Recipient Committee				COVER PAGE		
Campaign Statement	Type or print in	ink.	Date Stamp	CALIFORNIA 460		
Cover Page (Government Code Sections 84200-84216.5)			72	FURM		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Statement covers period	Date of election if applicable: (Month, Day, Year)	Y OF DANA POINT	Page1 of23		
	from01/01/2014	7.11	0CT -6 A 8: 17	For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through09/30/2014	11/04/2014	DECEIVED			
1. Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement: Y	CLERK'S DEPARTMENT			
 ✓ 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 Ballot Measure Committee Controlled Sponsored (Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee (Also Complete Part 7)		Special Supplementation States	erly Statement al Odd-Year Report emental Preelection nent - Attach Form 495		
3. Committee Information	I.D. NUMBER 1368715	Treasurer(s)				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE		NAME OF TREASURER		·		
Muller for City Council 2014		Lysa Ray				
		MAILING ADDRESS				
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CO	DE AREA CODE/PHONE		
CITY STATE ZIP	CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASUR	RER, IF ANY			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O.	. BOX	MAILING ADDRESS				
CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP CO	DE AREA CODE/PHONE		
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDR	ESS			
 Verification I have used all reasonable diligence in preparing and review 	ing this statement and to the best of muknos	pulodas the information contained has	ain and in the attacked asked de			
under penalty of perjury under the laws of the State of Californ	nia that the foregoing is true and correct.	Swiedge ine information contained her	em and in the attached schedule	es is true and complete. Teerthy		
Executed on	Ву	Signature of Treasurer or Assistant T	reasurer			
Executed on	BySignature of Coi	ntrolling Officerfolder, Candidate, State Measure Prop	onent or Responsible Officer of Sponsor			
Executed on	Ву					
Executed on	By	Signature of Controlling Officeholder, Candidate, Sta	ale Measure Proponent			
Date	Бу	Signature of Controlling Officeholder, Candidate, Sta	ate Measure Proponent	EPPC Form 460 (lanuary/05)		

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

Officeholder or Can	ndidate Controlled	Committee		6.	Primarily Formed Ballo	t Measure	Committe	е	
NAME OF OFFICEHOLDER	OR CANDIDATE		8		NAME OF BALLOT MEASURE				,,, ,,,
Joe Muller									
OFFICE SOUGHT OR HELD	(INCLUDE LOCATION AND	DISTRICT NUMBE	ER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ON		SUPPORT
City Council Member	: Dana Point]	OPPOSE
RESIDENTIAL/BUSINESS AD	DDRESS (NO. AND STREE	ET) CITY	STATE ZIP		Identify the controlling offi	ceholder, ca	ndidate, or s	tate measure	proponent, if any.
		31			NAME OF OFFICEHOLDER, CAN	DIDATE, OR P	ROPONENT		****
Related Committees	s Not Included in t	his Statemen	t: List any committees						
not included in this states contributions or make ex	ment that are controlled	by you or are pri	. TO SEE		OFFICE SOUGHT OR HELD			DISTRICT NO	. IF ANY
COMMITTEE NAME		I.D. NU	MBER					<u></u>	
				7.	Primarily Formed Cand	lidate/Offic	eholder C	ommittee	ist names of
NAME OF TREASURER			OLLED COMMITTEE?		officeholder(s) or candidate(s)				
COMMITTEE ADDRESS	STREET ADDRESS (N	IO BO BOX	ES NO		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	
	STREET ADDRESS (N	IO P.O. BOX)							SUPPORT OPPOSE
CITY	STATE	ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	SUPPORT
			(1)						OPPOSE
COMMITTEE NAME		I.D. NUI	MBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE COL	JGHT OR HELD	
					NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	IGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER		CONTR	OLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOL	JGHT OR HELD	COURSES
		Y	ES NO						SUPPORT OPPOSE
COMMITTEE ADDRESS	STREET ADDRESS (N	IO P.O. BOX)							. 1
CITY	CTATE	710.0005	ADEA CODE/DUOLE						
CITY	SIAIE	ZIP CODE	AREA CODE/PHONE		Attac	h continuati	on sheets if	necessary	
CITY	STATE	ZIP CODE	AREA CODE/PHONE		Attac	h continuati	on sheets if	necessary	

