Desirient Committee				COVER PAGE
Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in		Date Stamp	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE	Statement covers period from05/18/2014 through06/13/2014	Date of election if applicable (Month, Day, Year) 06/03/2014	ITY OF DANA POIN III JUN 19 P 2: 2	
	<u> </u>	a Tona of Oten on GIT	PECENTED	
 ◯ State Candidate Election Committee ◯ Recall (Also Complete Part 5) ◯ General Purpose Committee ◯ Sponsored ◯ Small Contributor Committee 	omplete 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 Temination Amendment (Explain b	Cuart Speci	NT terly Statement ial Odd-Year Report elemental Preelection ment - Attach Form 495
3. Committee Information	D. NUMBER 1359658	Treasurer(s)		······································
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE, Lisa Bartlett for Supervisor 2014 STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER Jen Slater MAILING ADDRESS CITY	STATE ZIP CO	ODE ARÉA CODE/PHONÉ
CITY STATE ZIP C	ODE AREA CODE/PHONE	NAME OF ASSISTANT TREASU	RER, IF ANY	WATER 1
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	BOX	MAILING ADDRESS		
CITY STATE ZIP C	ODE AREA CODE/PHONE	CITY	STATE ZIP C	ODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDI	RESS	
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of Californ Executed on	ng this statement and to the best of my k nia that the foregoing is true and correct. By By Signature of By	Signapure of Treasure se Assistant	t Treasurer	ules is true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent	EPPC Form 460 (January/05

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

					Pa	ge <u> </u>	of <u>25</u>
Officeholder or Candidate Controlled Com	mittee	6.	Primarily Formed Bal	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			·	
Bartlett Lisa							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	· · · · · · · · · · · · · · · · · · ·		BALLOT NO. OR LETTER	JURISDICT	ION	Tr	SUPPORT
County Supervisor: County of Orange Distric	ct 5						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling of	ficeholder, ca	andidate, or state i	measure	proponent, if a
			NAME OF OFFICEHOLDER, CA	NDIDATE, OR P	ROPONENT		
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	LOT are primarily formed to receive		OFFICE SOUGHT OR HELD		DIST	RICT NO.	IF ANY
COMMITTEE NAME	I.D. NUMBER						
Lisa Bartlett for Dana Point City Council	1288779						
NAME OF TREASURER Jen Slater	CONTROLLED COMMITTEE?	7.	Primarily Formed Car officeholder(s) or candidate(didate/Offics) for which th	ceholder Comm is committee is prim	ittee Li Parily form	st names of ed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	вох)		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT (OR HELD	SUPPOR
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICE VOLUME				
			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT (OR HELD	SUPPOR
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT (OR HELD	Suppor
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. I	BOX)						OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		Atta	ch continuati	on sheets if neces	ssary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Type or print in Ink.

Amounts may be rounded to whole dollars.

NAME OF FILER Lisa Bartlett for Supervisor 2014 1359658 Column A Contributions Received Column B Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR (FROMATTACHED SCHEDULES) Running in Both the State Primary and TOTAL TO DATE General Elections 43,134.00 2. Loans Received Schedule B, Line 3 1/1 through 6/30 7/1 to Date 5,000.00 100,000.00 20. Contributions \$ 143,134.00 Received _____1,312.17 3,064.74 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ _____15,762.17 \$ 146,198.74 Made **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 22,937.33 22. Cumulative Expenditures Made* \$ _____167,234.02 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 9,293.04 31,611.24 Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 1,312.17 (mm/dd/yy) 3,064.74 Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 11,200.00 To calculate Column B, add amounts in Column A to the ____14,450.00 corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts 0.00 from Column B of your last reported in Column B. report. Some amounts in 22,937.33 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 2,712.67 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contribution

