Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in i	nk.	Date Stamp RECEIVED CITY OF GARDEN (CITY CLERK'S OF FICE Page / Of JO				
SEE INSTRUCTIONS ON REVERSE	from	Date of election if applicable: (Month, Day, Year)	2014 JUL 28 A 7: 36 of 10				
1. Type of Recipient Committee: All Committees – Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee	Complete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te					
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	CODE AREA CODE/PHONE 7/4-813-0752	Treasurer(s) NAME OF TREASURER MAILING ADDRESS CITY NAME OF ASSISTANT TREASURE MAILING ADDRESS CITY OPTIONAL: FAX / E-MAIL ADDRESS	STATE ZIP CODE AREA CODE/PHONE				
4. Verification I have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califor Executed on	nia that the foregoing is true and correct. By	wledge the information contained her Signature of Treasurer or Assistant Trolling Officeholder, Candidate, State Measure Pro	ponenter Responsible Officer of Sponsor				

Executed on _____

Recipient Committee Campaign Statement Cover Page — Part 2

	COVER	PAG	E-PART 2
	FORNIA ORM	4	160
Page _	2	of _	16

5. Officeholder or Candidate Controlled Commi	ttee	6.	Primarily Formed Ballot	Measure Comm	ittee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT Council Member	Γ NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION		SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CIT	FY STATE ZIP			L		
11542 Montdair Dr	ive GG. CA92841	1	Identify the controlling offic			e proponent, if any.
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PROPONEN	Γ	
Related Committees Not Included in this State not included in this statement that are controlled by you of contributions or make expenditures on behalf of your cand	r are primarily formed to receive		OFFICE SOUGHT OR HELD	***************************************	DISTRICT N	O. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand officeholder(s) or candidate(s)			
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO			NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELI	SUPPORT OPPOSE
CITY STATE ZIP CC	DDE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELI	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELI	SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BO.	CONTROLLED COMMITTEE? YES NO X)		NAME OF OFFICEHOLDER OR CA	NDIDATE OFFICE	SOUGHT OR HELD	SUPPORT OPPOSE
CITY STATE ZIP CC			Attach	continuation sheet	s if necessary	1

Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE Statement covers period **CALIFORNIA** FORM I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Triends of Stere Junes Sur Gurda 300173 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 500.00 1. Monetary Contributions Schedule A, Line 3 1/1 through 6/30 7/1 to Date 2500.00 20. Contributions SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 Received 21. Expenditures 00,00 2500,00 Made 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made Schedule E, Line 4 Candidates 22. Cumulative Expenditures Made* SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date (mm/dd/yy) 10. Nonmonetary Adjustment Schedule C. Line 3 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 To calculate Column B. add amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts from Column B of your last reported in Column B. report. Some amounts in Column A may be negative figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed Ø for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 18. Cash Equivalents See instructions on reverse 19. Outstanding Debts Add Line 2 + Line 9 in Column B above 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.

SCHEDULE A

Statement covers period

y		10 /	whole dollars.		2014	FOR	RM	46U
SEE INSTRUCTIO	NS ON REVERSE			through 6130	0/14	Page	4_ of _	10
NAME OF FILER	ds of Steve Jones for Gara	dan Gra	re City Council	2012		1.D. NUM 130	BER 2017	3
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 CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELEC TO DA (IF REQU	TE
2/6/14	Lynn Capouyainc 2995 Airway Are Costanesa, CA 92626	□IND □COM □OTH □PTY □SCC		#250.00				
2/6/14	Yellow Cab of Greater OC (Keolis) 1619 E. Lincoln Anaheim, CA 92805	□IND □COM □OTH □PTY □SCC		#250°				
2/6/14	Intrudek Conputer 5431 Industrial Dra Huntington Beach, CA 97649	□IND □COM □OTH □PTY □SCC		\$250°T				
216/14	Simon Wong Engineering 1862 Mac Arthur Blva Suite 20 Lovine CA 92612	□IND □COM ☑OTH □PTY □SCC		\$250°°				
2/6/14	AKM Consulting Engineers 553 Wald Frvine, CA 92618	□IND □COM □OTH □PTY □SCC		2500				
	,		SUBTOTAL\$	125000		n series		
1. Amount red	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.)		\$	2500.00	IND-		des Committee an PTY or S	
3 Total monet	ceived this period – unitemized monetary contributions tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colur			OTH – Other (e.g., I PTY – Political Party SCC – Small Contrib			g., business arty	s entity)

Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

1250 or

SUBTOTAL\$

		to whole d	ioliars.	from6/32	4	F	ORM 460
				through	2119	Page_	5 of 10
Friend	s of Steve Jones for Gargle	boorere	City Corneil 21	OIZ		1.D. NU	MBER 300173
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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
2/6/14	Arcadis 3240 El Comino Real Suite 200 Irvin, CA 92602	□IND □COM □OTH □PTY □SCC		# 250°			
2/6/14	A-Z Bus Sales 1900 S. Riverside Are Colton, CA 92324	□IND □COM ☑OTH □PTY □SCC		25000			
2/10/14	Gristin Strutures 385 2nd St. Layuna Beach, CA 92651	□IND □COM □OTH □PTY □SCC		\$25800		v	
2/12/14	17992 Mitchell South 17992 Mitchell South Irvine, CA 9 2614	□IND □COM □OTH □PTY □SCC		\$ 250°°			
5/26/14	Cofironde USA 38 Discorry Suide 750	□IND □COM □OTH □PTY		*250°°			