Campaign Disclosure Statement **Summary Page**

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

SUMMARY PAGE

Statement covers period **CALIFORNIA** FORM 01/01/2014 from _ Page ___3 ___ of ___23 09/30/2014 through _ I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Muller for City Council 2014 1368715 Column A

Contributions Received	Column A TOTAL THIS PERIOD (FROMATTACHED SCHEDULES)		COlumn B CALENDAR YEAR TOTAL TO DATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3		\$	23,650.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3	5,000.00		5,000.00	
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2		\$	28,650.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3			0.00	21 Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$ 28,650.00	\$	28,650.00	Made \$ \$
Expenditures Made				Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4		\$	17,229.00	Candidates
7. Loans Made Schedule H, Line 3			0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ 17,229.00	\$	17,229.00	(If Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)	791.54		791.54	Date of Election Total to Date
10. Nonmonetary Adjustment	0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ 18,020.54	\$	18,020.54	\$
Current Cash Statement				/\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$ 0.00	To	calculate Column B, add	
13. Cash Receipts Column A, Line 3 above	28,650.00	aı	mounts in Column A to the	
14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	fre	orresponding amounts om Column B of your last	*Amounts in this section may be different from amounts reported in Column B.
15. Cash Payments Column A, Line 8 above	17,229.00		port. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$ 11,421.00	fig	gures that should be	
If this is a termination statement, Line 16 must be zero.		pe	ubtracted from previous eriod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$ 0.00	fo ca	r this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts		0.329.33	om Lines 2, 7, and 9 (if	
18. Cash Equivalents	\$ 0.00			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 5,791.54			FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A

Type or print in ink.

SCHEDULE A

Monetary	Contributions Received		nts may be rounded whole dollars.	Statement coverage from01/01/2		CALIFO FOI		460
SEE INSTRUCTION	ONS ON REVERSE			through _09/30/2	014	Page _	4 of	f23
NAME OF FILER						I.D. NUM	BER	
Muller for	City Council 2014					136871	5	
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	TOD	ECTION DATE DUIRED)
09/25/2014	Constance Alpin	⊠IND □COM □OTH □PTY □SCC	Retired	200.00		200.00 G2	014	\$200.00
09/03/2014	Dom Alvarez	⊠IND □COM □OTH □PTY □SCC	Corporate Governance Galt Enterprises, G.P.	690.00	ŧ	690.00 G2	014	\$690.00
09/22/2014	Rob Bowen	⊠IND □COM □OTH □PTY □SCC	E VP Cumberland Packing Corp	250.00	2	250.00 G2	014	\$250.00
09/08/2014	Anthony Brown	⊠IND □COM □OTH □PTY □SCC	Vice President Forethought	100.00	2	200.00 G2	014	\$200.00
09/25/2014	Anthony Brown	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Vice President Forethought	100.00	2	200.00 G20	014	\$200.00
			SUBTOTAL\$	1,340.00				
1. Amount re	A Summary ceived this period – itemized monetary contributions. I Schedule A subtotals.)		\$	23,450.00	IND-	ributor Cod Individual - Recipient (other tha		SSS location of the same
	ceived this period – unitemized monetary contributions etary contributions received this period.	of less than S	\$100 \$	200.00	PTY-	 Other (e.g Political Pa Small Conf 	arty	
	s 1 and 2. Enter here and on the Summary Page, Colu	mn A, Line 1.)	TOTAL \$	23,650.00		1		anuary/05)

