Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in ink.	orint In ink. Date Stamp CALIFORNIA FORM					
SEE INSTRUCTIONS ON REVERSE	from10/01/2014 through10/18/2014	of election if applicable: (Month, Day, Year) 11 23 P 2: 11/04/2014 ELECTIVED CITY CLERK'S BEFARTI	Page 1 of 36 For Official Use Only				
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	mplete Parts 1, 2, 3, and 4. Primarily Formed Ballot Measure Committee Controlled Sponsored Uso Complete Part 6) Primarily Formed Candidate/ Ifficeholder Committee Uso Complete Part 7)	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				
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Lisa Bartlett for Supervisor 2014 STREET ADDRESS (NO P.O. BOX)	M. M.	reasurer(s) AME OF TREASURER Jen slater Alling ADDRESS	ZIP CODE AREA CODE/PHONE				
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BO	DE AREA CODE/PHONE CI	AME OF ASSISTANT TREASURER, IF ANY AILING ADDRESS ITY STATE PTIONAL: FAX / E-MAIL ADDRESS	ZIP CODE AREA CODE/PHONE				
Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California	0 10	he information contained herein and in the attach	ed schedules is true and complete. I certify				
Executed on	By Signature of Controlling Office	Signature of Assistant Treasurer Signature of Assistant Treasurer Signature Proposed or Responsible Office	or of Sponsor				
Date Executed on Date	By	Controlling Officeholder, Candidate, State Measure Proponent Controlling Officeholder, Candidate, State Measure Proponent					

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

NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE	- 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			22 111
Bartlett Lisa						
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIS	TRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JURISDICTIO	NC		SUPPORT
County Supervisor: County of Orange Distr	ict 5					OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP	Identify the controlling of	fficeholder, ca	ndidate, or st	ate measure p	roponent, if a
		NAME OF OFFICEHOLDER, CA	NDIDATE, OR PR	ROPONENT		
Related Committees Not Included in this not included in this statement that are controlled by y contributions or make expenditures on behalf of your	ou or are primarily formed to receive	OFFICE SOUGHT OR HELD	11		DISTRICT NO. IF	ANY
	- Wall of the Company was - common to					
COMMITTEE NAME	I.D. NUMBER				55	
COMMITTEE NAME Lisa Bartlett for Dana Point City Council	V				<u></u>	
Lisa Bartlett for Dana Point City Council	1288779	7. Primarily Formed Can	ndidate/Offic	ceholder Co	ommittee <i>Lis</i>	at names of
Lisa Bartlett for Dana Point City Council	1288779 CONTROLLED COMMITTEE?	7. Primarily Formed Can officeholder(s) or candidate(
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater	1288779 CONTROLLED COMMITTEE? X YES NO	officeholder(s) or candidate((s) for which thi	is committee is	primarily forme	ed.
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater	1288779 CONTROLLED COMMITTEE? X YES NO		(s) for which thi	is committee is		ed.
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.	1288779 CONTROLLED COMMITTEE? X YES NO	officeholder(s) or candidate((s) for which thi	OFFICE SOU	primarily forme	SUPPORT
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLLED COMMITTEE? X YES NO D. BOX)	officeholder(s) or candidate(s)	(s) for which thi	OFFICE SOU	GHT OR HELD	SUPPORT
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLLED COMMITTEE? X YES NO D. BOX)	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLLED COMMITTEE? X YES NO D. BOX) IP CODE AREA CODE/PHONE	officeholder(s) or candidate(s)	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.C.) CITY STATE Z COMMITTEE NAME	CONTROLLED COMMITTEE? X YES NO D. BOX) IP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT
Lisa Bartlett for Dana Point City Council NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.	CONTROLLED COMMITTEE? X YES NO D. BOX) IP CODE AREA CODE/PHONE I.D. NUMBER CONTROLLED COMMITTEE? YES NO	NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	CANDIDATE CANDIDATE CANDIDATE	OFFICE SOU	GHT OR HELD	SUPPORT OPPOSE SUPPORT SUPPORT

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 Column B Contributions Received Calendar Year Summary for Candidates TOTAL THIS PERIOD CALENDAR YEAR TOTAL TO DATE Running in Both the State Primary and (FROMATTACHED SCHEDULES) **General Elections** 186,476.00 1/1 through 6/30 7/1 to Date 20,000.00 137,000.00 20. Contributions 323,476.00 Received 4. Nonmonetary Contributions Schedule C. Line 3 1,079.00 9,975.98 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ ____ 40,778.00 \$______ \$____ Made \$ 333,451.98 **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 0.00 0.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ _____ 48,758.20 22. Cumulative Expenditures Made* \$ 317,085.68 (If Subject to Voluntary Expenditure Limit) 9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3 _____-3,685.11 57,481.92 Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 1,079.00 (mm/dd/yy) 9,975.98 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 42,721.11 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 39,699.00 amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments Column A, Line 8 above 48,758.20 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ _____ 33,661.91 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 0.00 carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _____ 194,481.92 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A

