

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

RECEIVED
CITY OF GARDEN GROVE
CITY CLERK'S OFFICE

CALIFORNIA
FORM
460

COVER PAGE

SEE INSTRUCTIONS ON REVERSE

Statement covers period from 10/01/08 through 10/18/08	Date of election if applicable: (Month, Day, Year) 2008 Oct 23 P 2:41 11/04/08	Page 1 of 18 For Official Use Only
--	--	---------------------------------------

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
- Sponsor
- Small Contributor Committee
- Political Party/Central Committee
- Primarily Formed Candidate/Officeholder Committee
- (Also Complete Part 6)

2. Type of Statement:

- 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

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

Friends of Steve Jones for Garden Grove City Council

I.D. NUMBER
1300173

Treasurer(s)

NAME OF TREASURER

Patricia Limon

MAILING ADDRESS

600 W. Santa Ana Blvd., #900

CITY

Santa Ana,

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY

STATE

ZIP CODE

AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

STREET ADDRESS (NO P.O. BOX)

11542 Montclair Drive

CITY

STATE

ZIP CODE

AREA CODE/PHONE

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

Garden Grove

CA

92841

714/537-9299

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 10-23-08
Date
Executed on 10-23-08
Date
Executed on _____
Date
Executed on _____
Date

By Patricia Limon
Signature of Treasurer or Assistant Treasurer
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

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

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Steve Jones
 OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
Council Member
 RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
11542 Monclair Garden Grove CA 92841

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. Primarily Formed Ballot Measure Committee

NAME OF BALLOT MEASURE
 BALLOT NO. OR LETTER JURISDICTION SUPPORT OPOSE
 Identify the controlling officeholder, candidate, or state measure proponent, if any.
 NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT
 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	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPOSE

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

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends of Steve Jones

Statement covers period
from 10/01/08 through 10/18/08
Page 3 of 18
I.D. NUMBER
1300173

Contributions Received

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions	Schedule A, Line 3 \$ 23,897.00	\$ 69,968.33
2. Loans Received	Schedule B, Line 3 \$ 23,897.00	\$ 5,000.00
3. SUBTOTAL CASH CONTRIBUTIONS	Add Lines 1 + 2 \$ 2,724.89	\$ 74,968.33
4. Nonmonetary Contributions	Schedule C, Line 3 \$ 26,621.89	\$ 2,724.89
5. TOTAL CONTRIBUTIONS RECEIVED	Add Lines 3 + 4 \$ 26,621.89	\$ 77,693.22

Expenditures Made

6. Payments Made	Schedule E, Line 4 \$ 26,237.55	\$ 63,106.73
7. Loans Made	Schedule H, Line 3 \$ 26,237.55	\$ 63,106.73
8. SUBTOTAL CASH PAYMENTS	Add Lines 6 + 7 \$ 2,724.89	\$ 2,724.89
9. Accrued Expenses (Unpaid Bills)	Schedule F, Line 3 \$ 28,962.44	\$ 65,831.62
10. Nonmonetary Adjustment	Schedule G, Line 3 \$ 28,962.44	\$ 65,831.62
11. TOTAL EXPENDITURES MADE	Add Lines 8 + 9 + 10 \$ 28,962.44	\$ 65,831.62

Current Cash Statement

12. Beginning Cash Balance	Previous Summary Page, Line 16 \$ 14,202.15
13. Cash Receipts	Column A, Line 3 above \$ 23,897.00
14. Miscellaneous Increases to Cash	Schedule I, Line 4 \$ 26,237.55
15. Cash Payments	Column A, Line 8 above \$ 11,861.60
16. ENDING CASH BALANCE	Add Lines 12 + 13 + 14, then subtract Line 15 \$ 11,861.60

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

Cash Equivalents and Outstanding Debts

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 \$

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

20. Contributions Received	1/1 through 6/30 \$	7/1 to Date \$
21. Expenditures Made	\$	\$

Expenditure Limit Summary for State Candidates

22. Cumulative Expenditures Made* (if subject to Voluntary Expenditure Limit)	Total to Date \$
Date of Election (mm/dd/yy)	\$

*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
Monetary Contributions Received