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

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.	SCF	HEDULE	Α (CONT.
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Monetary	Contributions Received	Amounts may to whole		Statement cover from 01/01/01/01/01/01/01/01/01/01/01/01/01/0	/2014	FORM	460 of 23
NAME OF FILER						D. NUMBER	
Muller for C	ity Council 2014				1	368715	157 78.4
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 YEA (JAN. 1 - DEC. 3	₹	ER ELECTION TO DATE F REQUIRED)
09/02/2014	Karen Burke	IND COM OTH PTY SCC	Homemaker	300.00	300	.00 G2014	\$300.00
08/30/2014	Peter Burke	⊠IND □COM □OTH □PTY □SCC	CEO PJ Salvage	690.00	690	.00 G2014	\$690.00
09/08/2014	Angela Burton	IND COM OTH PTY SCC	Homemaker	250.00	250	.00 G2014	\$250.00
09/22/2014	Laurie Cadieux	⊠IND □COM □OTH □PTY □SCC	Homemaker	500.00	500	.00 G2014	\$500.00
08/30/2014	James Carev	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	500.00	500	00 G2014	\$500.00
			SUBTOTAL\$	2,240.00			

*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

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

	through09/30/	2014		
		Page	6 of_	23
NAME OF FILER		I.D. NI	JMBER	
Muller for City Council 2014		1368	715	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE * IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELI TO D (IF REQ	DATE
09/02/2014 Brad Casdorph XIND Regional Manager Symantec OTH PTY SCC	300.00	300.00	G2014	\$300.00
09/02/2014 Marcello Cavaricci XIND Partner Trinity Capital Investments Try SCC SCC SCC SCC SCC Scalar Scc Scc	690.00	690.00	G2014	\$690.00
Sakae Chang XIND Retired	300.00	300.00	G2014	\$300.00
George L. Chelius, Law Corporation GOM ONL ONL ONL ONL ONL ONL ONL O	250.00	250.00	G2014	\$250.00
08/30/2014 Norm Christensen X IND COO AAerospace OTH PTY SCC	690.00	690.00	G2014	\$690.00
SUBTOTAL\$	2,230.00			

*Contributor Codes

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(other than PTY or SCC)
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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCF	HEDULE A	(CONT)

Monetary	Contributions Received	Amounts may to whole		\$\takent \takent \take	/2014	CALIFOR FORM	
NAME OF FILER				**************************************		.D. NUMBER	
Muller for Ci	ty Council 2014					1368715	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
09/02/2014	Allyson Constantino	IND COM OTH PTY SCC	Self	250.00	25(.00 G201	4 \$250.00
09/08/2014	Richard Costello	⊠IND □COM □OTH □PTY □SCC	Retired	690.00	690	.00 G201	4 \$690.00
08/30/2014	Sara Czuleger	IND COM OTH PTY SCC	Homemaker	300.00	300	.00 G201	4 \$300.00
08/30/2014	Suzi Dailey	☑IND □COM □OTH □PTY □SCC	Owner Dailey by the Sea	500.00	500	.00 G201	4 \$500.00
09/24/2014	Gary Dapelo	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	100	.00 G201	4 \$100.00
			SUBTOTALS	1,840.00			

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHE	DIII	FA (CONT	Г

		to whole	dollars.	from01/01/	/2014		A 460
NAME OF FILER						NUMBER	. 01
Muller for C	ity Council 2014				130	8715	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
08/30/2014	George Deverian	IND COM OTH PTY SCC	Executive Geo Builders	690.00	690.0	0 G2014	\$690.00
08/30/2014	Dewitt Group, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		500.00	500.0	0 G2014	\$500.00
08/30/2014	Jacqueline Dupont		Doctor Self	690.00	690.0	0 G2014	\$690.00
09/05/2014	Steven Ewles		Owner Ewles Materials	100.00	100.0	0 G2014	\$100.00
08/30/2014	Gallo Corporation	□IND □COM 図OTH □PTY □SCC		690.00	690.0	0 G2014	\$690.00
			SUBTOTAL	2,670.00			

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PTY - Political Party

SCC - Small Contributor Committee

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

SCHEDULE A	CONT
SUILDULLA	CONT.

