

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

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 CITY OF GARDEN GROVE  
 CITY CLERK'S OFFICE  
 2014 OCT -6 P 12:50

CALIFORNIA 460  
 2001/02 FORM

Page 1 of 11  
 For Official Use Only

Date of election if applicable:  
 (Month, Day, Year)  
 11/04/2014

Statement covers period  
 from 07/01/2014  
 through 09/30/2014

SEE INSTRUCTIONS ON REVERSE

### 1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall (Also Complete Part 5)
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Ballot Measure Committee
- Primarily Formed
- 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
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Preelection Statement - Attach Form 495

### 3. Committee Information

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Broadwater for Mayor 2012

I.D. NUMBER  
1341631

### Treasurer(s)

NAME OF TREASURER

Bruce A. Broadwater

MAILING ADDRESS

12162 Brookhaven Park

CITY

Garden Grove

STATE CA

ZIP CODE 92840

AREA CODE/PHONE 714/636-6810

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

### 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.

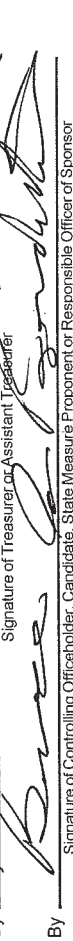
Executed on 10-5-14 Date

Executed on 10-5-14 Date

Executed on \_\_\_\_\_ Date

Executed on \_\_\_\_\_ Date

By  Signature of Treasurer or Assistant Treasurer

By  Signature of Controlling Officer/holder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By \_\_\_\_\_ Signature of Controlling Officer/holder, Candidate, State Measure Proponent

By \_\_\_\_\_ Signature of Controlling Officer/holder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

**CALIFORNIA  
FORM 460**

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**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE  
**Bruce A. Broadwater**  
 OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)  
**Garden Grove Mayor**  
 RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP  
**12162 Brookhaven Park Garden Grove Ca 92840**

**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? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE
COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE ZIP CODE AREA CODE/PHONE

**6. Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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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
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**7. Primarily Formed 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

# Campaign Disclosure Statement Summary Page

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

SUMMARY PAGE

CALIFORNIA  
FORM **460**

Statement covers period  
from 07/01/2014  
through 09/30/2014

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Broadwater for Mayor 2012

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I.D. NUMBER

1341631

## Contributions Received

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3 \$ 31,443.00	\$ 53,700.07
2. Loans Received ..... Schedule B, Line 3	
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2 \$ 31,443.00	\$ 53,700.07
4. Nonmonetary Contributions ..... Schedule C, Line 3	
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4 \$ 31,443.00	\$ 53,700.07

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
6. Payments Made ..... Schedule E, Line 4 \$ 17,956.87	\$ 22,119.36
7. Loans Made ..... Schedule H, Line 3	
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7 \$ 17,956.87	\$ 22,119.36
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	
10. Nonmonetary Adjustment ..... Schedule C, Line 3	
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10 \$ 17,956.87	\$ 22,119.36

## Expenditures Made

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
12. Beginning Cash Balance ..... Previous Summary Page, Line 16 \$ 36,486.53	
13. Cash Receipts ..... Column A, Line 3 above \$ 31,443.00	
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4 \$ 17,956.87	
15. Cash Payments ..... Column A, Line 8 above \$ 49,972.66	
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	

## Current Cash Statement

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2 \$	
18. Cash Equivalents ..... See instructions on reverse \$	
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above \$	

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

## Cash Equivalents and Outstanding Debts

Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
20. Contributions Received \$	
21. Expenditures Made \$	
22. Cumulative Expenditures Made* (If Subject to Voluntary Expenditure Limit)	