Type or print in ink.
Amounts may be rounded

SCHEDULE A

Monetary	Contributions Received	to	whole dollars.	from10/01/2	CA	LIFORNIA FORM	460
	ONS ON REVERSE			through	D14 Pa	ge <u>4</u>	of36
NAME OF FILER					I.D.	NUMBER	
Lisa Bartle	tt for Supervisor 2014		n/A		135	9658	
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)	TC	LECTION DATE EQUIRED)
10/13/2014	Terry Adams	XIND □COM □OTH □PTY □SCC	Engineer SA Recycling	500.00	500.0	0 G2014	\$500.00
10/09/2014	Joanna Adrian	IND COM OTH PTY SCC	Music Education Music for Singers	200.00	200.0	0 G2014	\$200.00
10/14/2014	Muhammad Akhter	IND COM OTH PTY SCC	SVP Operations Hashi Link Corporation	250.00	250.(0 G2014	\$250.00
10/17/2014	AKM Consulting Engineers, Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	250.0	00 G2014	\$250.00
10/17/2014	All American Asphalt / All American Aggregates	☐IND ☐COM 図OTH ☐PTY ☐SCC	g 20	999.00	999.(00 G2014	\$999.00
	5		SUBTOTAL\$	2,199.00			10.464
Amount re (Include a)	A Summary eceived this period – itemized monetary contributions. ill Schedule A subtotals.)				(oth	dual sipient Commi ner than PTY er (e.g., busi	or SCC)
	etary contributions received this period. s 1 and 2. Enter here and on the Summary Page, Colu	ımn A, Line 1.)TOTAL \$	19,699.00	SCC - Sma	all Contributor	Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

		to whole	dollars.	from 10/01,	/2014	ALIFORN FORM	^{IA} 460
NAME OF FILER		5		through10/18/	/2014 Pa	ge5	_ of36
					I.D	NUMBER	
Lisa Bartlet	t for Supervisor 2014		1		13	59658	
DATE RECEIVED	FULL 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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)	0038 87738	ER ELECTION TO DATE REQUIRED)
10/14/2014	Fred Armendariz	⊠IND □COM □OTH □PTY □SCC	Executive Procure America	250.00	250.	00 G2014	\$250.00
10/17/2014	Bail Action Committee (BAC-PAC) (ID# 1351308)	□IND ICOM □OTH □PTY □SCC		250.00	750.1	00 G2014	\$750.00
10/17/2014	Bail Bond Professionals	□IND □COM ☑OTH □PTY □SCC		100.00	100.0	00 G2014	\$100.00
10/17/2014	Colleen Sanborn Cook	⊠IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.0	00 G2014	\$100.00
10/14/2014	Cox Novak Construction, Inc	□IND □COM ☑OTH □PTY □SCC		500.00	1,000.0	0 G2014	\$1,000.00
			SUBTOTAL \$	1,200.00		1	

*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.)

Statement covers period

Monetary	Contributions Received	to whole o		from10/01/	· · · · · ·	LIFORNI FORM	460
				through10/18/	2014 Pag	ge <u>6</u>	of36
NAME OF FILER				AR A STATE	I.D	NUMBER	MT NEALL DEALL
Lisa Bartlett	t for Supervisor 2014		***		13	59658	
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 DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
10/14/2014	Cox Novak Construction, Inc	□IND □COM ⊠OTH □PTY □SCC		500.00	1,000.	00 G2014	\$1,000.00
10/14/2014	Brian Dawson	⊠IND □COM □OTH □PTY □SCC	Retired None	50.00	150.	00 G2014	\$150.00
10/17/2014	Philip G. DeCarion	⊠IND □COM □OTH □PTY □SCC	Real Estate Phillip DeCarion	300.00	300.	00 G2014	\$300.00
10/17/2014	Michael Dunbar	⊠IND □COM □OTH □PTY □SCC	General Manager Emerald Bay Service Dist	100.00	100.	DO P2014 G2014	\$200.00 \$100.00
10/09/2014	Ken Fischbeck	⊠IND □COM □OTH □PTY □SCC	General Contractor Laguna Crest Enterprise, Inc	300.00	300.	00 G2014	\$300.00
			SUBTOTAL	\$ 1,250.00			

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Type or print in ink. Amounts may be rounded

SCHEDULE A	(CONT.)

•		to whole	dollars.	from 10/01		ALIFORNI FORM	[^] 460
				through 10/18	/2014 Pa	ige	of <u>36</u>
NAME OF FILER					1.0	D. NUMBER	
Lisa Bartlet	t for Supervisor 2014		•		13	359658	- Ē j
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)
10/14/2014	Helene Z. Fransz	⊠IND □COM □OTH □PTY □SCC	Attorney Adair & Frans	999.00	999.	00 G2014	\$999.00
10/15/2014	Dennis Geiler	⊠IND □COM □OTH □PTY □SCC	Owner So Cal Self Storage Plaza	1,000.00	1,000.	00 G2014	\$1,000.00
10/13/2014	Gene Gratz	⊠IND □COM □OTH □PTY □SCC	Attorney Law Offices of Eugene C. Gratz	300.00	300.	00 G2014	\$300.00
10/16/2014	Gregg Abel Construction, Inc.	□IND □COM ☑OTH □PTY □SCC		500.00	500.	00 G2014	\$500.00
10/14/2014	Mark C. Hefferan	⊠IND □ COM □ OTH □ PTY □ SCC	Owner H Gallery	50.00	150.	00 G2014	\$150.00
			SUBTOTAL\$	2,849.00			
					the same of the sa		

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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 (CONT.