Monetary	Contributions Neceived	to whole		from01/01/	C/-	LIFORNI FORM	^ 460
			* 1	through09/30/	^{/2014} Pag	je <u>9</u>	of23
NAME OF FILER					I.D.	NUMBER	
Muller for C	ity Council 2014				13	8715	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
08/30/2014	Glendora Ave Corp	□IND □COM 図OTH □PTY □SCC		690.00	690.0	0 G2014	\$690.00
09/09/2014	David Harris	⊠IND □COM □OTH □PTY □SCC	Owner Goldenwest Shutters	300.00	300.0	0 G2014	\$300.00
08/30/2014	Steve Howard	IND COM OTH PTY SCC	Attorney Self	150.00	150.0	0 G2014	\$150.00
09/24/2014	Import Export Financing	□IND □COM ☑OTH □PTY □SCC		150.00	150.0	0 G2014	\$150.00
09/24/2014	G&M Management Services Jones Real Estate	□IND □COM ☑OTH □PTY □SCC		100.00	100.0	0 G2014	\$100.00
			SUBTOTAL\$	1,390.00			

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OTH - Other (e.g., business entity)

PTY - Political Party

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Type or print in ink. Amounts may be rounded

Monetary NAME OF FILER	Contributions Received	Amounts may to whole		Statement cover from01/01/01/01/01/01/01/01/01/01/01/01/01/0	² 2014 Pa		IA 460
	(h., a.,					. NUMBER	
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)
08/30/2014	James Kalina	⊠IND □COM □OTH □PTY □SCC	Sales IBM	100.00	100.	00 G2014	\$100.00
08/31/2014	James Kalina	⊠IND □COM □OTH □PTY □SCC	Retired	590.00	590.	00 G2014	\$590.00
08/30/2014	Marcy Kalina	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Vice President Moss Warner	100.00	100.	00 G2014	\$100.00
08/30/2014	David Kim	IND COM OTH PTY SCC	President Bascom Partners	690.00	690.	00 G2014	\$690.00
09/24/2014	Norman Lindauer	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Lindy Office Products	200.00	200.	00 G2014	\$200.00
			SUBTOTAL	1,680.00			

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(other than PTY or SCC)

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PTY – Political Party SCC – Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.

Monetary	Contributions Received	Amounts may to whole		Statement cov from	2014	FOR	
NAME OF FILER			<u> </u>			I.D. NUMBE	ER
Muller for Ci	ity Council 2014					1368715	
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 D CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
09/09/2014	Richard Lough	IND COM OTH PTY SCC	Retired	500.00	500	0.00 G20	\$500.00
09/23/2014	Tom Lowther	⊠IND □COM □OTH □PTY □SCC	President Orange Coast Title	250.00	25(.00 G20	\$250.00
09/03/2014	James McDonald	IND COM OTH PTY SCC	Retired	690.00	690	.00 G20	\$690.00
08/30/2014	Michael McGraw	XIND COM OTH PTY	Retired	690.00	690	.00 G20	\$690.00
09/09/2014	John Meehan	⊠IND □COM □OTH □PTY □SCC	Retired	200.00	200	.00 G20	\$200.00
			SUBTOTAL\$	2,330.00			

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(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

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Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

CALIFORNIA A

Statement covers period

		to whole	dollars.	from 01/01/	/2014	FORM	400
NAME OF FILER				through ^{09/30/}	raye	UMBER	of
Muller for Ci	ty Council 2014				136	3715	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т	ELECTION O DATE REQUIRED)
08/30/2014	Mike Thielman, A Professional Service	☐IND ☐COM ☑OTH ☐PTY ☐SCC		690.00	690.00	G2014	\$690.00
09/09/2014	Michael Nolan	⊠IND □COM □OTH □PTY □SCC	Owner Expo Badge	690.00	690.00	G2014	\$690.00
09/08/2014	Russell Pflueger	IND COM OTH PTY SCC	Retired	400.00	400.00	G2014	\$400.00
08/30/2014	Thomas Phelan	☑IND □COM □OTH □PTY □SCC	Contractor Self	690.00	690.00	G2014	\$690.00
08/30/2014	George L. Saad	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Vice President Tuttle-Click	690.00	690.00	G2014	\$690.00
			SUBTOTAL	3,160.00			

