Recipient Committee Campaign Statement Cover Page	Type or print in	ink.	- Date Stamp	CALIFORNIA 460
(Government Code Sections 84200-84216.5)		CITY C	PARIA PONIT	I ONIV
SEE INSTRUCTIONS ON REVERSE	Statement covers period from07/01/2014	Date of election if applicable: (Month, Day, Year)	23 P 2:41	For Official Use Only
	through09/30/2014	11/04/2014 (ITY CL	a's departmen	iI
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 So Complete Part 6) Primarily Formed Candidate/ Officeholder Committee So Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain be	low)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495
5. Committee information	. NUMBER 1359658	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Lisa Bartlett for Supervisor 2014 STREET ADDRESS (NO P.O. BOX)		NAME OF TREASURER Jen Slater MAILING ADDRESS CITY	STATE	ZIP CODE AREA CODE/PHONE
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B		NAME OF ASSISTANT TREASURE	ER, IF ANY	
CITY STATE ZIP CO	DE AREA CODE/PHONE	CITY	STATE	ZIP CODE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS	
4. Verification I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California Executed on	BySignature of Con	Signature of Treagurer or Assistant Treagurer of Treagurer or Assistant Treagurer or Treagurer or Assistant Treagurer or Treagurer or Treagurer or Assistant Treagurer or Treagurer or Treagurer or Treagurer or Treagurer or Assistant Treagurer or Treagur	easurer /	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	e Measure Proponent	
Executed on	Ву	Signature of Controlling Officeholder, Candidate, Stat	e 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		1	NAME OF BALLOT MEASURE	West American			
Bartlett Lisa							
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRIC	T NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON		SUPPORT
County Supervisor: County of Orange District	Section 1997			507 NO 31 NO 11 NO 12 NO			OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) C	TY STATE ZIP		Identify the controlling of	ficeholder, ca	ndidate, or st	ate measure r	proponent, if a
			NAME OF OFFICEHOLDER, CA				,
Related Committees Not Included in this Sta not included in this statement that are controlled by you contributions or make expenditures on behalf of your car	or are primarily formed to receive	9	OFFICE SOUGHT OR HELD	041 ,		DISTRICT NO. I	F ANY
COMMITTEE NAME	I.D. NUMBER	9.5					
Lisa Bartlett for Dana Point City Council	1288779						
NAME OF TREASURER	1288779 CONTROLLED COMMITTEE? X YES	7.	Primarily Formed Can officeholder(s) or candidate(didate/Offic s) for which th	ceholder Co	ommittee Lis primarily form	st names of ed.
NAME OF TREASURER Jen Slater	CONTROLLED COMMITTEE? X YES NO		Primarily Formed Can officeholder(s) or candidate(s) for which th	is committee is	ommittee List primarily form	st names of ed.
NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B CITY STATE ZIP C	CONTROLLED COMMITTEE? X YES NO OX)		officeholder(s) or candidate(s) for which the	OFFICE SOU	primarily form	ed.
NAME OF TREASURER Jen Slater COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	CONTROLLED COMMITTEE? X YES NO DX)		officeholder(s) or candidate(s)	s) for which the	OFFICE SOU	GPT OR HELD	SUPPOR
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. B	CONTROLLED COMMITTEE? X YES NO DX) ODE AREA CODE/PHONE		officeholder(s) or candidate(s) NAME OF OFFICEHOLDER OR NAME OF OFFICEHOLDER OR	s) for which the	OFFICE SOU	GHT OR HELD GHT OR HELD	SUPP OPPO

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

Statem	ent covers period	CALIFORNIA 460
from	07/01/2014	FORM 400
through _	09/30/2014	Page3 of62
		I.D. NUMBER