Statement covers period

wonetary	etary Contributions Received Amounts may be rounded to whole dollars.			from10/01/	CAL	IFORNIA FORM	460
				through10/18/	2014 Page	88	of <u>36</u>
NAME OF FILER				A STATE OF THE STA	I.D. N	UMBER	
Lisa Bartlet	t for Supervisor 2014				135	658	
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)	T	ELECTION O DATE REQUIRED)
10/17/2014	Frederick Heinecke	IND COM OTH PTY SCC	Retired None	100.00	100.00	G2014	\$100.00
10/17/2014	Intratek Computer, Inc.	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	G2014	\$250.00
10/14/2014	Bruce Junor	⊠IND □COM □OTH □PTY □SCC	Owner Engineering & Manufacturing Development	50.00	650.00	P2014 G2014	\$600.00 \$150.00
10/13/2014	James R. King	⊠IND □COM □OTH □PTY □SCC	Corporate Officer Centaurus Financial, Inc	1,000.00	1,000.00	G2014	\$1,000.00
10/09/2014	Lynch Ambulance	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,900.00	1,900.0	G2014	\$1,900.00
			* SUBTOTAL:	\$ 3,300.00			

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IND - Individual

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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 (CONT.)

	to whole dollars.		from10/01/2014 through10/18/2014		FORM 460			
NAME OF FILER		140	through10/18/	Page	99	of <u>36</u>		
Lisa Bartlett for Supervisor 2014					IUMBER			
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IBUTOR 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)		
10/17/2014 John L. Marconi	⊠IND □COM □OTH □PTY □SCC	Chairman Orange Coast Title	350.00	350.00	G2014	\$350.00		
10/17/2014 John A. McDermott II	⊠IND □COM □OTH □PTY □SCC	Attorney John A. McDermott II	300.00	300.00	G2014	\$300.00		
10/17/2014 Ann W. McDonald	⊠IND □COM □OTH □PTY □SCC	Retired None	300.00	300.00	G2014	\$300.00		
10/14/2014 James Miller 10/09/2014 Multi-County Rental Housing PAC (TD# 98043)	□COM □OTH □PTY □SCC	Manager Coffee Importers	250.00	500.00	P2014 G2014	\$250.00 \$250.00		
10/09/2014 Multi-County Rental Housing PAC (ID# 98047	O) IND X COM OTH PTY SCC		900.00	3,800.00	P2014 G2014	\$1,900.00 \$1,900.00		
		SUBTOTAL \$	2,100.00					

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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.)	SCHED	ULEA	(CONT.)
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CALIFORNIA ACO

Statement covers period

	from10/01	/2014	ORM TOO
	through10/18	/2014 Page	10 of 36
NAME OF FILER		I.D. NU	JMBER
Lisa Bartlett for Supervisor 2014		1359	658
DATE (FCOMMITTEE, ALSO ENTER I.D. NUMBER)	N INDIVIDUAL, ENTER PATION AND EMPLOYER RECEIVED THIS OF BUSINESS) AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/17/2014 Eileen Newman	100.00	100.00	G2014 \$100.00
10/16/2014 Nokes & Quinn ☐ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	360.0	360.00	G2014 \$360.00
Orange County Bail Bonds, Inc IND COM COTH PTY SCC	250.0	1,250.00	G2014 \$1,250.00
Pacific Asian Enterprises IND COM OTH PTY SCC	500.0	500.00	G2014 \$500.00
Pacific Coast Nursery, Inc. IND COM OTH PTY SCC	999.0	999.00	G2014 \$999.00
	SUBTOTAL\$ 2,209.0	0	

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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 (CONT.)

		to whole	dollars.	from10/01/	/2014	ALIFORNI. Form	⁴ 460
NAME OF FILER			- W. W W W W W W W	through 10/18/	^{'2014} Pa	ige <u>11</u>	of <u>36</u>
					1.0). NUMBER	575 Ha 28744 W
Lisa Bartlett	t for Supervisor 2014				13	59658	
DATE RECEIVED	FULL 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 DA CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
10/15/2014	Eileen Padberg	XIND COM OTH PTY	Public Relations Eileen Padberg	200.00	200.	00 G2014	\$200.00
10/09/2014	Lauri Peterson	⊠IND □COM □OTH □PTY □SCC	Homemaker None	500.00	500.	00 G2014	\$500.00
10/06/2014	Greq G. Raths		Retired None	150.00	150.	00 G2014	\$150.00
10/14/2014	John Rochford		Attorney Snyder & Langston	250.00	500.	00 G2014	\$500.00
10/17/2014	John Rochford		Attorney Snyder & Langston	250.00	500.1	00 G2014	\$500.00
			SUBTOTAL\$	1,350.00			