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(other than PTY or SCC)

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PTY – Political Party SCC – Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.
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Monetary Contributions Received		Amounts may to whole		Statement cov		CALIFORNIA 460		
	*			through 09/30	/2014	Page		23
NAME OF FILER						I.D. NUM	BER	
Muller for Cit	ty Council 2014					136871	5	
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	PER ELECTION TO DATE (IF REQUIRE	•
	Pablo Sampedro	⊠IND □COM □OTH □PTY □SCC	President Resulta Healthcare	200.00	20	00.00 G	2014 \$	\$200.00
08/30/2014	Ruth Sheffield		Financial Advisor Wells Fargo	200.00	20	0.00 G	2014 \$	\$200.00
09/17/2014	Vanissa Silvan	IND COM OTH PTY SCC	Retired	690.00	69	0.00 G	2014 \$	\$690.00
	Michael Slessinger	⊠IND □COM □OTH □PTY □SCC	Retired	100.00	10	0.00 G	2014 \$	\$100.00
09/05/2014	String Tennis Shop	□IND □COM ☑OTH □PTY □SCC		100.00	10	0.00 G2	2014 \$	\$100.00
			SUBTOTAL\$	1,290.00				- T

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(other than PTY or SCC)

OTH - Other (e.g., business entity)

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (C

		to whole	dollars.	from01/01/	/2014	FORM	^{IA} 460
NAME OF FILER				through09/30/			_ of23
						D. NUMBER	
Muller for C:	ity Council 2014	T	1		1	368715	
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, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEA (JAN. 1 - DEC. 34	₹	ER ELECTION TO DATE REQUIRED)
09/08/2014	Erma Jean Tracy	IND COM OTH PTY SCC	Retired	690.00	690	.00 G2014	\$690.00
08/30/2014	Tuttle-Click Ford Lincoln	☐IND ☐COM ☑OTH ☐PTY ☐SCC		690.00	690	.00 G2014	\$690.00
09/09/2014	Karen Warren	IND COM OTH PTY SCC	Project Director Fluor	400.00	400	.00 G2014	\$400.00
09/09/2014	Ryan Wilkinson	IND COM OTH PTY SCC	Senior Vice President First Foundation	250.00	250	.00 G2014	\$250.00
08/30/2014	Barry Wolfman	MIND.	Hospital Admin George Washington University Hospital	250.00	250	.00 G2014	\$250.00
			SUBTOTALS	2,280.00			

*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

Type or print in ink. Amounts may be rounded SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement cov from01/01/ through09/30/	/2014	FORM 460		
NAME OF FILER						I.D. NU	MBER	
Muller for C	ity Council 2014					13687	715	
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 OFBUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	/EAR	TOE	ECTION DATE QUIRED)
09/02/2014	Harv Wyman		President American United Lenders	500.00		500.00	G2014	\$500.00
08/30/2014	Myra Yocum	⊠IND □COM □OTH □PTY □SCC	Homemaker	500.00	5	,	G2014	\$500.00
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						· · · · · · · · · · · · · · · · · · ·
		☐IND ☐COM ☐OTH ☐PTY ☐SCC						
3 4444 (1444)			SUBTOTAL\$	1,000.00				