Type or print in ink.
Amounts may be rounded

SC	1170	~ 1 1		
- 50.0		1 11 1	: -	- 73

Monetary	Contributions Received		whole dollars.	Statement covers period from05/18/2014		CALIFORNIA 460 FORM		
	ONS ON REVERSE			through <u>06/13/2</u>	014	Page	<u>4</u>	of <u>25</u>
NAME OF FILER		1717	4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			I.D. N	IUMBER	
Lisa Bartle	tt for Supervisor 2014					1359	1658	
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 Y (JAN. 1 - DEC	'EAR	TC	ELECTION O DATE EQUIRED)
05/20/2014	Ware Disposal	□IND □COM 図OTH □PTY □SCC		1,150.00	1,	650.00	P2014	\$1,900.00
05/21/2014	Dana Yarger	⊠IND □COM □OTH □PTY □SCC	Chairman Elephant Parade	250.00		250.00	P2014	\$250.00
05/23/2014	Roger L. Beard	⊠IND □COM □OTH □PTY □SCC	President Dana Point Boaters Association	250.00		500.00	P2014	\$500.00
05/23/2014	David M. Demshur	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Geologist Core Laboratories	1,000.00	1,	000.00	P2014	\$1,000.00
05/23/2014	Ruth DeNault	⊠IND □COM □OTH □PTY □SCC	Merchant DeNault's	500.00]	500.00	P2014	\$1,500.00
			SUBTOTAL\$	3,150.00				
Amount red (include all 2. Amount red	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.) ceived this period – unitemized monetary contributions				IND - COM	(other	ial ient Commit r than PTY ((e.g., busir	
3. Total mone (Add Lines	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colur	mn A, Line 1.))TOTAL \$	9,450.00	scc	-Small (Contributor	Committee

Schedule A (Continuation Sheet) Monetary Contributions Received

Type or print in ink.

SCHEDULE A (CONT.)

Amounts may be rounded to whole dollars.			Statement cover from 05/18/ through 06/13/	/2014	ALIFORN FORM	400	
NAME OF FILER			14-1-1	unough			_ of 25
Lisa Bartlet	t for Supervisor 2014					D. NUMBER 359658	
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 DA CALENDAR YEAR (JAN, 1 - DEC, 31		R ELECTION TO DATE REQUIRED)
05/27/2014	Don Hansen	⊠IND □COM □OTH □PTY □SCC	Retired None	500.00	500	00 P2014	\$500.00
05/27/2014	David Jochimi	⊠IND □COM □OTH □PTY □SCC	Banker Union Bank	250.00	250	00 P2014	\$250.00
05/27/2014	Lori Zito	⊠IND □COM □OTH □PTY □SCC	Consultant Lori Zito	100.00	100	00 P2014	\$100.00
05/28/2014	Al Frink		Managing Partner Denbec Properties, LLC	200.00	200	00 P2014	\$200.00
05/28/2014	Rodney Howorth	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired None	100.00	100	00 P2014	\$100.00
			SUBTOTAL	1,150.00			

*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

SCHEDULE A (CONT.)

Statement covers period

		to whole	dollars.	from05/18,	/2014	F	ORM	460
NAME OF FILER		· · · · · · · · · · · · · · · · · · ·	70-1	through 06/13/		Page _		of <u>25</u>
Lisa Bartlett	t for Supervisor 2014					13596	58	
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. (AR	Т	ELECTION O DATE EQUIRED)
05/28/2014	James Miller	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Manager Coffee Importers	250.00	25	0.00	P2014	\$250.00
05/28/2014	Sierra Partners LLC	☐IND ☐COM 図OTH ☐PTY ☐SCC		250.00	1,00	0.00	P2014	\$1,000.00
05/29/2014	Sally Green	⊠IND □COM □OTH □PTY □SCC	Homemaker None	250.00	25	0.00	P2014	\$250.00
05/29/2014	Neil W. Knuppel Professional Law Corp	□IND □COM 図OTH □PTY □SCC		500.00	50	0.00	P2014	\$1,000.00
05/30/2014	Bruce Junor	⊠IND □ COM □ OTH □ PTY □ SCC	Owner Engineering & Manufacturing Development	100.00	50	0.00	P2014	\$600,00
			SUBTOTAL\$	1,350.00				

*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.
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CALIFORNIA A

Statement covers period

		35 am oi		from05/18/	/2014	ORM	^ 46U
				through 06/13/	^{/2014} Page	7	of <u>25</u>
NAME OF FILER					I.D.N	UMBER	
Lisa Bartlett f	for Supervisor 2014				1359	658	j
RECEIVED	ULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, 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)		R ELECTION TO DATE REQUIRED)
	y Customer Data	□IND □COM 図OTH □PTY □SCC		250.00	250.00	P2014	\$250.00
	onald Okai		Retired None	200.00	200.00	P2014	\$450.00
SI	&J Transportation Solutions LLC dba Rapid huttle	□IND □COM 図OTH □PTY □SCC		250.00	250.00	P2014	\$1,250.00
	oggin Crawford Associates	□IND □COM 図OTH □PTY □SCC		1,000.00	1,000.00	P2014	\$1,600.00
06/02/2014 Jo	ohn B. Withers Associates	□IND □COM ☑OTH □PTY □SCC		250.00	250,00	P2014	\$448.00
			SUBTOTAL \$	1,950.00	700 p. 16 100 (\$400)		