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

10/01/2014

NAME OF FILER	: for Supervisor 2014			through 10/18/	raye	12 UMBER 9658	of <u>36</u>		
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)	1 7	ELECTION O DATE REQUIRED)		
10/13/2014	Michael Safranski	⊠IND □COM □OTH □PTY □SCC	Sr Director Facilities Emulex	100.00	100.00	G2014	\$100.00		
10/15/2014	Aaron Shoolman	☑IND □COM □OTH □PTY □SCC	Veterinarian Aaron Shoolman, DVM	500.00	500.00	G2014	\$500.00		
10/17/2014	Signature Bail Bonds	□IND □COM 図OTH □PTY □SCC		100.00	100.00	G2014	\$100.00		
10/14/2014	Michael Sirjani	⊠IND □COM □OTH □PTY □SCC	President Majyk Equip	100.00	100.00	G2014	\$100.00		
10/16/2014	Michael Smithers	⊠IND □COM □OTH □PTY □SCC	Owner The Goddard School	100.00	100.00	G2014	\$100.00		
	SUBTOTAL\$ 900.00								

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PTY - Political Party

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Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

		to whole dollars.		from10/01/	/2014	FORM 46		
NAME OF FILER		-		through10/18/	- ag	13_	of <u>36</u>	
Water and the same of the same					I.D. 1	IUMBER		
Lisa Bartlett	for Supervisor 2014				135	9658		
DATE RECEIVED	FULL 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)	1	ELECTION O DATE REQUIRED)	
10/15/2014	Ivan Spiers	IND COM OTH PTY SCC	Restaurant Owner Mozambique	500.00	500.00	G2014	\$500.00	
	Harry Stavrou	⊠IND □COM □OTH □PTY □SCC	Executive Startek	100.00	100.00	G2014	\$100.00	
10/14/2014	TBW Company, LP dba Dana West Marina	□IND □COM ☑OTH □PTY □SCC		500.00	500.00	G2014	\$500.00	
	Thomas M. Vetter	⊠IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	G2014	\$100.00	
10/14/2014	Carol Wilson		Retired None	100.00	100.00	G2014	\$100.00	
			SUBTOTAL\$	1,300.00				

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OTH – Other (e.g., business entity) PTY – Political Party

SCC - Small Contributor Committee

Type or print in ink.

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SCHEDULE A	(CONT.)

CALIFORNIA ACO

Statement covers period

				from 10/01/ through 10/18/		ORM 400
NAME OF FILER	t for Consuminar 2014				X80 (0.88)	JMBER
Lisa Bartiet	t for Supervisor 2014		T		1359	658
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
10/14/2014	Dana Yarger	XIND COM OTH PTY SCC	Chairman Elephant Parade	200.00	700.00	P2014 \$250.00 G2014 \$450.00
		□IND □COM □OTH □PTY □SCC				
		□IND □COM □OTH □PTY □SCC				
100000		□IND □COM □OTH □PTY □SCC				
		☐IND ☐COM ☐OTH ☐PTY ☐SCC				
			SUBTOTAL	\$ 200.00		

*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

Sched	ule	B-	Part 1
Loans	Rec	eiv	ed

Type or print in ink.
Amounts may be rounded

SCHEDUI	FR	DADT 1

Loans Received	Am	ounts may be re to whole dolla			Statement cov	vers period	CALIFORN FORM	^{IA} 460
SEE INSTRUCTIONS ON REVERSE					through10/1	8/2014	Page15_	of36
NAME OF FILER			*				I.D. NUMBER	01 _ 30
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 (IF SELF-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	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point	, 5,11105		PAID \$ 0.00	I CINOS	0.00%	\$ 20,000.00	CALENDAR YEAR \$ _62,601.80
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$20,000.00	\$0.00	FORGIVEN \$0.00	DATE DUE	\$0.00	08/10/2013 DATE INCURRED	PER ELECTION** P2014 117,601.8 G2014 20,000.00
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point			PAID \$0.00 FORGIVEN		RATE	\$_55,000.00	\$ 62,601.80 PER ELECTION **
[†] ⊠IND □ COM □ OTH □ PTY □ SCC		\$_55,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	12/31/2013 DATE INCURRED	P2014 117,601.8 G2014 20,000.00
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point			PAID \$0.00 FORGIVEN	\$20,000.00	0.00% RATE	\$_20,000.00	CALENDAR YEAR \$ 62,601.80 PER ELECTION ** P2014 117,601.8
TO IND COM OTH PTY SCC	3	\$ _20,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	05/09/2014 DATE INCURRED	\$
		SUBTOTALS \$	0.00	0.0	0\$ 95,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
 Loans received this period	s of less than \$100.)		••••••	\$	20,000.00			
 Loans paid or forgiven this period (Total Column (c) plus loans under \$100 (Include loans paid by a third party that) paid or forgiven.)			\$	0.00	INE CO OT	ontributor Codes D – Individual M – Recipient Co (other than F H – Other (e.g., I	PTY or SCC)
 Net change this period. (Subtract Line Enter the net here and on the Summar 	e 2 from Line 1.) y Page, Column A, Line 2.			NET \$	20,000.00 ay be a negative number)	PT	Y – Political Party C – Small Contrib	
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.							