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

SCHEDULE A

CALIFORNIA
FORM
460

Statement covers period
from 10/1/08
through 10/18/08

Page 4 of 18

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Steve Jones

I.D. NUMBER
1300173

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 (# SELF-EMPLOYED, ENTER NAME OR BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/01/08	Care Ambulance 1517 W. Braden Court Orange, CA 92868	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
10/01/08	LMC Management Group LLC 131 Innovation, Suite 150 Irvine, CA 92817	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
10/01/08	Garden Grove Police Association Public Affairs Committee 11432 Kearney Way, Garden Grove, CA 92640	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
10/01/08	Michael Kemp 2366 Rossmore Rd. Los Angeles, CA 90077	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect Mak Architecture	100.00		
10/01/08	Tom Quach 8362 Sandalwood Cir. Westminster, CA 92683	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Management LQNN, Inc.	500.00		
SUBTOTAL \$				2,850.00		

Schedule A Summary

- Amount received this period - itemized monetary contributions:
(Include all Schedule A subtotals.) \$ 23,450.00
- Amount received this period - unitemized monetary contributions of less than \$100 \$ 447.00
- Total monetary contributions received this period:
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 23,897.00

*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

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 10/1/08
through 10/18/08

CALIFORNIA
FORM **460**

Page 5 of 18

NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/01/08	Wayne Yan 8822 Orrey Westminster, CA 92683	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor R.E. Listings, Inc.	200.00		
10/01/08	Tina Nguyen 8822 Orrey Westminster, CA 92683	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Realtor R.E. Listings, Inc.	200.00		
10/01/08	S. A. Heri, Inc. 2125 E. Katella Ave., Ste 100 Anaheim, CA 92806	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
10/01/08	Joe Hammer 6371 Doig Dr Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner California Relocation, Inc	200.00		
10/01/08	David Prasifka 199 S. Robles Ave #530 Pasadena, CA 91101	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Engineer Carollo Engineers	250.00		
SUBTOTAL \$				1,100.00		

*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

Schedule A (Continuation Sheet) Monetary Contributions Received

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

Statement covers period
from 10/1/08
through 10/18/08

CALIFORNIA
FORM
460
Page 6 of 18

SCHEDULE A (CONT.)

NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/01/08	Sheldon Singer 12672 Kona Lane Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired	200.00		
10/01/08	Chuck Fry 19800 MacArthur #1150 Irvine, CA 92612	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Affordable Housing Vista Communities	250.00		
10/01/08	Kathryn Buchoz 11602 Town and Country Dr. Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Manager Bridgescreek	100.00		
10/01/08	James Boyce M.D. 12665 Garden Grove Blvd #401 Garden Grove, CA 92843	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	physician	100.00		
10/01/08	Advanced Beauty College 10121 Westminster Garden Grove, CA 92843	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
SUBTOTAL \$				750.00		

*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

**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 10/1/08
through 10/18/08

CALIFORNIA
FORM **460**

Page 7 of 18

NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE ALSO ENTERED, ID NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/01/08	Alwin Lee 16509 Brookhurst 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	Broker Help-U-Sell	500.00		
10/01/08	Dale Apartments LLC 16509 Brookhurst Fountain Valley, CA 92708	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
10/01/08	Help-U-Sell 16509 Brookhurst Fountain Valley, CA 92708	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
10/01/08	Chesssen & Associates, Inc. 3420-3A Calle Azul Laguna Woods, CA 92637	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00		
10/01/08	Q-Strategies Inc 43 Linhaven Irvine, CA 92602	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
SUBTOTAL \$				1,800.00		

*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

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

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

Statement covers period
from 10/1/08
through 10/18/08

CALIFORNIA
FORM **460**

Page 8 of 18

NAME OF FILER: Friends of Steve Jones
I.D. NUMBER: 1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/01/08	Heritage Grove Partners LLC 16509 Brookhurst Ste A Fountain Valley, CA 92708	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		200.00		
10/01/08	Expertow, Inc. 8341 Monroe Ave Stanton, CA 90680	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
10/01/08	Greenfield Sport Parks 2004 Yale St., Unit F Santa Ana, CA 92704	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/01/08	Robert Kim 940 S. Bucknell Cir Anaheim, CA 92807	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Dev Hanover Pacific	250.00		
10/01/08	Republic Waste Services 1131 N. Blue Gum St. Anaheim, CA 92815	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
SUBTOTAL \$				1,800.00		