*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) Type or print in ink. SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. 05/18/2014 **FORM** from through. 06/13/2014 Page 8 of 25 NAME OF FILER I.D. NUMBER Lisa Bartlett for Supervisor 2014 1359658 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER AMOUNT DATE CUMULATIVE TO DATE CONTRIBUTOR PER ELECTION OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER LD. NUMBER) RECEIVED THIS RECEIVED CALENDAR YEAR TO DATE CODE * (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) 06/02/2014 SCS Engineers 500.00 500.00 P2014 \$500.00 ПСОМ X OTH PTY SCC 06/11/2014 CA Hospital Association PAC (ID# 790773) **□IND** 250,00 500.00 P2014 \$500,00 **∑**COM □ OTH

Retired

SUBTOTAL \$

None

□ PTY □ SCC

□IND

XIND

COM
OTH
PTY
SCC
IND
COM
OTH
PTY
SCC

COM OTH PTY SCC

*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

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

1,000.00 P2014

250.00 P2014

\$1,000.00

\$500.00

750.00

250.00

1,750.00

06/11/2014

06/13/2014

Sierra Partners LLC

Stanley Okai

Sch	red	ule	B –	Part	1
Loa	ns	Red	eive	ed.	

Type or print in ink.

SCHEDI	11 12	D .	D٨	DТ	1

Loans Received	AM	to whole dollars. Statement covers period from05/18/2014			CALIFORN FORM	^{IA} 460		
SEE INSTRUCTIONS ON REVERSE					through 06/1	3/2014	Page 9	of <u>25</u>
NAME OF FILER	· · · · · · · · · · · · · · · · · · ·	·····		L			I.D. NUMBER	VI
Lisa Bartlett for Supervisor 2014							1359658	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAIL OR FORGIVE THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(9) CUMULATIVE CONTRIBUTIONS TO DATE
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point			PAID \$ 0.00		0.00% RATE	\$ 20,000.00	CALENDAR YEAR \$ 25,601.80
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$ _20,000.00	\$ 0.00	FORGIVEN \$ 0.00	DATE DUE	s0.00	08/10/2013 DATE INCURRED	PER ELECTION** \$ P2014 100,601.8
bisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point			\$ 0.00	\$ _55,000.00	% RATE	\$ 55,000.00	CALENDAR YEAR \$ 25,601.80 PER ELECTION **
[†] ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$ 55,000.00	\$0.00	s0.00	DATE DUE	\$0.00	12/31/2013 DATE INCURRED	\$ P2014 100,601.8
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point		n had a d	PAID S 0.00	\$ _20,000.00	0.00% % RATE	\$ 20,000.00	CALENDAR YEAR \$ 25,601.80 PER ELECTION**
↑ IND □ COM □ OTH □ PTY □ SCC		\$ 20,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	05/09/2014 DATE INCURRED	\$ P2014 100,601.8
		SUBTOTALS \$	0.00	0.0	o \$ 95,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
 Loans received this period	s of less than \$100.) Dipaid or forgiven.) are also itemized on Scheo	dule A.)		\$		INI CC O1 PT	ontributor Codes D – Individual DM – Recipient Co (other than I H – Other (e.g., Y – Political Party C – Small Contrib	ommittee PTY or SCC) business entity)
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						FPPC Form	460 / January/05\

Schedule B – Part 1 (Continuation Sheet) Loans Received

Type or print in ink.

Amounts may be rounded to whole dollars

SCHEDULE B - PART 1 (CONT.)