\*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

# Schedule A Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA **460**  
FORM

Statement covers period  
from 07/01/2014  
through 09/30/2014

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Broadwater for Mayor 2012

I.D. NUMBER

1341631

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)
07/08/2014	Omar Chohan SAC International Steel, Inc 6130 Avalon Blvd Los Angeles CA 90003	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,500.00		
07/08/2014	Southwest Regional Council of Carpenters Political Action Fund, ID #870169 533 S. Fremont Ave., Ste 501 Los Angeles CA 90071	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
07/11/2014	Care Ambulance Service, Inc. 1517 W. Braden Court Orange CA 92868	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
08/21/2014	Four Season Restaurant Group Inc 14281 Brookhurst St., Ste A Garden Grove CA 92843-4648	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
08/22/2014	The Map Sports Facility LLC 12552 Western Ave Garden Grove CA 92841-4013	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		5,000.00		
<b>SUBTOTAL \$</b>				<b>8,250.00</b>		

## Schedule A Summary

- Amount received this period - contributions of \$100 or more.  
(Include all Schedule A subtotals.) ..... \$ 30,750.00
- Amount received this period - unitemized contributions of less than \$100 ..... \$ 693.00
- Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) ..... **TOTAL \$** 31,443.00

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA **460**  
FORM

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NAME OF FILER

Broadwater for Mayor 2012

I.D. NUMBER

1341631

Statement covers period  
from 07/01/2014  
through 09/30/2014

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)
08/22/2014	Next Level Sports Complex LLC 12821 Knott St Garden Grove CA 92841-3941	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		2,000.00		
08/22/2014	Peninsula Hotel Management, LLC 10022 Garden Grove Blvd Garden Grove CA 92844	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
09/03/2014	Young Tae An 9902 Garden Grove Blvd. Garden Grove CA 9284	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Restaurant owner	200.00		
09/03/2014	Jin Oh Kim 12050 Chilli Pepper Ln Garden Grove CA 92840	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	300.00		
09/03/2014	Tae Soo Kim 2721 E. Snowfield St Brea CA 92821	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	100.00		
<b>SUBTOTAL \$</b>				<b>3,600.00</b>		

\*Contributor Codes

IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

Statement covers period  
from 07/01/2014  
through 09/30/2014

NAME OF FILER: Broadwater for Mayor 2012  
I.D. NUMBER: 1341631

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)
09/13/2014	John Chang 13113 Michael Monsoor Ct. Garden Grove CA 92843 5000.00	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	5,000.00		
09/12/2014	Hilton Garden Inn 11777 Harbor Blvd Garden Grove CA 92840 1000	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
09/12/2014	Hampton Inn & Suites 11747 Harbor Blvd Garden Grove CA 92840 1000	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
09/12/2014	Homewood Suites 12005 Harbor Blvd Garden Grove CA 92840 1000	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
08/27/2014	Global Partnership LLC 5300 Beach Blvd., Ste 110-505 Buena Park CA 90621 1000	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
<b>SUBTOTAL \$</b>				<b>9,000.00</b>		

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COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.  
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Statement covers period  
from 07/01/2014  
through 09/30/2014

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NAME OF FILER

I.D. NUMBER

Broadwater for Mayor 2012

1341631

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)
08/27/2014	Crown Investment Realty 13043 Magnolia St Garden Grove CA 92844	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
09/12/2014	Raymond Choi 13425 Beachnutt Court La Mirada CA 90638	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Hotel Operator	200.00		
09/03/2014	Biztech Inc 159 W. Orangethorpe Ave., Ste A Placentia CA 92870-6901	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
09/04/2014	Steve Sukdae Kwon 16642 Mt. Baxter Cir Fountain Valley CA 92708	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	200.00		
08/28/2014	Jong Sik Chi 9580 Garden Grove Blvd. #300 Garden Grove CA 92844	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	A. R. Market	500.00		
<b>SUBTOTAL \$</b>				<b>1,100.00</b>		

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee

# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

CALIFORNIA  
FORM **460**

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Statement covers period  
from 07/01/2014  
through 09/30/2014