*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

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 10/1/08
 through 10/18/08

CALIFORNIA
 FORM **460**

Page 9 of 18

NAME OF FILER
 Friends of Steve Jones

I.D. NUMBER
 1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE ALSO ENTER ID. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/02/08	Encon Commercial 12145 Mora Dr. 7 Santa Fe Springs, CA 90670	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/02/08	Matthew Christenan 1130 Pescador Dr. Newport Beach, CA 92660	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Dev United Inv. LLC	500.00		
10/02/08	Kodash, Inc. 3625 Del Amo Blvd., Ste 130 Torrance, CA 90503	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/02/08	Thaisan Financial Corp. 8361 Westminster Westminster, CA 92683	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
10/02/08	Medconsult Practice Mangment, Inc. 16024 La Lindura Dr. Whittier, CA 920603	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
SUBTOTAL \$				1,950.00		

*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

Schedule A (Continuation Sheet) Monetary Contributions Received

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

Statement covers period
from 10/01/08
through 10/18/08

CALIFORNIA
FORM **460**

Page 11 of 18

NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER ID NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/02/08	Caldwell's Auto Body & Towing 1519 N Fairview Street Santa Ana CA 92706	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/03/08	Core Santa Ana, LLC 1800 Century Park East, Suite 600 Los Angeles, CA 90067	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,000.00		
10/03/08	Widdicombe Enterprises, Inc. 10900 Katella Ave Anaheim, CA 92804	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/03/08	Roderic Stoddard 4333 E. 2nd St. Long Beach, CA 90803	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Christian Sound Services	100.00		
10/03/08	Anthony's Body Shop Inc 10242 Garden Grove Blvd Garden Grove, CA 92843	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		250.00		
SUBTOTAL \$				1,550.00		

*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

**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 10/01/08
through 10/18/08

CALIFORNIA
FORM
460

Page 12 of 18

NAME OF FILER: Friends of Steve Jones
I.D. NUMBER: 1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/03/08	Grand Motors, Inc 9841 Garden Grove Blvd 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		250.00		
10/03/08	Kumar S. Raja, M.D. 17822 Beach Blvd, Suite 321 Huntington Beach, CA 92647	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
10/03/08	Tony Lam, 9741 Bolisa Ave. #201 Westminster, CA 92683	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self-employed CPA	500.00		
10/03/08	Orange County Auto Dealers Assoc Pac 125 Baker St. East Suite 262 Costa Mesa, CA 92626	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
10/03/08	Cleanstreet Inc. 1937 W. 139th St. Gardena, CA 90247	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		100.00		
SUBTOTAL \$				1,450.00		

*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

Schedule A (Continuation Sheet)
Monetary Contributions Received

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

Statement covers period
 from 10/01/08
 through 10/18/08

SCHEDULE A (CONT)
CALIFORNIA FORM 460
 Page 13 of 18

NAME OF FILER
 Friends of Steve Jones

I.D. NUMBER
 1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/03/08	Bizpac 2 Park Plaza #100 Irvine, CA 92614	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		500.00		
10/03/08	Peggy Hanshaw 9282 Royal Houshaw Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Housewife	1,000.00		
10/03/08	Paulo Kluber 1111 11 St. N.W., No. 310 Washington, DC 20001	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Salesman BRIC Business	100.00		
10/03/08	Mark Kelton 2716 Ocean Park Blvd., Ste 3006 Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Vice Pres. Cloverfield Mgmt LLC	150.00		
10/03/08	Richard Kelton 2716 Ocean Park Blvd., Ste 3006 Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Manager Cloverfield Mgmt, LLC	150.00		
SUBTOTAL \$				1,900.00		

*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

**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 10/01/08
through 10/18/08

CALIFORNIA
FORM
460

Page 14 of 18

NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE ALSO ENTER ID NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
10/12/08	David Kelton 2716 Ocean Park Blvd., Ste 3006 Santa Monica, CA 90405	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Property Manager Cloverfield Mgmt LLC	150.00		
10/15/08	Garden Grove Firefighters PAC 12866 Main 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		5,000.00		
10/15/08	Russell W. Graef 9411 Stanford Ave Garden Grove, CA 92841	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Doctor	250.00		
10/15/08	Shawn Boyd 4662 Katella Ave, Ste H Los Alamitos, CA 90720	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Real Estate Western Pacific Capital, Inc.	250.00		
10/15/08	Ronnie Lam 1095 Rosalind Rd San Marino, CA 91108	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Owner Kam Sang, Inc.	1,000.00		
SUBTOTAL \$				6,650.00		