*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

0.1-1-1-0. 0-14		Type or print in	ink.				SCH	EDULE B - PART	
Schedule B – Part 1 Loans Received		Amounts may be rounded to whole dollars.			from01/0	ers period	california 460		
SEE INSTRUCTIONS ON REVERSE					through 09/3	0/2014	Page16	of23	
NAME OF FILER							I.D. NUMBER		
Muller for City Council 2014							1368715		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, 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 PAIE OR FORGIVEN THIS PERIOD	CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTION TO DATE	
Joseph Muller		TEMOD		PAID	PERIOD			CALENDAR YEAR	
				\$0.00	s _ 5,000.00		\$ 5,000.00	\$_5,000.00 PER ELECTION*	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$0.00	\$ _5,000.00	s0.00	DATE DUE	s0.00	07/22/2014 DATE INCURRED	\$ G2014 5,000.0	
		7,531.0		PAID				CALENDAR YEAR	
				\$ FORGIVEN	s	RATE	\$	\$ PER ELECTION *	
† IND COM OTH PTY SCC		s	\$	s	DATE DUE	s	DATE INCURRED	\$	
				☐ PAID		1400	a.	CALENDAR YEAR	
				FORGIVEN	\$	RATE	\$	PER ELECTION*	
† IND COM OTH PTY SCC		s	\$	\$	DATE DUE	s	DATE INCURRED	\$	
		SUBTOTALS \$	5,000.00	0.0	0\$ 5,000.00	0.00			
Schedule B Summary						(Enter (e) on Schedule E, Line 3)			
Loans received this period (Tatal Column (h) plus unitermined loan				\$	5,000.00	_			
 (Total Column (b) plus unitemized loan Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party than 	0 paid or forgiven.)			\$	0.00	CC	ontributor Codes D – Individual DM – Recipient Co (other than F TH – Other (e.g.,	PTY or SCC)	

*Amounts forgiven or paid by another party also must be reported on Schedule A. ** If required.

Enter the net here and on the Summary Page, Column A, Line 2.

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

PTY - Political Party

SCC - Small Contributor Committee

Schedule E Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period	CALIFORNIA ACO
from01/01/2014	FORM 46U
through09/30/2014	_ Page17 of23
	I.D. NUMBER
	1368715

SEE INSTRUCTIONS ON REVERSE			through09/30/201	4 Page1	.7 of <u>23</u>
NAME OF FILER				I.D. NUM	BER
Muller for City Council 2014				136871	5
CODES: If one of the following codes accurately describes the payment,	you may er	ter the code. Other	wise, describe the paym	nent.	
CMP campaign paraphernalia/misc. MBR member of meetings and consultants MTG meetings are contribution (explain nonmonetary)* CVC civic donations PET petition circle candidate filing/ballot fees PHO phone bar fundraising events independent expenditure supporting/opposing others (explain)* MBR member of meetings of meetings are petition circle explain petition circle petition cir	ommunications and appearand enses culating nks d survey resea delivery and m	es arch essenger services	RAD radio airtime and property returned contribution SAL campaign workers' TEL t.v. or cable airtime TRC candidate travel, lod TRS staff/spouse travel, staf	oduction costs ns salaries and production costs lging, and meals lodging, and meals mmittees of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID
12th Man Club	CVC				375.00
Anedot		cc processing			80.37
Anedot		cc processing			82.62
* Payments that are contributions or independent expenditures must also be sum	accurately describes the payment, you may enter the code. Otherwise, describe the payment. MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions OFC office expenses SAL campaign workers' salaries PHO phone banks TRC candidate travel, lodging, and meals pplu polling and survey research PRO professional services (legal, accounting) PRT print ads CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID CC processing 62 processing 80.37 CC processing 82.62				
Schedule E Summary		10.1 10.0 10.0 10.0 10.0 10.0 10.0 10.0			
1. Itemized payments made this period. (Include all Schedule E subtotals.)				\$	17,149.44
2. Unitemized payments made this period of under \$100				\$	79.56
3. Total interest paid this period on loans. (Enter amount from Schedule B, Par	t 1, Column	(e).)		\$	0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on	the Summa	ry Page, Column A,	Line 6.)	TOTAL \$	17,229.00

Schedule E

Type or print in ink.

