td>President Ridgeway Development</td>
<td>250.00</td>
<td>250.00</td>
<td>G2018  $250.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G2014  $500.00</td>
</tr>
<tr>
<td>10/13/2018</td>
<td>Penelope Rodheim Newport Beach, CA  92662</td>
<td>X IND</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td>G2018  $100.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>09/26/2018</td>
<td>John Sexton Pasadena, CA  91105</td>
<td>X IND</td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td>G2018  $100.00</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10/16/2018</td>
<td>Sam Sarkis Solakyan Sherman Oaks, CA  91403</td>
<td>X IND</td>
<td>CEO Global Holdings</td>
<td>-500.00</td>
<td>0.00</td>
<td>G2018  $0.00</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>G2014  $1,000.00</td>
</tr>
</tbody>
</table>

**SUBTOTAL**

| SUBTOTAL $ | 450.00 |

---

*Contributor Codes

IND – Individual
COM – Recipient Committee
(othd RY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

---

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

---

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</th>
<th>CONTRIBUTOR CODE *</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>AMOUNT RECEIVED THIS PERIOD</th>
<th>CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)</th>
<th>PER ELECTION TO DATE (IF REQUIRED)</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/10/2018</td>
<td>Surfer Building LLC Costa Mesa, CA 92626</td>
<td></td>
<td></td>
<td>500.00</td>
<td>500.00</td>
<td>G2018 $750.00</td>
</tr>
<tr>
<td>10/17/2018</td>
<td>The Crab Cooker Tustin, CA 92780</td>
<td></td>
<td></td>
<td>1,100.00</td>
<td>1,100.00</td>
<td>G2018 $1,100.00</td>
</tr>
<tr>
<td>09/25/2018</td>
<td>Judy Walker Miskanic Newport Beach, CA 92663</td>
<td></td>
<td>Retired</td>
<td>100.00</td>
<td>100.00</td>
<td>G2018 $100.00</td>
</tr>
<tr>
<td>09/24/2018</td>
<td>Peter Wells Newport Beach, CA 92663</td>
<td></td>
<td>Real Estate Consultant CBRE</td>
<td>100.00</td>
<td>100.00</td>
<td>G2018 $100.00</td>
</tr>
</tbody>
</table>

---

*Contributor Codes*

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

---

SUBTOTAL $1,800.00

---

Diane Dixon for City Council 2018

I.D. NUMBER 1362246

---

FPPC Form 460 (Jan/2016)
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---

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**Schedule B – Part 1**

**Loans Received**

Amounts may be rounded to whole dollars.

<table>
<thead>
<tr>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(b) AMOUNT RECEIVED THIS PERIOD</th>
<th>(c) AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(d) INTEREST PAID THIS PERIOD</th>
<th>(f) ORIGINAL AMOUNT OF LOAN</th>
<th>(g) CUMULATIVE CONTRIBUTIONS TO DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon</td>
<td>$6,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$6,000.00</td>
<td>0.00%</td>
<td>$6,000.00</td>
<td>12/19/2013</td>
</tr>
<tr>
<td></td>
<td>$5,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$5,000.00</td>
<td>0.00%</td>
<td>$5,000.00</td>
<td>02/06/2014</td>
</tr>
<tr>
<td></td>
<td>$2,000.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$2,000.00</td>
<td>0.00%</td>
<td>$2,000.00</td>
<td>07/29/2015</td>
</tr>
</tbody>
</table>

**Schedule B Summary**

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

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

3. Net change this period. (Subtract Line 2 from Line 1.) ...................... NET $ 0.00
   (May be a negative number)

   Enter the net here and on the Summary Page, Column A, Line 2.

*Amounts forgiven or paid by another party also must be reported on Schedule A.
** If required.
Schedule B – Part 1 (Continuation Sheet)

Loans Received

Amounts may be rounded to whole dollars.

Statement covers period from 09/23/2018 through 10/20/2018

CALIFORNIA FORM 460

Page 9 of 13

 أيضًا يجب أن يتم تقارير الأموال المرتفعة أو الفائضة من أطراف أخرى على شهادة A.