*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

Schedule C Nonmonetary Contributions Received

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

Statement covers period
from 10/01/08
through 10/18/08

CALIFORNIA
FORM **460**

Page 15 of 18

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER

Friends of Steve Jones

I.D. NUMBER
1300173

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
10/01/08	Sheraton 1855 S. Harbor Bl., Anaheim, CA 92804	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Fundraiser	2,724.89		
SUBTOTAL \$					2,724.89		

Attach additional information on appropriately labeled continuation sheets.

Schedule C Summary

- Amount received this period - itemized nonmonetary contributions.
(Include all Schedule C subtotals.) \$ 2,724.89
- Amount received this period - unitemized nonmonetary contributions of less than \$100 \$
- Total nonmonetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.) **TOTAL \$ 2,724.89**

*Contributor Codes

IND - Individual
COM - Recipient Committee
OTH - Other than PTY or SCC
PTY - Other (e.g., business entity)
SCC - Small Contributor Committee

Schedule E Payments Made

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

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Friends of Steve Jones

Statement covers period from 10/01/08 through 10/18/08	CALIFORNIA FORM 460
Page 16 of 18	SCHEDULE E
I.D. NUMBER 1300-173	

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

- | | | | | | |
|-----|---|-----|---|-----|---|
| CMP | campaign paraphernalia/misc. | M/R | member communications | RAD | radio airtime and production costs |
| CNS | campaign consultants | MFG | meetings and appearances | RFD | returned contributions |
| CTB | contribution (explain nonmonetary)* | OFC | office expenses | SAL | campaign workers' salaries |
| CVC | civic donations | PEI | petition circulating | TEL | t.v. or cable airtime and production costs |
| FL | 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 |
| LT | 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
Office Depot 10801 Garden Grove Blvd Garden Grove, CA 92843	OFS			126.20
Lena Vo 12622 8th St. Garden Grove, CA 92840-5308	SAL			375.00
Patricia Limon 600 W. Santa Ana Blvd., #900 Santa Ana, CA 92701	PRO			500.00
SUBTOTAL \$				1,001.20

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

Schedule E Summary

- Itemized payments made this period. (Include all Schedule E subtotals.) \$ 26,237.55
- Unitemized payments made this period of under \$100 \$ _____
- 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 \$** 26,237.55

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

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

SCHEDULE E (CONT.)

CALIFORNIA
FORM
460

Statement covers period
from 10/01/08
through 10/18/08

Page 17 of 18

I.D. NUMBER
1300173

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends of Steve Jones

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
- FL 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
- PHD 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
- REF 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
COGS Lawn Signs 3309 S. Main St. Santa Ana, CA 92707	CMP			1,511.41
California Voter Guide 1954 W. Carson St., Ste B Torrance, CA 90501	LIT			3,875.00
DsSnoo & DeSnoo PO Box 11426 Santa Ana, CA 92711-1426	CNS			1,750.00
Garden Grove Post Office Stanford Avenue Garden Grove, CA 92842-9998	POS			2,323.00
Saigon West 12881 Knott St., Ste 105 Garden Grove, CA 92841	LIT			5,159.09

SUBTOTAL \$ 14,618.50

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

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

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

SCHEDULE E (CONT.)

Statement covers period
from 10/01/08
through 10/18/08

CALIFORNIA
FORM
460

Page 18 of 18

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends of Steve Jones

I.D. NUMBER
1300173

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

- | | | | | | |
|-----|---|------|---|-----|---|
| OWP | campaign paraphernalia/misc. | IMBR | 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 |
| FL | 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 | TSE | 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
COGS Lawn Signs 3309 S. Main St. Santa Ana, CA 92707	CMP			1,040.10
Shelly Castellano 7541 Danton Circle Huntington Beach, CA 92648	MTG			200.00
Home Depot 10801 Garden Grove Blvd Garden Grove, CA 92843	OFS			63.50
Ds\$noo & De\$noo PO Box 11426 Santa Ana, CA 92711-1426	LIT			9,314.25

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

SUBTOTAL \$ 10,617.85