Schedule B – Part 1 (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE B - PA	RT 1 (CONT.)
CALIFORNIA	460

Statement covers period

Loans Received		to whole dollar	s.		from10/0	1/2014	FORM	400
SEE INSTRUCTIONS ON REVERSE					through10/18	3/2014	Page16_	of36
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 PERIO	N 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	s 5,000.00	e 0.00	PAID \$ 0.0 FORGIVEN 0.0	5,000.00	0.00% % RATE	\$_5,000.00 06/13/2014	CALENDAR YEAR \$ 62,601.80 PER ELECTION** P2014 117,601.80 G2014 20,000.00
[†] ☑ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC		·		,	DATE DUE	3 0.00	DATE INCURRED	3
Tisa Bartlett Tilde IND	Partner/Councilwoman Blue Water Realty/City of Dana Point	\$17,000.00	\$0.00	□ PAID \$0.0 □ FORGIVEN \$0.0	-	%%	\$ 17,000.00 06/30/2014 DATE INCURRED	\$ 62,601.80 PER ELECTION ** P2014 117,601.80 G2014 20,000.00
t IND □ COM □ OTH □ PTY □ SCC	Partner/Councilwoman Blue Water Realty/City of Dana Point	\$	\$ <u>20,000.00</u>	□ PAID \$0.0 □ FORGIVEN \$0.0		0.00% % RATE	\$ _20,000.00 10/18/2014 DATE INCURRED	\$ _62,601.80 PERELECTION** P2014 117,601.80 G2014 20,000.00
† IND COM OTH PTY SCC		\$	\$	PAID \$ FORGIVEN \$	S	% RATE	\$	S PER ELECTION **
	***	SUBTOTALS \$	20,000.00	o .	00\$ 42,000.00	\$ 0.00		

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

†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.

		SCHEDULE (
Staten	nent covers period	CALIFORNIA ACO
from	10/01/2014	FORM 40U
through_	10/18/2014	Page 17 of 36
		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Lisa Bartlett for Supervisor 2014 1359658 IF AN INDIVIDUAL, ENTER CUMULATIVE TO FULL NAME, STREET ADDRESS AND CONTRIBUTOR AMOUNT/ DATE **DESCRIPTION OF** PER ELECTION OCCUPATION AND EMPLOYER ZIP CODE OF CONTRIBUTOR DATE CODE * FAIR MARKET RECEIVED GOODS OR SERVICES TO DATE (IF SELF-EMPLOYED, ENTER CALENDAR YEAR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) VALUE NAME OF BUSINESS) (IF REQUIRED) (JAN 1 - DEC 31) 10/13/2014 Damian Collins Restaurant Owner XIND 10/13 Event Costs 1,079.00 1,079.00 G2014 \$1,079.00 Stillwater Reception Only □ COM □ OTH □PTY SCC IND ПСОМ ПОТН □ PTY SCC COM OTH PTY SCC IND COM OTH PTY SCC Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,079.00 Schedule C Summary *Contributor Codes 1. Amount received this period – itemized nonmonetary contributions. IND - Individual

(Include all Schedule C subtotals.)\$ _ 2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$ 3. Total nonmonetary contributions received this period. 1,079.00

COM - Recipient Committee

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

PTY - Political Party

SCC - Small Contributor Committee

Onless fed of E	Type or print in ink				SCI					
Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			s	Statement covers period			CALIFORNIA		
rayments wade				fror	n	10/01/2014	FORM 460		700	
SEE INSTRUCTIONS ON REVERSE				thro	ough _	10/18/2014	. Page <u>1</u>	8 of	36	
NAME OF FILER							I.D. NUM	BER		
Lisa Bartlett for Supervisor 2014					10 -0.0		135965	8		
CODES: If one of the following codes accurately describe	s the payment, yo	u may e	nter the code. Ot	herwise, d	descri	be 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 LIT campaign literature and mailings		d appearar uses lating s survey rese livery and r	ces	RFD	return camp t.v. or candi staff/s trans voter	airtime and production ned contributions haign workers' salaries reable airtime and producte travel, lodging, ar spouse travel, lodging, for between committee registration mation technology cost	s nduction costs nd meals , and meals es of the sam	ne candid	ate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF P	AYMENT		AMO	UNT PAID	
AFCO Insurance		OFC							52.50	
American Express		MTG	Candidate Eve	nt Costs	- Rece	eption Only		5.11	193.50	
American Express		POS		1001 \$ 1000				· · · · · · · · · · · · · · · · · · ·	53.0	
* Payments that are contributions or independent expenditures	must also be sumn	narized on	Schedule D.			s	UBTOTAL\$	-	299.0	
Schedule E Summary			an engage and a second a second and a second a second and							
1. Itemized payments made this period. (Include all Schedule	e E subtotals.)			***************************************			\$	48	,758.20	
2. Unitemized payments made this period of under \$100			***************************************			***************************************	\$		0.00	
3. Total interest paid this period on loans. (Enter amount from	n Schedule B, Part	1, Colum	n (e).)		******	***************************************	\$		0.00	