Statement covers period

Loans Neceived		to whole dollar	rs.		from05/1	8/2014	FORM	^ 460
SEE INSTRUCTIONS ON REVERSE					through06/1	3/2014	Page10	of25
NAME OF FILER							I.D. NUMBER	
Lisa Bartlett for Supervisor 2014							1359658	
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOR	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
isa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point	FERIOU		PAID \$ 0.04	14,00	0.00% %	\$ 5,000.00	CALENDAR YEAR \$ 25,601.80
™ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$5,000.00	FORGIVEN	DATE DUE	s 0.00	06/13/2014 DATE INCURRED	PER ELECTION** \$ P2014 100,601.80
				PAID \$ FORGIVEN	\$	% RATE	s	SPER ELECTION ***
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		s	\$	\$	DATE DUE	s	DATE INCURRED	\$
				PAID S FORGIVEN	\$		\$	SPER ELECTION**
□ IND □ COM □ OTH □ PTY □ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
				\$ FORGIVEN	s	% RATE	\$	\$ PER ELECTION**
☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		\$	\$	\$	DATE DUE	\$	DATE INCURRED	\$
		SUBTOTALS \$	5,000.00	0.0	5,000.00	\$ 0.00		

†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.

SEE INSTRUC	CTIONS ON REVERSE				through06/13/20	14	Page	<u>11</u> of_	25
	lett for Supervisor 2014						I.D. NUME		
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 O GOODS OR SERVI		CUMULA DA CALENDA (JAN 1 - I	TIVE TO TE R YEAR	PER EI	LECTION DATE QUIRED)
	Lisa Bartlett	⊠IND □COM □OTH □PTY □SCC	Partner/Councilwoman Blue Water Realty/City of Dana Point	5/18 Meet & Gra Beverages	eet 95.23	2	5,601.80	P2014 \$	100,601.8
	Nolet Spirits USA	☐IND ☐COM ※OTH ☐PTY ☐SCC		5/29 Candidate Event Costs - Reception Only	187.94		187.94	P2014	\$187.9
05/29/2014	Richard Hamm	⊠IND □COM □OTH □PTY □SCC	Owner Casa Resorts, Inc	5/29 Event Food and Beverages	1 499.50		499.50	P2014	\$499.5
05/29/2014	Chris Keller	⊠IND □COM □OTH □PTY □SCC	Owner Casa Resorts, Inc	5/29 Event Food and Beverages	1 499.50		499.50	P2014	\$499.5
Attach ad	lditional information on appropriately labe	eled continuat	ion sheets.	SUBTO	TAL. \$ 1,282.17				
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)	y contributions	S.		\$1,282	IND-		des it Committe	
	received this period – unitemized nonmone		ons of less than \$100	••••••	\$		•	g., busine	,

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

SCC - Small Contributor Committee

3. Total nonmonetary contributions received this period.

Schedule E	<u>.</u> .							SCHEDULE E
Payments Made	Type or print in ink, Amounts may be rounded to whole dollars.				Statement covers period from05/18/2014			RNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				thi	ough 06,	/13/2014	Page12	2 of25
Lisa Bartlett for Supervisor 2014							I.D. NUMB 1359658	
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munication d appearar uses lating survey rese ivery and r	s ces	RAD RFD SAL TEL TRC TRS	radio airtim returned co campaign v t.v. or cable candidate t staff/spousi transfer be voter regisi	e and production on ontributions workers' salaries e airtime and produravel, lodging, and e travel, lodging, a tween committees	uction costs I meals and meals of the same	e candidate/sponsor nail)
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER L.D. NUMBER)		CODE	OR	DESCRIPTION	N OF PAYMEN	Τ		AMOUNT PAID
Cox Communications		OFC				, , , , , , , , , , , , , , , , , , ,		342.00
Voter Connections/eFundraising		OFC						89.00
Political Data Inc.		LIT		***************************************	TO BOAT HAVE I			459.26
* Payments that are contributions or independent expenditures m	oust also be summ	arized on	Schedule D.			SUI	STOTAL\$	890.26

Schedule E Summary

Schedule E

Type or print in ink.

SCHEDULE E (CONT.)

Payments Made	Amounts may be rounded to whole dollars.			Statement covers period from05/18/2014	CALIFOR FORM	NIA 460
SEE INSTRUCTIONS ON REVERSE				through 06/13/2014	Page1	3 of25
Lisa Bartlett for Supervisor 2014					I.D. NUMBER	
					1359658	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CNS contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events ND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MBR member coming meetings and office expension petition circul PHO phone banks POL polling and s POS postage, delivered.	munications I appearance ses ating urvey resear	es	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie t.v. or cable airtime and production RFD returned contributions campaign workers' salarie t.v. or cable airtime and production RFC candidate travel, lodging, a staff/spouse travel, lodging transfer between committee voter registration web information technology cost	on costs s oduction costs and meals g, and meals ees of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DESC	CRIPTION OF PAYMENT		AMOUNT PAID
American Express Payment Center		FND	4/30 Candidate Eve	ent Costs - Reception Only		553.60
Campaign Compliance Group Inc		PRO		***************************************		950.00
oter Connections/eFundraising		OFC				81.00
Political Data Inc.		LIT				469.60
oter Connections/eFundraising		OFC				71.50
Payments that are contributions or independent expenditures must als	to be summerized 5	CohoutI- C				
, and point of the property of	o be summarized on s	cheaule D.		S	UBTOTAL \$	2,125.70