01111111011010

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Lisa Bartlett for Supervisor 2014 1359658 Column A Column B Calendar Year Summary for Candidates Contributions Received TOTAL THIS PERIOD **CALENDAR YEAR** Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 1. Monetary Contributions Schedule A, Line 3 \$ ____ 109,189.00 166,777.00 1/1 through 6/30 7/1 to Date 117,000.00 20. Contributions 283,777.00 Received 4. Nonmonetary Contributions Schedule C. Line 3 5,432.24 8,896.98 21. Expenditures Made 292,673.98 **Expenditures Made Expenditure Limit Summary for State** Candidates 0.00 0.00 22. Cumulative Expenditures Made* 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 99,326.14 \$ 268,327.48 (If Subject to Voluntary Expenditure Limit) 7,525.52 61,167.03 Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 5,432.24 (mm/dd/yy) 8,896.98 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 32,599.35 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 109,189.00 amounts in Column A to the corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 258.90 from Column B of your last reported in Column B. report. Some amounts in 15. Cash Payments Column A, Line 8 above 99,326.14 Column A may be negative 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 42,721.11 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ _____ 178,167.03 FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A Monetary Contributions Received		Amoun	e or print in ink. ts may be rounded whole dollars.	Statement covers period from07/01/2014			CALIFORNIA 460			
SEE INSTRUCTIO	ONS ON REVERSE			through09/30/20	14	Page	44	of <u>62</u>		
NAME OF FILER						I.D. N	UMBER			
Lisa Bartlet	tt for Supervisor 2014			<i>iii i</i>		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)		CALENDAR YEAR		T	ELECTION O DATE REQUIRED)
07/11/2014	Douglas Abramson	⊠IND □COM □OTH □PTY □SCC	Civil Engineer Douglas Abramson	500.00	2,0	000.00	P2014 G2014	\$1,000.00 \$1,000.00		
09/30/2014	Douglas Abramson	IND COM OTH PTY SCC	Civil Engineer Douglas Abramson	500.00	2,	000.00	P2014 G2014	\$1,000.00 \$1,000.00		
09/24/2014	Glenn Acosta	☑IND □COM □OTH □PTY □SCC	Director Trabuco Canyon Water District	500.00	2019	500.00	G2014	\$500.00		
09/25/2014	Mariorie Adams	⊠IND □COM □OTH □PTY □SCC	Retired None	1,900.00	2,	800.00	P2014 G2014	\$900.00 \$1,900.00		
09/30/2014	Alliance Government Funding, Inc	☐IND ☐COM 図OTH ☐PTY ☐SCC		100.00		100.00	G2014	\$100.00		
			SUBTOTAL	3,500.00						
	A Summary eceived this period – itemized monetary contributions.				\$250,000 pg	tributor - Individ				

2. Amount received this period – unitemized monetary contributions of less than \$100\$ ______

 COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	['] 2014	ORM	400
			through09/30/	²⁰¹⁴ Page	5	of <u>62</u>
NAME OF FILER		e mora e la		I.D. NI	JMBER	
Lisa Bartlett for Supervisor 2014				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)	100000	R ELECTION TO DATE REQUIRED)
09/30/2014 Ann Matteson Consulting, Inc	☐IND ☐COM 図OTH ☐PTY ☐SCC		999.00	999.00	G2014	\$999.00
08/22/2014 Christopher Arns	⊠IND □COM □OTH □PTY □SCC	Substation Operator Southern California Edison	250.00	500.00	G2014	\$500.00
09/30/2014 Christopher Arns	IND COM OTH PTY SCC	Substation Operator Southern California Edison	250.00	500.00	G2014	\$500.00
09/29/2014 Aventura Sailing	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	G2014	\$250.00
09/29/2014 Back Bay Trust	□IND □COM ☑OTH □PTY □SCC	Cate Schmidt/Trustee Attorney/McNicholas & McNicholas, LP	800.00	800.00	G2014	\$800.00
		SUBTOTAL\$	2,549.00			

*Contributor Codes
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(other than PTY or SCC)
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Type or print in ink. Amounts may be rounded

SCHEDULE A (CON

monetary Contributions Received		to whole dollars.			2014 CAI	FORM 460		
				through 09/30/	2014 Page	66	of62	
NAME OF FILER					I.D.1	NUMBER		
Lisa Bartlett	for Supervisor 2014		,	4	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)		R ELECTION TO DATE REQUIRED)	
09/24/2014	Bail Action Committee (BAC-PAC) (ID# 1351308)	□IND ICOM □OTH □PTY □SCC		500.00	500.0	G2014	\$500.00	
07/14/2014	Joel Bishop	⊠IND □COM □OTH □PTY □SCC	Owner VESystems	1,900.00	1,900.0	P2014 G2014	\$1,900.00 \$1,900.00	
09/30/2014	Anna T. Boyce		Retired None	100.00	100.0	G2014	\$100.00	
09/10/2014	Marilyn C. Brewer	⊠IND □COM □OTH □PTY □SCC	Retired None	500.00	500.0	G2014	\$500.00	
08/04/2014	Erik Brown	XIND COM OTH PTY SCC	CEO Dynamic Marketing, Inc	1,900.00	3,800.0	D P2014 G2014	\$1,900.00 \$1,900.00	
			SUBTOTAL	\$ 4,900.00				