Schedule E	
(Continuation	on Sheet)
Payments N	lade

Type or print in ink.
Amounts may be rounded

SCHEDULE E (CON

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.					Statement covers per from10/01/201	C,	CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER	The state of the s	and the second s		**************************************		through10/18/201	4 F	age <u>19</u> of	36
							1.1	D. NUMBER	
Lisa Bartlett for Supervisor 2014								359658	Maria de la compansión de
CODES: If one of the following coordinates of the following coordinates campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/op legal defense LIT campaign literature and mailings	MBF MTG OFC PET PHO PO	member commeetings and office expenies office expenies petition circul phone banks polling and sepostage, deliprofessional	munication d appearan ses ating urvey rese very and	ns nces	es)	RAD radio airtime and returned contribu campaign worker TEL t.v. or cable airtim TRC candidate travel, I TRS staff/spouse trave transfer between VOT web information technical radio airtimeter travel transfer between voter registration information technical radio airtimeter travel travel transfer between voter registration information technical radio airtimeter travel tra	production cost tions s' salaries se and production odging, and me sl, lodging, and committees of	on costs als meals the same candida	ite/sponsor
NAME AND AE (IF COMMITTEE, AL	DDRESS OF PAYEE SO ENTER I.D. NUMBER)		CODE	OR	DESCR	RIPTION OF PAYMENT		AMOUN	IT PAID
California Hope Trust			OFC						990.84
California Hope Trust			OFC		-				721.33
Campaign Compliance Group Inc			PRO						612.50

Campaign Solutions			WEB						90.68
		_						J = 12	
Campaign Solutions			WEB						258.18
* Payments that are contributions or indepen	dent expenditures must also be s	ummarized on S	Schedule I	D.			SUBTO	TAL \$	2,673.53

Schedule E	
(Continuation S	heet)
Payments Made	

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

CALIFORNIA

Statement covers period

FORM 10/01/2014 through ____10/18/2014 Page 20 of 36 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 FIL candidate filing/ballot fees PHO phone banks TRC candidate travel, lodging, and meals fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services **TSF** 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 Campaign Solutions WEB 51.42 Campaign Solutions 376.67 Campaign Solutions WEB 73.30 Evan Chaffee CNS 1,750.00 Evan Chaffee CNS 1,750,00 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 4,001.39

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE E (CONT.)

Statement covers period

(Continuation Sheet) Payments Made	Amounts may be rounded to whole dollars.				from		14	FORNIA 460 9 21 of 36
NAME OF FILER			-					JMBER
Lisa Bartlett for Supervisor 2014		100000000000000000000000000000000000000					1359	658
codes: If one of the following code campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opp legal defense LIT campaign literature and mailings	posing others (explain)*	MBR member commetings and office expensional petition circul PHO phone banks polling and suppose postage, deliverselves.	munications d appearance ses ating urvey resear very and me	es	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and returned contribicampaign worke t.v. or cable airticandidate travel, staff/spouse travet transfer between voter registration	I production costs utions rs' salaries me and production c lodging, and meals el, lodging, and mea committees of the	als same candidate/sponsor
(IF COMMITTEE, ALS	DRESS OF PAYEE SO ENTER (.D. NUMBER)		CODE	OR [DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Cox Communications			OFC					342.00
Pacific Fundraising Strategies			OFC					77.25
Pacific Fundraising Strategies			CNS					3,424.78
Political Data Inc.			LIT					3,700.00
Sergio Prince			CNS					3,750.00
Payments that are contributions or independ	dent expenditures must also	be summarized on S	Schedule D.				SUBTOTAL	L\$ 11,294.03
							UUD I OIA	11,294.03

Schedule E	
(Continuation Sheet)	
Payments Made	

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE E (CONT.)

CALIFORNIA

Statement covers period

FORM 10/01/2014 through ___10/18/2014 Page ___ 22 __ of __ 36 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 meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs PET candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals fundraising events polling and survey research POL staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services TSF LEG legal defense professional services (legal, accounting) VOT voter registration campaign literature and mailings WEB information technology costs (internet, e-mail) PRT print ads NAME AND ADDRESS OF PAYEE OR CODE DESCRIPTION OF PAYMENT AMOUNT PAID (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Venture Strategic Inc LIT 25,000.00 Venture Strategic Inc CNS 4,500.00 Voter Connections/eFundraising OFC 288.75 Voter Connections/eFundraising OFC 459.00 Voter Connections/eFundraising OFC 57.00 * Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 30,304.75

Schedule E (Continuation Sheet)

Type or print in ink.

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made		Amounts may be rounded to whole dollars.				nent covers period	california 460		
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through_	10/18/2014	Page	23 of 36	
Lisa Bartlett for Supervisor 2014				8			I.D. NUMBI 1359658	204) CE3	
CODES: If one of the following coordinates are compaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/op LEG legal defense campaign literature and mailings	posing others (explain)*	MBR member common meetings and office expen petition circul PHO phone banks POL polling and s postage, deli	munications I appearance ses ating urvey reseavery and me	es	RAD rad RFD retu SAL can TEL t.v. TRC can TRS stat TSF trar VOT vote	scribe the paymen o airtime and production of contributions in paign workers' salarie or cable airtime and prodidate travel, lodging, aff/spouse travel, lodging isfer between committeer registration remation technology cos	s soduction costs and meals g, and meals ges of the same	ne candidate/sponsor	
	DDRESS OF PAYEE LSO ENTER I.D. NUMBER)		CODE	OR [DESCRIPTION OF	PAYMENT		AMOUNT PAID	
Voter Connections/eFundraising			OFC					185.50	
		*						2	
Payments that are contributions or indepen	ndent expenditures must also	be summarized on S	chedule D.			S	JBTOTAL \$	185.50	

Schedule F Accrued Expenses (Unpaid Bills)

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

CALIFORNIA Statement covers period **FORM** 10/01/2014 through 10/18/2014 Page 24 of 36 I.D. NUMBER