Schedule E
(Continuation Sheet)
Payments Made

Type or print in ink

SCHEDULE E	(CONT.)
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(Continuation Sheet) Payments Made	Amounts may b to whole do	e rounded		Staten	nent covers period	CALIFO FOR		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	174-bed			through_	06/13/2014	Page	14 of 25	
Lisa Bartlett for Supervisor 2014						1359658		
codes: If one of the following codes accurately descrete campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating urvey resear very and me	es ch	RAD radi RFD retu SAL cam TEL t.v. TRC cam TRS staf TSF tran VOT vote	scribe the payme or airtime and product inned contributions in airtime and product or cable airtime and product travel, lodging, f/spouse travel, lodging for between committer registration readition technology contributions.	tion costs ries production costs and meals ng, and meals ttees of the sam		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF	PAYMENT		AMOUNT PAID	
Venture Strategic Inc		LIT		The state of the s			11,000.00	
oter Connections/eFundraising		OFC					61.00	
oter Connections/eFundraising		OFC		AMERICAN CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CO		m,	62.00	
FCO Insurance	1 / Table 1	OFC					52.50	
merican Express ayment Center	· · · · · · · · · · · · · · · · · · ·	POS					29.16	
Payments that are contributions or independent expenditures must	also be summarized on	Schedule D.				SUBTOTAL \$	11,204.66	
The state of the s					***************************************		11,204.66	

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE E (CONT
Statement covers period		CALIFORNIA 460
Ì	from05/18/2014	FORM 400
	through 06/13/2014	Page15of25

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Lisa Bartlett for Supervisor 2014 1359658 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 candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* ND 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 campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail) NAME AND ADDRESS OF PAYEE CODE OR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT AMOUNT PAID California Hope Trust OFC 500.00 Evan Chaffee WEB See Schedule G for Details 516.95 Evan Chaffee OFC 820.81 Mission Grill MTG 4/17 Candidate Meeting & Greet Event - Reception Only 350.00

PRO

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

SUBTOTAL \$

712.50

2,900.26

Campaign Compliance Group Inc

Schedule E (Continuation Sheet)

Type or print in ink, Amounts may be rounded

SCHEDU	JLE E	(CONT.
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Statement covers period

Payments Made	Amounts may be rounded to whole dollars.			fron	105/18/2014	CALIFORI FORM	NIA 460
SEE INSTRUCTIONS ON REVERSE	-			thro	ough 06/13/2014	Page 16	of25_
IAME OF FILER						I.D. NUMBER	
Lisa Bartlett for Supervisor 2014						1359658	
CODES: If one of the following codes accurately describe	es the payment, v	ou may	enter the code	Otherwise	describe the naumont		
campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearan ises lating survey rese ivery and n	s ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and productio returned contributions campaign workers' salaries t.v. or cable airtime and pro- candidate travel, lodging, a staff/spouse travel, lodging	n costs s oduction costs nd meals , and meals es of the same	-
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PAYMENT		AMOUNT PAID
ampaign Solutions		WEB			770-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-		844.44
van Chaffee		CNS					1,750.00
van Chaffee		CNS					1,750.00
enture Strategic Inc		LIT					535.16
enture Strategic Inc		OFC					111.70
Payments that are contributions or independent expenditures must als	o be summarized on S	Schedule D			SI.	JBTOTAL \$	4,991.30
						- 1 - 1 1 1 1 4	7,221.30

Schedule E

Type or print in ink.