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Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received	to whole o					
		1	through 09/30/	2014	Page	7 of 62
NAME OF FILER					I.D. NUM	BER
Lisa Bartlett for Supervisor 2014		9000 7007 6411			135965	8
RECEIVED (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 REQUIRED)
09/30/2014 Building Industry Assoc of S/C (ID# 741733)	□IND ICOM □OTH □PTY □SCC		1,000.00	1,50	00.00 P	2014 \$500.0 2014 \$1,000.0
09/01/2014 Karen Burke		Designer Karen B Designs	1,900.00	1,90	00.00 G	2014 \$1,900.0
07/24/2014 Peter Burke	☑IND □COM □OTH □PTY □SCC	Apparel Manufacturer PJ Salvage	1,900.00	1,90	00.00 G	\$1,900.0
09/12/2014 C J Segerstrom & Sons	□IND □COM ☑OTH □PTY □SCC		1,900.00	1,90	0.00 G	2014 \$1,900.0
09/10/2014 Cabco Yellow, Inc	□IND □COM ☑OTH □PTY □SCC		250.00	25	0.00 G	2014 \$250.0
		SUBTOTAL \$	6,950.00			

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Type or print in ink. Amounts may be rounded

SCHEDULE A	(CONT.)

Monetary	Contributions Received	to whole o		from 07/01/	2		FORNIA ORM	460
				through 09/30/	2014	Page_	8	of62
NAME OF FILER						I.D. NU	MBER	
Lisa Bartlett	for Supervisor 2014				T.,	13596	558	
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	T	ELECTION O DATE REQUIRED)
09/05/2014	California Women's Leadership Assoc PAC (ID# 1237224)	□IND ☑COM □OTH □PTY □SCC		500.00	5	00.00	G2014	\$500.00
09/12/2014	Callahan & Blaine APC	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00	G2014	\$1,000.00
08/26/2014	Caltrop	□IND □COM 図OTH □PTY □SCC		1,900.00	1,9	00.00	G2014	\$1,900.00
09/10/2014	Lynn E. Capouya	⊠IND □COM □OTH □PTY □SCC	Landscape Architect Lynn Capouya, Inc	250.00	2	50.00	G2014	\$250.00
09/29/2014	Cedar Street Trust	☐IND ☐COM ☑OTH ☐PTY ☐SCC	Yvonne Walsh/Trustee Homemaker/None	800.00	8	00.00	G2014	\$800.00
-3			SUBTOTAL	\$ 4,450.00			164	

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Type or print in ink. Amounts may be rounded

SCHEDULE A (C

,		to whole	dollars.	from07/01/	2014	CALI F	FORNIA ORM	460
NAME OF FILER				through 09/30/	2014			of62
	- 6 Community 2014					I.D. NU		
Lisa Bartiett	for Supervisor 2014				I	13596	558	
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 CALENDAR YE (JAN. 1 - DEC.	EAR	Ţ	ELECTION O DATE EQUIRED)
08/15/2014	Lloyd Charton	⊠IND □COM □OTH □PTY □SCC	Attorney Law Offices of Lloyd Charton	1,000.00	1,00	00.00	P2014 G2014	\$1,000.00 \$1,000.00
09/24/2014	John Clarey	⊠IND □COM □OTH □PTY □SCC	CEO Strathspey Crown	1,000.00	2,40	00.00	P2014 G2014	\$1,900.00 \$1,000.00
08/15/2014	Cofiroute USA, LLC	□IND □COM 図OTH □PTY □SCC		500.00	79	50.00	G2014	\$750.00
09/19/2014	Cofiroute USA, LLC	□IND □COM 図OTH □PTY □SCC		250.00	79	50.00	G2014	\$750.00
08/22/2014	Communications Lab	□IND □COM ☑OTH □PTY □SCC		150.00	19	50.00	G2014	\$150.00
			SUBTOTAL	2,900.00				te e
				W-10-10-10-10-10-10-10-10-10-10-10-10-10-				

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(other than PTY or SCC)
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PTY – Political Party SCC – Small Contributor Committee

Schedule A (Continuation Sheet)

Type or print in ink.