*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

Schedule E **Payments Made**

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

Statement covers period **CALIFORNIA FORM** I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

riends of Steve Jores for Garden Grave City Council 2012

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

candidate filing/ballot fees FIL

FND fundraising events

independent expenditure supporting/opposing others (explain)*

LEG legal defense

campaign literature and mailings

member communications

meetings and appearances

office expenses

petition circulating phone banks PHO

polling and survey research postage, delivery and messenger services

professional services (legal, accounting)

print ads PRT

RAD radio airtime and production costs

returned contributions

SAL campaign workers' salaries

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)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Louies on Main 12942 main St GG CA	mB	Lenneh	22,57
Purty Rental Studio. com 420 N. metanley St Sui Coma, CA 92879	WEB	Website	10,00
Bridged Chatean 9100 Trask Are GG CA 92840	MTG	Lunch	41.00

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

SUBTOTAL\$

Schedule	E Summary
----------	------------------

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$.	171.22	1996.79
2. Unitemized payments made this period of under \$100	\$.	Ø	
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$.	Ø	
 Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) 	AL \$.	1191.22	1496,79

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

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Steve Junes for Giarden Grove City

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 candidate filing/ballot fees FIL **FND**

fundraising events independent expenditure supporting/opposing others (explain)* IND **LEG** legal defense

campaign literature and mailings

MBR member communications meetings and appearances office expenses petition circulating

PHO phone banks polling and survey research POL postage, delivery and messenger services professional services (legal, accounting) PRT print ads

SAL campaign workers' salaries TEL t.v. or cable airtime and production costs candidate travel, lodging, and meals TRC TRS staff/spouse travel, lodging, and meals TSF

returned contributions

RAD radio airtime and production costs

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)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Seaford Paradise 8602 Westminster Blud Westminster, CA 92683	MTG	Dinner	160.00
Starbucks 691. S Main Street Orange, CA	MTG	· Lunch/Coffee	9.65
Party rentalstudio. com 420 W. McKinly St. Corona, CA 92879	WEB	Website	\$1000
Party rental Studio. com 420 w. mcking st Corona, ct 92879	WEB	Website	10 or
Brodard Chatean. 9100 Trusk And Garden Grane, CA 92880	MTG	Lunch	37.00

 $[^]st$ Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SUBTOTAL \$

IND

LEG

legal defense

campaign literature and mailings

independent expenditure supporting/opposing others (explain)*

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

0011	FDI	11	-	(CONT.)	
71.17	-111	I -	-	(1 1/11 1)	

Statement covers period

staff/spouse travel, lodging, and meals

information technology costs (internet, e-mail)

transfer between committees of the same candidate/sponsor

TRS

TSF

WEB

VOT voter registration

CALIFORNIA FORM SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER -riends of Steve Jures for Garden Grove City Council 2012 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations petition circulating PET TEL t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals TRC fundraising events

postage, delivery and messenger services

professional services (legal, accounting)

polling and survey research

PRT

print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	- CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Minis Cafe 5 7955 Garden Grove Garden Grove, CA 92840	MTG	Lunch	36 <u>or</u>
Hilton Hotels Water front 21100 PCH HB, CA 92649	MIG	Dinner.	1060
Brodord Chateau 9100 mst Arc Gordenson, Ca 92840	MTG	Lunch	5000
Living Springs Christian Fellowship	CVC	Contribution	500°
Kreetiv 420 Norckinley Corona, CA 92879	WEB	Website	1000

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

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

					CO		

Statement covers period **CALIFORNIA FORM** I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Friends of Steve Junes for Garden Grove City Council 2012 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating t.v. or cable airtime and production costs candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services **TSF** transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings print ads WEB information technology costs (internet, e-mail)

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
The Red Pot		. 1	/ 5-
121/9 BrookhushSt	MTG	Lunch	6200
Brodard Chafean			
9100 Trask Are	MTC	Lunch	5700
Godan Grove, CA 92840	•	3	
Kreetiv 2120 r. mekinly	WEB	1 labela	1000
Corona, CA 92879		Website	10-
Original Mikes	6	Λ,	100
100 S. Main St	MTG	Unner	60
Santa And CA 92701			
L»			

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

SUBTOTAL \$

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

Statement covers period from 11114 FORM 460

through 6/30/14 Page 10 of 10

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Line Also & Street Street Graden Grove City Corneil 2012

1300

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalia/misc. **MBR** member communications RAD radio airtime and production costs campaign consultants CNS meetings and appearances returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals **FND** fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services transfer between committees of the same candidate/sponsor legal defense LEG **PRO** professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT WEB information technology costs (internet, e-mail) print ads NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE OR AMOUNT PAID **DESCRIPTION OF PAYMENT** Inch MIG anton CA 97.844

11000 Gorden Grove CMP Donks 147.57 Gorden Grove CA 92840 LLS E Findraising 1311 Manamede Are 130 CTB 100.00

Kreeter 420 NMCLinhy Coma, Ct 92979

WEB Website
1000

SUBTOTAL \$ 305,57

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