SCHEDULE	E (CONT.
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Venture Strategic Inc. CNS 777	Payments Made	Amounts may b to whole do			Statement covers period from05/18/2014	CALIFO FOR	RNIA 460
AMDE NAD ADDRESS OF PAYEE ORDER TO SUpervisor 2014 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBP member communications ampaign paraphenisalismise. MBP campaign consultants MBP campaign co			····		through 06/13/2014		
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. AND campaign paraphemalishriac. AND campaign internet paraphemalishriac. AND ca	Lisa Bartlett for Supervisor 2014						
CNS campaign consultarias Analysis consultarias CNS campaign consultarias		scribes the payment y	OII May e	oter the code. Oth	onvice describe the newspaper		3
CNS DESCRIPTION OF PAYMENT AMOUNT PAID CNS DESCRIPTION OF PAYMENT AMOUNT PAID (F COMMITTEE, ALSO ENTER ID. NUMBER) CNS DESCRIPTION OF PAYMENT AMOUNT PAID (T) TO THE PAYMENT PAYME	CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain legal defense)	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del PRO professional	munications d appearance ses lating survey resear ivery and me	ch ssenger services	RAD radio airtime and production returned contributions SAL campaign workers' salarie t.v. or cable airtime and production reductions salaries travel, lodging, a staff/spouse travel, lodging transfer between committed voter registration	on costs es roduction costs and meals g, and meals ees of the san	ne candidate/sponsor
	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTION OF PAYMENT		AMOUNT PAID
	venture strategic inc		CNS				771.75
Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 77	* Payments that are contributions or independent expenditures m	ust also be summarized on	Schadula			NIPTOTAL A	771.75

Schedule F Accrued Expenses (Unpaid Bills)

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

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

····	00.1000221
Statement covers period	CALIFORNIA 160
from05/18/2014	FORM TOU
through 06/13/2014	Page 18 of 25
	I.D. NUMBER
	1359658

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Lisa Bartlett for Supervisor 2014

* Payments that are contributions or Independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	4,694.44\$	0.00\$	1,194.44\$	3,500.00
Mission Grill	MTG 4/17 Candidate Meeting & Greet Event - Reception Only	350.00	0.00	350.00	0.00
Venture Strategic Inc	CNS	3,500.00	0.00	0.00	3,500.00
Campaign Solutions	WEB	844.44	0.00	844.44	0.00
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNTINCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
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 LTT campaign literature and mailings	MBR member communication meetings and appeara OFC office expenses petition circulating PHO phone banks POL polling and survey resipostage, delivery and PRO professional services (PRT print ads	ns nces earch messenger services	TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registration	nd production costs butions (ers' salaries time and production costs I, lodging, and meals evel, lodging, and meals en committees of the sar	me candidate/sponsor

Schedule F Summary

J	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 \$	15,030.50
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.) 		
3	3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A. Line 9.)	NEW A	

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 460
from 05/18/2014	FORM 400
through <u>06/13/2014</u>	Page 19 of 25
	LD. NUMBER
	1359658

Lisa Bartlett for Supervisor 2014

NAME OF FILER

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 petition circulating TEL 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)* ND POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF 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)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Political Data Inc.	LIT	3,614.62	0.00	0.00	
Endless Eye LLC	TEL	821.12	0.00	0.00	821.12
American Express Payment Center	FND 4/30 Candidate Event Costs - Reception Only	553.60	0.00	553.60	0.00
Venture Strategic Inc	CNS	771.75	0.00	771.75	0.00
	SUBTOTALS	\$ 5,761.09 \$	0.00\$	1,325.35	4,435.74

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

Lisa Bartlett for Supervisor 2014

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT
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Statement covers period	CALIFORNIA 460
from 05/18/2014	FORIN
through 06/13/2014	Page 20 of 25
	I.D. NUMBER
	1359658

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 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 independent expenditure supporting/opposing others (explain)* IND POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF LEG legal defense professional services (legal, accounting) PRO VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Cardmember Services Payment Center	TEL See Schedule G for Details	5,145.00	0.00	0.00	5,145.00
Venture Strategic Inc	OFC	111.70	0.00	111.70	0.00
Venture Strategic Inc	LIT	535.16	0.00	535.16	0.00
Evan Chaffee	CNS	1,750.00	0.00	1,750.00	0.00
	SUBTOTALS	7,541.86	0.00\$	2,396.86	5,145.00

Schedule F (Continuation Sheet) Accrued Expenses (Unpaid Bills)

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

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA AGO
from 05/18/2014	FORM 400
through 06/13/2014	Page 21 of 25
	I.D. NUMBER
	1359658

Lisa Bartlett for Supervisor 2014

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

independent expenditure supporting/opposing others (explain)*

LEG legal defense

NAME OF FILER

campaign literature and mailings

MBR member communications MTG meetings and appearances RFD returned contributions