SCHEDULE A (CONT.)

wonetary	Contributions Received	to whole o		from07/01/	CAL	IFORNIA FORM	460
				through09/30/	2014 Page	10	of62
NAME OF FILER		1100		· ·	I.D. N	UMBER	
Lisa Bartlett	for Supervisor 2014				1359	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)		ELECTION TO DATE REQUIRED)
09/10/2014	Cornerstone Openings LP	□IND □COM 図OTH □PTY □SCC		750.00	750.00	G2014	\$750.00
08/11/2014	Cox Communications	□IND □COM ☑OTH □PTY □SCC		250.00	250.00	G2014	\$250.00
08/29/2014	CR&R Inc	□IND □COM 図OTH □PTY □SCC		1,900.00	2,800.00	P2014 G2014	\$1,900.00 \$1,900.00
09/24/2014	Steven L. Craiq	⊠IND □COM □OTH □PTY □SCC	Realtor Steven L. Craig	1,900.00	1,900.00	G2014	\$1,900.00
09/30/2014	Diane M. Crandall	⊠IND □COM □OTH □PTY □SCC	Human Resources Consultant ManagEase Inc	500.00	500.00	G2014	\$500.00
-			SUBTOTAL	5,300.00			

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

SCHEDULE A (CONT.)

Statement covers period

		to whole	uollars.	from07/01/	['] 2014	ORM	460
NAME OF FILER		- Ver - William Stage		through09/30/	Page	11_	of62
					I.D. N	UMBER	
Lisa Bartlett	for Supervisor 2014				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)		ELECTION TO DATE REQUIRED)
08/15/2014	CREPAC - CA Real Estate PAC (ID# 890106)	□IND ☑COM □OTH □PTY □SCC		1,900.00	2,800.00	P2014 G2014	\$1,900.00 \$1,900.00
09/30/2014	Dana Point Shipyard	□IND □COM 図OTH □PTY □SCC		250.00	250.00	G2014	\$250.00
09/24/2014	Dana Wharf Sportfishing	☐IND ☐COM 図OTH ☐PTY ☐SCC		300.00	694.00	P2014 G2014	\$394.00 \$550.00
09/30/2014	Brian Dawson	☑IND □COM □OTH □PTY □SCC	Retired None	100.00	100.00	G2014	\$100.00
08/26/2014	David M. Demshur	XIND ☐COM ☐OTH ☐PTY ☐SCC	Geologist Core Laboratories	1,900.00	3,800.00	P2014 G2014	\$1,900.00 \$1,900.00
			SUBTOTAL	4,450.00			

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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 to whole dollars.

SCH	EDII		CONT
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CALIFORNIA 400

Statement covers period

		to whole (aonais.	from07/01/	2014	ORM	460
			1	through 09/30/	2014 Page	12	of62
NAME OF FILER	The second secon				1.D. N	UMBER	
Lisa Bartlett	for Supervisor 2014	- 100 m			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)	1	RELECTION TO DATE REQUIRED)
08/26/2014	Laureen Demshur	⊠IND □COM □OTH □PTY □SCC	Homemaker None	1,900.00	3,800.00	P2014 G2014	\$1,900.00 \$1,900.00
09/18/2014	Divers Cove Trust	□IND □COM ☑OTH □PTY □SCC	Betsy Masi/Trustee General Manager/Investors Trust	800.00	800.00	G2014	\$800.00
09/30/2014	William Doddridge	IND COM OTH PTY SCC	Owner Goldenwest Diamond Corp	1,000.00	1,000.00	G2014	\$1,000.00
09/30/2014	Elizabeth Elfend	⊠IND □COM □OTH □PTY □SCC	Homemaker None	100.00	100.00	G2014	\$100.00
08/07/2014	EMS Management LLC	□IND □COM 図OTH □PTY □SCC		1,650.00	1,650.00	P2014 G2014	\$250.00 \$1,650.00
			SUBTOTAL	5,450.00			1

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(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