** If required.

---

<table>
<thead>
<tr>
<th>NAME OF FILER</th>
<th>FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER</th>
<th>IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</th>
<th>OUTSTANDING BALANCE BEGINNING THIS PERIOD</th>
<th>(a) AMOUNT RECEIVED THIS PERIOD</th>
<th>(b) AMOUNT PAID OR FORGIVEN THIS PERIOD</th>
<th>(c) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
<th>(d) INTEREST PAID THIS PERIOD</th>
<th>(e) ORIGINAL AMOUNT OF LOAN</th>
<th>(f) CUMULATIVE CONTRIBUTIONS TO DATE</th>
<th>(g) CALENDAR YEAR</th>
<th>(h) PER ELECTION**</th>
<th>(i) Date Incurred</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diane Dixon</td>
<td>Newport Beach, CA 92663</td>
<td>Owner, Diane Dixon Global Consultants</td>
<td>$500.00</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$500.00</td>
<td>0.00% Rate</td>
<td>$500.00</td>
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<td>CALENDAR YEAR</td>
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</tbody>
</table>

**IND – Individual
COM – Recipient Committee (other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee**
## Schedule E Payments Made

**NAME OF FILER**
Diane Dixon for City Council 2018

**Statement covers period**
from 09/23/2018
through 10/20/2018

**CALIFORNIA FORM 460**

### CODES:
- **QMP** 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
- **OFF** office expenses
- **PET** petition circulating
- **PHO** phone banks
- **POL** polling and survey research
- **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

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE</th>
<th>CODE</th>
<th>DESCRIPTION OF PAYMENT</th>
<th>AMOUNT PAID</th>
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<tr>
<td>Anedot</td>
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<tr>
<td>Baton Rouge, LA 70801</td>
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</tbody>
</table>

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

### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.) ................................................................. $ 6,098.80
2. Unitemized payments made this period of under $100 ................................................................. $ 0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) ................................................................. $ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .................. TOTAL $ 6,098.80
## Schedule E (Continuation Sheet)

### Payments Made

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

**Statement covers period**

from **09/23/2018**

through **10/20/2018**

---

**NAME OF FILER**

Diane Dixon for City Council 2018

---

### CODES:

- **CMP**: campaign paraphernalia/misc.
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- **VOT**: voter registration
- **WEB**: information technology costs (internet, e-mail)

---

**NAME AND ADDRESS OF PAYEE**

(If committee, also enter I.D. number) | **CODE** | **DESCRIPTION OF PAYMENT** | **AMOUNT PAID**
--- | --- | --- | ---
Chase Card | CMP | **324.50**
Palatine, IL 60094 |  
Delta Partners | CNS | **5,500.00**
Newport Beach, CA 92660 |  
Lysa Ray Campaign Services | PRO | **250.00**
Santa Ana, CA 92704 |  
---

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

**SUBTOTAL $** 6,074.50
## Schedule F
### Accrued Expenses (Unpaid Bills)

**Statement covers period from** 09/23/2018 **through** 10/20/2018

### 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)*
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- **FIL**: candidate filing/ballot fees
- **FND**: fundraising events
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- **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
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- **TSF**: transfer between committees of the same candidate/sponsor
- **VOT**: voter registration
- **WEB**: information technology costs (internet, e-mail)

### NAME AND ADDRESS OF CREDITOR

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE OR DESCRIPTION OF PAYMENT</th>
<th>(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD</th>
<th>(b) AMOUNT INCURRED THIS PERIOD</th>
<th>(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)</th>
<th>(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD</th>
</tr>
</thead>
</table>
| Bell McAndrews & Hiltachk  
Sacramento, CA  95814 | PRO                             | 1,667.30                                      | 0.00                            | 0.00                                          | 1,667.30                                      |
| Delta Partners  
Newport Beach, CA  92660 | CNS                             | 0.00                                          | 5,000.00                        | 0.00                                          | 5,000.00                                      |

### Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of $100 or more, plus total unitemized accrued expenses under $100.) .......................................................... **INCURRED TOTALS $** 5,000.00

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of $100 or more, plus total unitemized payments on accrued expenses under $100.) .............................................. **PAID TOTALS $** 0.00

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ............................................................................................................................................. **NET $** 5,000.00

* May be a negative number

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

---

**NAME OF FILER**

Diane Dixon for City Council 2018

**NAME AND ADDRESS OF CREDITOR**

Bell McAndrews & Hiltachk  
Sacramento, CA  95814

Delta Partners  
Newport Beach, CA  92660

**CODES:**

- **CMP**: campaign paraphernalia/misc.
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**Statement covers period from** 09/23/2018 **through** 10/20/2018

**I.D. NUMBER**

1362246
Schedule G
Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

Statement covers period from 09/23/2018 through 10/20/2018

Page 13 of 13

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
Diane Dixon for City Council 2018

NAME OF AGENT OR INDEPENDENT CONTRACTOR
Chase Card

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

- CMP campaign paraphernalia/misc.
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- CTB contribution (explain nonmonetary)*
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- 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.

<table>
<thead>
<tr>
<th>NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)</th>
<th>CODE</th>
<th>OR</th>
<th>DESCRIPTION OF PAYMENT</th>
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Attach additional information on appropriately labeled continuation sheets.

TOTAL* $ 294.50

* 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.

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