00	ILL	111	_	COOLIT	-
SI.	H-111	111 -	-	(CONT	

(Continuation Sheet) Payments Made	Amounts may b to whole do	erounded		Statement covers period from01/01/2014		california 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through09/30/2014	Page	of23 R	
Muller for City Council 2014					1368715		
CODES: If one of the following codes accurately documents of the campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events IND independent expenditure supporting/opposing others (explained to the campaign literature and mailings)	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s ain)* POS postage, deli	munications I appearance ses ating urvey resear very and me	s	RAD radio airtime and product RFD returned contributions SAL campaign workers' salated t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodging TSF transfer between commit VOT voter registration WEB information technology c	ries production costs , and meals ng, and meals ttees of the same		
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE (DR DES	CRIPTION OF PAYMENT		AMOUNT PAID	
Anedot			cc processing			37.24	
Anedot			cc processing			15.90	
Anedot			cc processing			27.21	
Anedot			cc processing	:		29.85	
Anedot		10-10-10-10-10-10-10-10-10-10-10-10-10-1	cc processing			10.05	
Payments that are contributions or independent expenditures i	must also be summarized on S	chedule D.			SUBTOTAL \$	120.25	

Schedule E

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE	to whole dollars.			Statement covers perion	FOR	
NAME OF FILER					I.D. NUMBE	ER .
Muller for City Council 2014					1368715	
CODES: If one of the following codes accurately descricted campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* IND legal defense campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and s POS postage, del	munications d appearance ses lating survey reseal ivery and me	es	RAD radio airtime and program RAD returned contribution SAL campaign workers' TEL t.v. or cable airtime at Candidate travel, lod TRS staff/spouse travel, ITSF transfer between co VOT voter registration WEB information technological radio airtime at the candidate travel, lod TRS staff/spouse travel, ITSF transfer between co VOT voter registration	oduction costs ns salaries and production costs ging, and meals lodging, and meals mmittees of the sam	•
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Anedot			cc processing			2.55
Bieber Communications		CMP				231.66
Bieber Communications		LIT				1,267.84
Bieber Communications		LIT				371.74
Budget Watchdogs (ID# 1345115)		LIT	-			538.00
* Payments that are contributions or independent expenditures must	also be summarized on S	Schedule D.			SUBTOTAL \$	2,411.79

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE E (CONT.)

Statement covers period

(Continuation Sheet) Amounts n		may be rounded ole dollars.		from01/01/	CALIFO FOR	FORM 460	
SEE INSTRUCTIONS ON REVERSE				through09/30/	Page	20 of 23	
NAME OF FILER					I.D. NUMBE	R	
Muller for City Council 2014					1368715		
CODES: If one of the following co	des accurately describes the payme	ent, you may	enter the code. Oth	nerwise, describe th	ne 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/op LEG legal defense LIT campaign literature and mailings	MBR member MTG meeting OFC office of PET petition PHO phone POL polling oposing others (explain)* POS postage	er communication gs and appearant expenses a circulating banks and survey rese e, delivery and a sional services (ns nces	RAD radio airtime RFD returned con SAL campaign wo TEL t.v. or cable a TRC candidate tra TRS staff/spouse of TSF transfer betw VOT voter registra	and production costs tributions orkers' salaries airtime and production costs vel, lodging, and meals travel, lodging, and meals een committees of the sam		
NAME AND A (IF COMMITTEE, A	DDRESS OF PAYEE LSO ENTER I.D. NUMBER)	CODE	OR DE	ESCRIPTION OF PAYMENT		AMOUNT PAID	
CA Voter Guide (ID# 595004)		LIT				318.50	
City of Dana Point		FIL				688.00	
COGS		СМР				1,112.40	
cogs		СМР				554.04	
Continuing the Republican Revoluti	on (ID# 598041)	LIT				275.00	
* Payments that are contributions or indepe	ndent expenditures must also be summarize	ed on Schedule I).		SUBTOTAL \$	2,947.94	

Schedule E

Type or print in ink.