OFC office expenses 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

SAL campaign workers' salaries

t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals TRS

transfer between committees of the same candidate/sponsor TSF

VOT voter registration

WEB information technology costs (internet, e-mail)

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

NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Evan Chaffee	OFC	820.81	0.00	820.81	0.00
Venture Strategic Inc	CNS	3,500.00	0.00	0.00	3,500.00
Venture Strategic Inc	LIT	0.00	12,530.50	0.00	12,530.50
Evan Chaffee	CNS	0.00	2,500.00	0.00	2,500.00
	SUBTOTALS	\$ 4,320.81	15,030.50\$	820.81	18,530.50

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

Type or print in ink. Amounts may be rounded

			CUEDOFF
State	ement covers period	CALIFORNIA	460
from05/18/2014	FORM	460	

Contractor (on Benair of This Committee)	to whole collars.	from05/18/2014	FORM 40U
SEE INSTRUCTIONS ON REVERSE		through06/13/2014	Page 22 of 25
NAME OF FILER Lisa Bartlett for Supervisor 2014			I.D. NUMBER
NAME OF AGENT OR INDEPENDENT CONTRACTOR American Express			1359658
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* legal defense 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 RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and pro TRC candidate travel, lodging, ar staff/spouse travel, lodging,	duction costs id meals and meals as of the same candidate/sponsor

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

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMC	DUNT PAID
Federal Express Payment Center	POS		7,1110	29.1
				With the Control of t
Attach additional information on appropriately labeled continuation sh	neets.		TOTAL* \$	29.1

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

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

64-4	SCHEDULE C
Statement covers period	CALIFORNIA 460
from05/18/2014	FORM 400
through06/13/2014	Page 23 of 25

	•	110111	FORIVI
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		through06/13/2014	Page 23 of 25
Lisa Bartlett for Supervisor 2014			I.D. NUMBER
NAME OF AGENT OR INDEPENDENT CONTRACTOR			1359658
From Chaffon			

CODES: If one of the following codes accurately describes the payment, you may enter the code. CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LEG campaign paraphernalia/misc. MBR member communications meetings and appearances office expenses PET petition circulating phone banks POL poling and survey research postage, delivery and messenger services professional services (legal, accounting) professional services (legal, accounting) 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
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Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AM	OUNT PAID
Facebook	WEB			243.27
Facebook	WEB			215.92
Attach additional information on appropriately labeled continuation s	heets.		TOTAL* \$	459.19

* Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)	Amou	pe or print in ink. nts may be rounded o whole dollars.	Statement covers period from05/18/2014	CALIFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			through <u>06/13/2014</u>	Page 24 of 25
Lisa Bartlett for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR				1.359658
DMI Direct				
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings * Payments that are contributions or independent expenditures must als	MBR member co MTG meetings a OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de PRO professiona PRT print ads	mmunications and appearances enses culating ks I survey research elivery and messenger servic al services (legal, accounting)	RAD radio airtime and producti RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging, TRS staff/spouse travel, lodgin es TSF transfer between committee	ion costs es production costs and meals ng, and meals nees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	A	MOUNT PAID
US Postmaster Main Office	POS				9,180.0
					17.7.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.
				10 THE R. L.	
Attach additional information on appropriately labeled continuation sheet		1		TOTAL* \$	9,180.00

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

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

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

		SCHEDULE G
State	ement covers period	CALIFORNIA 460
rom	05/18/2014	FORM 40U

Contractor (of benail of This Committee)	to whole dollars.	from 05/18/2014	FORM FOR
SEE INSTRUCTIONS ON REVERSE		through 06/13/2014	- Page 25 of 25
NAME OF FILER Lisa Bartlett for Supervisor 2014 NAME OF AGENT OR INDEPENDENT CONTRACTOR			I.D. NUMBER 1359658
Venture Strategic Inc	AL	*** ***********************************	
CODES: If one of the following codes accurately describ CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events 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 RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and process TRC candidate travel, lodging, a TRS staff/spouse travel, lodging	n costs s oduction costs nd meals , and meals es of the same candidate/sponso
* Payments that are contributions or independent expenditures must al	so be summarized on Schedule D	The state of the s	- (omer o man)

	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	A	MOUNT PAID
DMI Direct		LIT			21,870.0
-					7-7-2-7
					V V V V V V V V V V V V V V V V V V V
			(F15)		
ttach additiona	al information on appropriately labeled continuation she	ets.		TOTAL* \$	21,870.0

^{*} Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.