1359658

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

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. campaign paraphernalia/misc.

print ads

POL

PRO

PRT

campaign consultants CNS contribution (explain nonmonetary)* CVC civic donations PET PHO

candidate filing/ballot fees FIL fundraising events

independent expenditure supporting/opposing others (explain)* legal defense

campaign literature and mailings LIT

MBR member communications RAD radio airtime and production costs

MTG meetings and appearances RFD returned contributions OFC office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs

phone banks TRC candidate travel, lodging, and meals polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet e-mail)

Sampaign Moratare and Mainings	Titt print aus							
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	TEL See Schedule G for Details	5,145.00	0.00	0.00	5,145.00			
Campaign Solutions	WEB	73.30	0.00	73.30	0.00			
Campaign Solutions	WEB	376.67	0.00	376.67	0.0			
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS	\$ 5,594.97 \$	5 0.00\$	449.97	5,145.00			

professional services (legal, accounting)

Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on

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 \$ \frac{-3,685.11}{May be a negative number}

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Stater	nent covers period	CALIFORNIA /	60
from	10/01/2014	FORM	UU
through_	10/18/2014	Page25 of	36
		I.D. 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.

					o, accorde the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances		returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses		campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)		voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)
7.0					

^{*} 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
Venture Strategic Inc	CNS	10,000.00	0.00	0.00	10,000.00
Campaign Solutions	WEB	51.42	0.00	51.42	0.00
The Pacific Club	MTG 7/31 Campaign Strategy Luncheon - 21 Attendees including Candidate	761.36	0.00	0.00	761.36
Campaign Solutions	WEB	90.68	0.00	90.68	0.00
	SUBTOTALS	10,903.46	0.00\$	142.10 \$	10,761.36

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period		CALIFORNIA 460
from	10/01/2014	FORM 400
through_	10/18/2014	Page26 of36
		I.D. NUMBER
		1359659

NAME OF FILER

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.

					į
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research		staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)		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
Venture Strategic Inc	CNS	4,500.00	0.00	0.00	4,500.00
Venture Strategic Inc	PRT	287.50	0.00	0.00	287.50
Venture Strategic Inc	LIT	345.00	0.00	0.00	345.00
Political Data Inc.	LIT	3,700.00	0.00	3,700.00	0.00
	SUBTOTALS :	\$ 8,832.50\$	0.00\$	3,700.00	5,132.50

Lisa Bartlett for Supervisor 2014

NAME OF FILER

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

	Statement covers period	CALIFORNIA ACO
	from10/01/2014	FORM 400
	through10/18/2014	Page27 of36
_		I.D. NUMBER
		1359658

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

CO	DES. If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP CNS	campaign paraphernalia/misc. campaign consultants	MBR MTG	member communications meetings and appearances		radio airtime and production costs returned contributions
CVC FIL FND IND	contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	OFC PET PHO POL POS PRO	office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)	SAL TEL TRC TRS TSF VOT	campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor voter registration
* ~	campaign increase and mainings	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
Venture Strategic Inc	LIT Slate Card	1,696.25	0.00	0.00	1,696.25
Campaign Solutions	WEB	258.18	0.00	258.18	0.00
Cox Communications	OFC	342.00	0.00	342.00	0.00
Cardmember Services	FND	8,499.19	0.00	0.00	8,499.19
	SUBTOTALS :	10,795.62\$	0.00\$	600.18 \$	10,195.44

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)
ment covers period CALIFORNIA

1359658

 Statement covers period from _____10/01/2014
 CALIFORNIA FORM
 460

 through _____10/18/2014
 Page ____28 ___ of ___36

 I.D. NUMBER

NAME OF FILER

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.

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		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)

^{*} 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
Venture Strategic Inc	CNS	4,500.00	0.00	4,500.00	0.00
	1 52			2 - 2 222	
Venture Strategic Inc	LIT	287.50	0.00	0.00	287.50
California Hope Trust	OFC	721.33	0.00	721.33	0.00
Campaign Compliance Group Inc	PRO	612.50	0.00	612.50	0.00
	SUBTOTALS	\$ 6,121.33\$	6 0.00\$	5,833.83	287.50

Lisa Bartlett for Supervisor 2014

NAME OF FILER

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

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA AGO				
from 10/01/2014	FORM TOU				
through 10/18/2014	Page29 of36				
	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 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 phone banks candidate travel, lodging, and meals FND fundraising events POL polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* 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
Pacific Fundraising Strategies	CNS	7,294.90	0.00	3,424.78	3,870.12
Pacific Fundraising Strategies	OFC	77.25	0.00	77.25	0.00
Campaign Solutions	WEB	0.00	556.21	0.00	556.2
Venture Strategic Inc	WEB	0.00	1,500.00	0.00	1,500.00
	SUBTOTALS \$	7,372.15	2,056.21\$	3,502.03 \$	5,926.33

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

SCHEDULE F (CONT.)