SCHEDU	HEF	CONT

Muller for City Council 2014 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. CMP campaign paraphernalis/misc. CMP campaign paraphernalis/misc. CMS campaign consultants CMB (amber communications) CFC office expenses C			Amounts may b to whole do				01/01/2014	FOR	FORM 460 Page 21 of 23	
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. OAP campaign paraphenalis/misc. MBR member communications (NS campaign consultants CTB confibition (explain normonetary)* CTC confibitions									94	
GRA Voter Guide (ID# 1271601) LIT CORS Voter Guide (ID# 1271601) LIT AMOUNTABLE CORS Voter Guide (ID# 1271601) LIT 400.00 CRA Voter Guide (ID# 1271601) CNS CNS 2,000.00 Impact Placements CMP 237.50	CODES: If one of the following coordinates: CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events IND independent expenditure supporting/op LEG legal defense		MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli PRO professional	munications I appearance ses ating urvey reseavery and m	ces arch essenger services	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and preturned contributicampaign workers t.v. or cable airtime candidate travel, lo staff/spouse travel transfer between over registration	ayment. production costs ions salaries and production costs doging, and meals lodging, and meals committees of the sam	ne candidate/sponsor	
CRA Voter Guide (ID# 1271601) LIT 400.00 Hart & Associates CNS 2,000.00 Hart & Associates CNS 5,000.00	NAME AND AI (IF COMMITTEE, AI	DDRESS OF PAYEE LSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID	
Hart & Associates CNS 5,000.00 Impact Placements CMP 237.50	COPS Voter Guide (ID# 599014) CRA Voter Guide (ID# 1271601)									
Impact Placements CMP 237.50	Hart & Associates			CNS					2,000.00	
Impact Placements CMP 237.50	, 									
	Hart & Associates			CNS					5,000.00	
* Payments that are contributions or independent expenditures must also be summarized on Schedule D. * SUBTOTAL \$ 7,905.50	Impact Placements			СМР					237.50	
	* Payments that are contributions or indeper	ndent expenditures must also	be summarized on S	Schedule D				SUBTOTAL \$	7,905.50	

Schedule E (Continuation Sheet)

Type or print in ink.
Amounts may be rounded

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made		Amounts may be to whole do	rounded			01/01/2014	CALIFOR FORM	
SEE INSTRUCTIONS ON REVERSE					through	09/30/2014	Page2	2 of 23
NAME OF FILER							I.D. NUMBE	3
Muller for City Council 2014							1368715	NV 10780 XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX
CODES: If one of the following code CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees fundraising events		the payment, your meetings and office expension petition circul phone banks POL polling and s	munications I appearance ses ating	s	RAD radio a RFD return SAL campa TEL t.v. or TRC candid	ribe the payme airtime and produc ed contributions lign workers' salar cable airtime and ate travel, lodging pouse travel, lodging	tion costs ries production costs , and meals	
IND independent expenditure supporting/oppi LEG legal defense LIT campaign literature and mailings	osing others (explain)*	POS postage, deli	very and me	ssenger services al, accounting)	TSF transfe VOT voter		ttees of the same	candidate/sponsor
NAME AND ADD (IF COMMITTEE, ALS:	DRESS OF PAYEE O ENTER I.D. NUMBER)		CODE (OR DES	CRIPTION OF PA	YMENT		AMOUNT PAID
Lysa Ray Campaign Services			PRO					500.00
Lvsa Rav Campaign Services			PRO		tal-osava-varia-ris			250.00
Political Data			СМР	4 **	1998			277.97
The Clay Media			СМР					1,800.00
The Clay Media			WEB					398.00
^r Payments that are contributions or independ	ent expenditures must also b	e summarized on S	ichedule D.				SUBTOTAL \$	3,225.97

Schedule	e F		
Accrued	Expenses	(Unpaid	Bills)

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

Muller for City Council 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. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations PET petition circulating TEL t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* IND postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) VOT voter registration

LIT campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

Campaign interactive and mainings	FRI plint aus		vveb information technology costs (internet, e-mail)					
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			
COGS	СМР	0.00	554.04	0.00	554.04			
Impact Placements	СМР	0.00	237.50	0.00	237.50			
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS \$	0.00	791.54	0.00\$	791.54			

Schedule F Summary