Schedule	A (Continuation Sheet)	_	tore rec				
		Type or print in ink. Amounts may be rounded to whole dollars.		from 07/01/2014		SCHEDULE A (CONT.) LIFORNIA 460 FORM 462	
NAME OF FILER	t for Supervisor 2014					IUMBER	
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)	107772	ER ELECTION TO DATE REQUIRED)
09/30/2014	Diane M. Erskine	⊠IND □COM □OTH □PTY □SCC	Retired None	400.00	400.00	G2014	\$400.00
09/15/2014	Betha Everett	⊠IND □COM □OTH □PTY □SCC	Retired None	400.00	700.00	P2014 G2014	\$500.00 \$400.00
09/04/2014	William A. Everett	☑IND □COM □OTH □PTY □SCC	Retired None	400.00	400.00	G2014	\$400.00
09/12/2014	Faubel Public Affairs	□IND □COM 図OTH □PTY □SCC		999.00	1,639.65	P2014 G2014	\$250.00 \$1,639.65
09/29/2014	Alan Fenstermacher	⊠IND □COM □OTH □PTY □SCC	Attorney Rutan & Tucker, LLP	100.00	100.00	G2014	\$100.00

SUBTOTAL\$

2,299.00

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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.)

CALIFORNIA 160

Statement covers period

		· · · · · · · · · · · · · · · · · · ·		700
	through 09/30/	2014 Page	14	of <u>62</u>
NAME OF FILER		1.D. N	JMBER	
Lisa Bartlett for Supervisor 2014		1359	658	
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)
Diane M. Ferguson X IND Retired None OTH PTY SCC	1,500.00	1,500.00	G2014	\$1,500.00
09/30/2014 Stewart Frame XIND Professor Irvine Valley College	500.00	500.00	G2014	\$500.00
09/29/2014 Matt Francois X IND COM COM OTH PTY SCC	500.00	500.00	G2014	\$500.00
O9/29/2014 Patrick Fuscoe X IND Civil Engineer Fuscoe Engineering, Inc OTH PTY SCC	150.00	400.00	P2014 G2014	\$250.00 \$150.00
Geosyntec Consultants Inc IND COM SOTH PTY SCC	250.00	250.00	G2014	\$250.00
SUBTOTAL	2,900.00			

*Contributor Codes

IND - Individual

COM - Recipient Committee

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

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole o		Statement cover from07/01/	/2014	LIFORNI FORM	A 460
NAME OF FILER				till dagii	ray	NUMBER	OT <u>02</u>
Lisa Bartlett	t for Supervisor 2014					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)		R ELECTION TO DATE REQUIRED)
09/30/2014	GMU Geotechnical, Inc	□IND □COM 図OTH □PTY □SCC		999.00	999.0	0 G2014	\$999.00
09/12/2014	Government Solutions. Inc	☐IND ☐COM 図OTH ☐PTY ☐SCC		500.00	500.0	0 P2014 G2014	\$250.00 \$500.00
07/14/2014	Sally Green		Homemaker None	250.00	500.0	0 P2014 G2014	\$250.00 \$250.00
07/17/2014	Theodore Harris	⊠IND □COM □OTH □PTY □SCC	Executive California Strategies, LLC	250.00	250.0	0 G2014	\$250.00
09/04/2014	Michelle Hart	⊠IND □COM □OTH □PTY □SCC	Consultant Michelle Hart	150.00	150.0	0 G2014	\$150.00
			SUBTOTAL\$	2,149.00			

*Contributor Codes

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

CALIFORNIA ACO

Statement covers period

			from07/01/	2014 F	ORM	400
			through09/30/	2014 Page	16	of <u>62</u>
NAME OF FILER			· · · · · · · · · · · · · · · · · · ·	I.D. N	JMBER	
Lisa Bartlett for Supervisor 2014				1359	658	-
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO (IFCOMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)
09/29/2014 Headlands Reserve, LLC	□IND □COM ⊠OTH □PTY □SCC		1,900.00	1,900.00	G2014	\$1,900.00
09/30/2014 Mark C. Hefferan	⊠IND □COM □OTH □PTY □SCC	Owner H Gallery	100.00	100.00	G2014	\$100.00
09/23/2014 John Hicks	⊠IND □COM □OTH □PTY □SCC	Owner Harbor Grill Restaurant	250.00	950.00	P2014 G2014	\$700.00 \$250.00
09/30/2014 Rush Hill	⊠IND □COM □OTH □PTY □SCC	Architect/Real Estate Advisor Newport Resource Management, Inc	250.00	750.00	P2014 G2014	\$1,000.00 \$250.00
07/14/2014 HNTB Holdings LTD PAC (ID# 1298176)	□IND IND IND OTH IND OTH IND SCC		250.00	250.00	G2014	\$250.00
		SUBTOTAL	\$ 2,750.00			

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Type or print in ink.