State	ment covers period	CALIFORNIA 160
from	10/01/2014	FORM TOU
through.	10/18/2014	Page30 of36
		I.D. NUMBER
		1359658

NAME OF FILER

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. 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 candidate filing/ballot fees phone banks PHO TRC candidate travel, lodging, and meals FND fundraising events polling and survey research POL TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* TSF transfer between committees of the same candidate/sponsor POS postage, delivery and messenger services 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)

^{*} 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
Venture Strategic Inc	CNS	0.00	3,750.00	0.00	3,750.00
Venture Strategic Inc	LIT	0.00	3,407.59	0.00	3,407.59
Campaign Compliance Group Inc	PRO	0.00	950.00	0.00	950.00
Cox Communications	OFC	0.00	342.00	0.00	342.00
	SUBTOTALS	\$ 0.00	8,449.59\$	0.00 \$	8,449.59

Lisa Bartlett for Supervisor 2014

NAME OF FILER

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

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 160
from10/01/2014	FORM 400
through10/18/2014	Page 31 of 36
	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 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 TRC candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services **TSF** transfer between committees of the same candidate/sponsor LEG legal defense professional services (legal, accounting) 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
Evan Chaffee	CNS	2,500.00	0.00	0.00	2,500.00
Evan Chaffee	CNS	1,750.00	0.00	1,750.00	0.00
Evan Chaffee	CNS	1,750.00	0.00	1,750.00	0.00
Evan Chaffee	CNS	1,750.00	0.00	0.00	1,750.00
	SUBTOTALS \$	7,750.00\$	0.00\$	3,500.00\$	4,250.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Stater	nent covers period	CALIFORNIA 160
from	10/01/2014	FORM 400
through_	10/18/2014	Page 32 of 36
** * * * * * * * * * * * * * * * * * * *		I.D. 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.

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CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances	RFD	returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, e-mail)

^{*} 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 See Schedule G for Details	0.00	1,787.20	0.00	1,787.20
Evan Chaffee	CNS	0.00	1,750.00	0.00	1,750.00
Sergio Prince	CNS	3,750.00	0.00	3,750.00	0.00
Sergio Prince	CNS	0.00	3,750.00	0.00	3,750.00
	SUBTOTALS	\$ 3,750.00	7,287.20\$	3,750.00	7,287.20

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	nent covers period	CALIFORNIA ACO
from	10/01/2014	FORM 46U
through ₋	through10/18/2014	Page 33 of 36
	The state of the s	I.D. NUMBER
		1359658

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Lisa Bartlett for Supervisor 2014

SEE INSTRUCTIONS ON REVERSE

American Express

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. member communications CNS campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)* OFC office expenses CVC civic donations petition circulating

FIL candidate filing/ballot fees PHO phone banks FND fundraising events polling and survey research

independent expenditure supporting/opposing others (explain)* IND POS postage, delivery and messenger services LFG legal defense professional services (legal, accounting)

campaign literature and mailings 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

TSF transfer between committees of the same candidate/sponsor

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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Gederal Express	POS		53.00
('Ya Bistro	MTG C	andidate Event Costs - Reception Only	193.5

^{*} 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.

TOTAL* \$

246.50

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

Type or print in ink.

Amounts may be rounded to whole dollars.

		SUNEDULE G
Stater	ment covers period	CALIFORNIA 160
from	10/01/2014	FORM 40U
through_	10/18/2014	Page 34 of 36
		I.D. NUMBER

1359658

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lisa Bartlett for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Evan Chaffee

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 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 candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals TRC FND fundraising events polling and survey research POL staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsor

IND independent expenditure supporting/opposing others (explain)* POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads

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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Facebook	WEB		488.75
Staples	LIT		420.08
The Hills Hotel	MTG	10/9 Reception Costs	226.80
The Register	PRT		440.00
Attach additional information on appropriately labeled continuation sheets.		TOTAL*	\$ 1,575.63

^{*} 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 (Continuation Sheet)	
Payments Made by an Agent or Independen	nt
Contractor (on Behalf of This Committee)	

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

SCHEDULE G (CONT.)

Statement covers period CALIFORNIA 10/01/2014 from **FORM** through ___ 10/18/2014 Page 35 of 36 I.D. NUMBER 1359658

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Lisa Bartlett for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Evan Chaffee

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 candidate filing/ballot fees FND fundraising events

independent expenditure supporting/opposing others (explain)* IND LEG 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 costs

RFD returned contributions SAL campaign workers' salaries

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

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

^{*} 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 O	R DESCRIPTION OF PAYMENT	AMOUNT PAID
Verizon Wireless	OFC		77.5

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

77.57

^{*} 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	

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE G
Statement covers period		CALIFORNIA ACO
from	10/01/2014	FORM 46U
through10/18/2014	Page 36 of 36	
	I.D. NUMBER	

1359658

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lisa Bartlett for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Venture Strategic Inc

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 LIT campaign literature and mailings MBR member communications

MTG meetings and appearances OFC office expenses

PET petition circulating PHO phone banks

POL polling and survey research
POS postage, delivery and messenger services

PRO professional services (legal, accounting)
PRT print ads

RAD radio airtime and production costs

RFD returned contributions SAL campaign workers' salaries

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

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

^{*} 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	AMOUNT PAID
DMI Direct	LIT		25,000.00
	0.0004		Dr. E. S
DMI Direct	LIT		2,963.0

* 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.

FPPC Form 460 (January/05)

27,963.00

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

TOTAL* \$