

Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

Type or print in ink.

SEE INSTRUCTIONS ON REVERSE

Statement covers period
 from 10/01/2008
 through 10/18/2008

Date of election if applicable:
 (Month, Day, Year) 2008
11/04/2008

Date Stamp
RECEIVED
 CITY OF GARDEN GROVE
 CITY CLERK'S OFFICE
OCT 23 A 8:34

CALIFORNIA FORM 460
 Page 1 of 6
 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
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- 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 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 Paul Lucas 08

I.D. NUMBER
1298293

Treasurer(s)

NAME OF TREASURER
Kinde Durkee

MAILING ADDRESS
1212 S Victory Blvd

CITY Burbank STATE CA ZIP CODE 91502 AREA CODE/PHONE (818) 260-0669

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)
1212 S Victory Blvd

CITY Burbank STATE CA ZIP CODE 91502 AREA CODE/PHONE (818) 260-0669

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

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 10/21/2008
 Date

Executed on 10/21/2008
 Date

Executed on _____
 Date

Executed on _____
 Date

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

By Paul Lucas
 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**

Type or print in ink.

5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE
Paul Lucas

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)
City Council Member, City of Garden Grove, District: n/a

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP
PO Box 4036 Garden Grove CA 92842

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 | CONTROLLED COMMITTEE? |
|-------------------------------------|-------------|---|
| NAME OF TREASURER | | <input type="checkbox"/> YES <input type="checkbox"/> NO |
| COMMITTEE ADDRESS | | |
| 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 | | |
| CITY STATE ZIP CODE AREA CODE/PHONE | | |

6. 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 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.

Statement covers period from 10/01/2008 through 10/18/2008

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SUMMARY PAGE

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NAME OF FILER: Friends Of Paul Lucas 08

I.D. NUMBER: 1298293

Contributions Received

| | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL DATE |
|---------------------------------|--|---|
| 1. Monetary Contributions | \$ 1225.00 | \$ 6633.00 |
| 2. Loans Received | \$ 0.00 | \$ 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS | \$ 1225.00 | \$ 6633.00 |
| 4. Nonmonetary Contributions | \$ 0.00 | \$ 0.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED | \$ 1225.00 | \$ 6633.00 |

Expenditures Made

| | | |
|------------------------------------|-------------|------------|
| 6. Payments Made | \$ 1735.07 | \$ 6374.44 |
| 7. Loans Made | \$ 0.00 | \$ 0.00 |
| 8. SUBTOTAL CASH PAYMENTS | \$ 1735.07 | \$ 6374.44 |
| 9. Accrued Expenses (Unpaid Bills) | \$ -1735.07 | \$ 1702.16 |
| 10. Nonmonetary Adjustment | \$ 0.00 | \$ 0.00 |
| 11. TOTAL EXPENDITURES MADE | \$ 0.00 | \$ 8076.60 |

Current Cash Statement

| | | |
|-------------------------------------|------------|--|
| 12. Beginning Cash Balance | \$ 1172.57 | 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). |
| 13. Cash Receipts | \$ 1225.00 | |
| 14. Miscellaneous Increases to Cash | \$ 0.00 | |
| 15. Cash Payments | \$ 1735.07 | |
| 16. ENDING CASH BALANCE | \$ 662.50 | |

Cash Equivalents and Outstanding Debts

| | |
|------------------------------|------------|
| 17. LOAN GUARANTEES RECEIVED | \$ 0.00 |
| 18. Cash Equivalents | \$ 0.00 |
| 19. Outstanding Debts | \$ 1702.16 |

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) | Date of Election (mm/dd/yy) | Total to Date |
|--|--------------------------------|---------------|
| _____ | ____/____/____ | \$ _____ |
| _____ | ____/____/____ | \$ _____ |
| _____ | ____/____/____ | \$ _____ |
| _____ | ____/____/____ | \$ _____ |
| _____ | ____/____/____ | \$ _____ |

*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.

Statement covers period
from 10/01/2008
through 10/18/2008

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SCHEDULE A

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends Of Paul Lucas 08

I.D. NUMBER
1298293

| 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> |
|--------------------|--|---|--|-----------------------------|---|--|
| 10/09/2008 | DRIVE Committee (Fed) 25 Louisiana Av NW Washington DC 20001 C00032979 | <input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | | 1000.00 | 1000.00 | \$1000.00 G2008 |
| 10/03/2008 | Irene Ibarra 1402 N Olive St Santa Ana CA 92706 | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | Consultant Irene V Ibarra | 200.00 | 200.00 | \$200.00 G2008 |
| SUBTOTAL \$ | | | | 1200.00 | | |

Schedule A Summary

- Amount received this period – contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ 1200.00
- Amount received this period – unitemized contributions of less than \$100 \$ 25.00
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** 1225.00

*Contributor Codes
IND – Individual
COM – Recipient Committee
(Other than PTY or SCC)
OTH – Other
PTY – Political Party
SCC – Small Contributor Committee

**Schedule E
Payments Made**

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

| | |
|--|------------------------------------|
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SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends Of Paul Lucas O8

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 tv, 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 |
|---|------|----|------------------------|----------------|
| Nationwide Printing Services 15421 Red Hill Av #B Tustin CA 92780 | LIT | | | 1072.57 |
| Nationwide Printing Services 15421 Red Hill Av #B Tustin CA 92780 | LIT | | | 662.50 |
| SUBTOTAL \$ | | | | 1735.07 |

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

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) \$ 1735.07
2. Underitemized payments made this period of under \$100 \$ 0
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ 0
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** 1735.07

**Schedule F
Accrued Expenses (Unpaid Bills)**

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

Statement covers period
from 10/01/2008
through 10/18/2008

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ID NUMBER
1298293

SEE INSTRUCTIONS ON REVERSE
NAME OF FILER
Friends Of Paul Lucas O8

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

- OMP 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
- 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 tv, 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 CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | OUTSTANDING BALANCE BEGINNING OF THIS PERIOD (a) | AMOUNT INCURRED THIS PERIOD (b) | AMOUNT PAID THIS PERIOD (ALSO REPORT ON B) | OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD (d) |
|---|-----------------------------------|--|------------------------------------|--|---|
| Nationwide Printing Services 15421 Red Hill Av #B Justin CA 92780 | LIT | 3437.23 | 0.00 | 1735.07 | 1702.16 |
| SUBTOTALS \$ | | 3437.23 \$ | 0.00 \$ | 1735.07 \$ | 1702.16 |

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

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 \$** 0
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 \$** 1735.07
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 \$** -1735.07