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SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from07/01	/2014 F	ORM	400
3 <u>-200</u>				through 09/30	/2014 Page	17	of 62
NAME OF FILER	t for Supervisor 2014					UMBER	
			T		1359	658	
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)		R ELECTION TO DATE REQUIRED)
09/30/2014	Hunsaker & Associates Irvine, Inc	□IND □COM ⊠OTH □PTY □SCC		999.00	999.00	G2014	\$999.00
08/22/2014	Patrick S. Imburgia	⊠IND □COM □OTH □PTY □SCC	CEO Mission Flavors	250.00	250.00	G2014	\$250.00
09/05/2014	Impact Bearing	□IND □COM ☑OTH □PTY □SCC		1,900.00	1,900.00	P2014 G2014	\$1,900.00 \$1,900.00
09/18/2014	Iyla Trust	□IND □COM ☑OTH □PTY □SCC	Steve Abraham/Trustee Principal/Property Group International	800.00	800.00	G2014	\$800.00
09/19/2014	James F. McConnell. Attornev at Law	□IND □COM ⊠OTH □PTY □SCC		500.00	500.00	G2014	\$500.00
			SUBTOTAL	4,449.00			

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SCC – Small Contributor Committee

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

SCHEDULE A	(CONT.)
	(00111.)

Statement covers period

Monetary Contributions Received		to whole		from07/01/	· CA	CALIFORNIA 460			
Sec. 18.55. Sec. 18.55.				through09/30/	2014 Pag	e <u>18</u>	of <u>62</u>		
NAME OF FILER				1,000,000	I.D.	NUMBER			
Lisa Bartlett	for Supervisor 2014				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)		R ELECTION TO DATE REQUIRED)		
09/30/2014	JES Engineering Contractors, Inc	□IND □COM 図OTH □PTY □SCC		999.00	999.0	0 G2014	\$999.00		
09/30/2014	Bruce Junor	⊠IND □COM □OTH □PTY □SCC	Owner Engineering & Manufacturing Development	100.00	600.0	0 P2014 G2014	\$600.00 \$100.00		
08/03/2014	Donna Kalez	IND COM OTH PTY SCC	Manager/Owner Dana Warf Sportfishing and Whale Watching	250,00	694.0	0 P2014 G2014	\$394.00 \$550.00		
08/29/2014	John Kookootsedes	⊠IND □COM □OTH □PTY □SCC	Executive Infinity Insurance Group	1,900.00	1,900.0	0 G2014	\$1,900.00		
09/19/2014	KTGY Group, Inc	□IND □COM 図OTH □PTY □SCC		250,00	250.0	0 G2014	\$250.00		
			SUBTOTALS	3,499.00					

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Type or print in ink.
Amounts may be rounded

SCHEDULE A (CONT.)

Monetary Contributions Received		to whole dollars.				CALIFORNIA 460			
			a a	through09/30/	^{'2014} Pag	e <u>19</u>	_ of62		
NAME OF FILER				181 - 184/160	I.D.	NUMBER			
Lisa Bartlett	for Supervisor 2014				135	9658			
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. 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)		ER ELECTION TO DATE REQUIRED)		
09/30/2014	Todd L. Kurtz	IND COM OTH PTY SCC	Consultant Todd L. Kurtz	999.00	999.0	0 G2014	\$999.00		
09/18/2014	Lagunita Trust	□IND □COM ☑OTH □PTY □SCC	Cate Schmidt/Trustee Attorney/McNicholas & McNicholas, LP	800.00	800.0	0 G2014	\$800.00		
09/25/2014	LSA Associates, Inc	□IND □COM ☑OTH □PTY □SCC		250.00	250.0	0 G2014	\$250.00		
09/29/2014	Ray Maggi	XIND ☐COM ☐OTH ☐PTY ☐SCC	CEO MPMS, Inc	500.00	500.0	0 G2014	\$500.00		
08/20/2014	Patrick Mahoney	☑IND □COM □OTH □PTY □SCC	President West Coast Arborists	1,000.00	1,000.0	0 G2014	\$1,000.00		
1977			SUBTOTAL	\$ 3,549.00					

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEE	ULE A	(CONT.)