NAME OF FILER  
Broadwater for Mayor 2012  
I.D. NUMBER  
1341631

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)	PERELECTION TO DATE (IF REQUIRED)
09/01/2014	DMB Group Inc dba Korea House Restaurant 12118 Brookhurst St Garden Grove CA 92840 +	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00		
09/03/2014	Dr. Frank Yoo 24362 Chrisanta Dr. Mission Viejo CA 92691 +	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor	100.00		
09/12/2014	David Schaefer 5742 Tuscany Lane Wauunakee WI 53597 +	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	1,000.00		
09/17/2014	McWhinney Real Estate Services, Inc. 2725 Rocky Mountain Ave., Ste 200 Loveland CO 80538	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
09/17/2014	McWhinney Holding Company LLLP 2725 Rocky Mountain Ave., Ste 200 Loveland CO 80538 +	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
<b>SUBTOTAL \$</b>				<b>3,300.00</b>		

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
OTH - Other  
PTY - Political Party  
SCC - Small Contributor Committee



# Schedule A (Continuation Sheet) Monetary Contributions Received

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

SCHEDULE A (CONT.)

Statement covers period  
from 07/01/2014  
through 09/30/2014

**CALIFORNIA**  
**FORM** **460**

Page 9 of 11

NAME OF FILER  
**Broadwater for Mayor 2012**  
I.D. NUMBER  
**1341631**

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)
09/17/2014	GWGG, LLC 2725 Rocky Mountain Ave., Ste 200 Loveland CO 80538	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		4,000.00		
09/19/2014	Mok Kim Properties 9944 Garden Grove Blvd Garden Grove CA 92844	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
09/26/2014	Ohl Resort Hotels, LLC 12021 Harbor Blvd., Garden Grove CA 92840	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL \$ 5,500.00**

\*Contributor Codes  
IND - Individual  
COM - Recipient Committee  
(other than PTY or SCC)  
OTH - Other  
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SCC - Small Contributor Committee

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Statement covers period  
from 07/01/2014  
through 09/30/2014  
Page 10 of 11  
I.D. NUMBER  
1341631

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER  
Broadwater for Mayor 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  | MTG | meetings and appearances                  | RFD | returned contributions                                    |
| CTB | contribution (explain nonmonetary)*                           | OFC | office expenses                           | SAL | campaign workers' salaries                                |
| CVC | civic donations   | PET | petition circulating                      | TEL | t.v. or cable airtime and production costs                |
| FIL | candidate filing/ballot fees                                  | PHO | phone banks                               | TRC | candidate travel, lodging, and meals                      |
| FND | fundraising events  | POL | polling and survey research               | TRS | staff/spouse travel, lodging, and meals                   |
| IND | independent expenditure supporting/opposing others (explain)* | POS | postage, delivery and messenger services  | TSF | transfer between committees of the same candidate/sponsor |
| LEG | legal defense   | PRO | professional services (legal, accounting) | VOT | voter registration  |
| LIT | campaign literature and mailings                              | PRT | 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
Pattie Limon 600 W. Santa Ana Blvd., #814 Santa Ana CA 92701	PRO			300.00
City of Garden Grove 11222 Acacia Parkway Garden Grove CA 92842	TRC			2,170.00
Freeman Public Affairs 1405 Marcelina Ave. Torrance CA 90501	CMP			3,742.50
			<b>SUBTOTAL \$</b>	<b>6,212.50</b>

**Schedule E Summary**

- Payments made this period of \$100 or more. (Include all Schedule E subtotals.) ..... \$ 17,326.55
- Unitemized payments made this period of under \$100 ..... \$ 630.32
- 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.) ..... **TOTAL \$ 17,956.87**

**Schedule E  
(Continuation Sheet)  
Payments Made**

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

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

I.D. NUMBER  
1341631

Broadwater for Mayor 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
- 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)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Preston Broadwater 5520 Pablo Rd. Yorba Linda CA 92887	SAL			100.00
Costco 11000 Garden Grove Blvd. Garden Grove CA 92843	OFC			199.05
DeSnoo & DeSnoo 9971 Briley Way Villa Park CA 92861	LIT			10,500.00
Matthew Ansio dba Fix It Computer Garden Grove CA 92843	OFC			315.00

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

**SUBTOTAL \$ 11,114.05**