CALIFORNIA ACO

Statement covers period

			from07/01/	2014	FORM	400
			through 09/30/	2014 Pa	age 20	of 62
NAME OF FILER				1.	D. NUMBER	
Lisa Bartlett for Supervisor 2014				1	359658	
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTO	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)
09/25/2014 Robert Mardian	∑IND □COM □OTH □PTY □SCC	Restauranteur Wind and Sea	500.00	500	00 G2014	\$500.00
08/29/2014 Keith Matsutsuyu	⊠IND □COM □OTH □PTY □SCC	CEO Comprehensive Care Solutions LLC	999.00	999	00 G2014	\$999.00
09/25/2014 Maximus	□IND □COM 図OTH □PTY □SCC		1,900.00	1,900	.00 G2014	\$1,900.00
09/24/2014 Carol L. McCormick	⊠IND □COM □OTH □PTY □SCC	Homemaker None	250.00	250	.00 G2014	\$250.00
07/13/2014 Steven Mellgren	⊠IND □COM □OTH □PTY □SCC	Owner Dimension in Screen Printing	1,000.00	2,800	.00 P2014 G2014	\$1,900.00 \$1,900.00
		SUBTOTAL	\$ 4,649.00			

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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 to whole dollars.

SCHEDULE A (C	ONT.)	
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CALIFORNIA ACO

Statement covers period

			from07/01/		ORM 400
NAME OF FILES			through09/30/	2014 Page	21 of 62
NAME OF FILER				I.D. NU	JMBER
Lisa Bartlett for Supervisor 2014	1			1359	658
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)	PER ELECTION TO DATE (IF REQUIRED)
09/11/2014 Steven Mellgren		Owner Dimension in Screen Printing	900.00	2,800.00	P2014 \$1,900. G2014 \$1,900.
09/11/2014 Torrev Mellgren		Homemaker None	1,900.00	2,000.00	P2014 \$100. G2014 \$1,900.
09/18/2014 Barbara Merriman	IND COM OTH PTY SCC	CEO Lantern Bay Charters, LLC	100.00	100.00	G2014 \$100.
09/18/2014 Monarch Beach Promenade	□IND □COM 図OTH □PTY □SCC		450.00	1,200.00	P2014 \$750. G2014 \$450.
08/25/2014 Multi-County Rental Housing PAC (ID# 980470)	□IND IND OTH PTY SCC		1,000.00	2,900.00	P2014 \$1,900.1 G2014 \$1,000.1
		SUBTOTAL\$	4,350.00		

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SCC - Small Contributor Committee

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

SCHEDULE A (CONT.)

Monetary Contributions Received		tary Contributions Received Amounts may be rounded to whole dollars.			Statement covers period from07/01/2014			california 460 form			
60 - M				through09/30/	2014	Page_	22_	of <u>62</u>			
NAME OF FILER						I.D. NU	MBER				
Lisa Bartlett	for Supervisor 2014					13596	58				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	T	ELECTION O DATE REQUIRED)			
09/24/2014	North Tustin PAC, Sponsored by Foothill Communities Assn (ID# 1333660)	□IND ☑COM □OTH □PTY □SCC		1,900.00	1,9	00.00	G2014	\$1,900.00			
08/25/2014	Nursery Products	□IND □COM ☑OTH □PTY □SCC		1,000.00	1,0	00.00	G2014	\$1,000.00			
09/12/2014	Orange County Bail Bonds, Inc	□IND □COM ☑OTH □PTY □SCC		500.00	1,0	00.00	G2014	\$1,000.00			
09/30/2014	Orange County Bail Bonds, Inc	□IND □COM 図OTH □PTY □SCC		500.00	1,0	000.00	G2014	\$1,000.00			
09/29/2014	Orange Grove Trust	☐IND ☐COM ※OTH ☐PTY ☐SCC	Courtney Flint/Trustee Media Director/Gucci Group	800.00	8	300.00	G2014	\$800.00			
			SUBTOTALS	4,700.00							

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PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.
Amounts may be rounded

	(CO	(CONT	.)
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Monetary Contributions Received		to whole		from 07/01/	C.	ALIFORNI FORM	^A 460
				through09/30/	^{'2014} Pa	ge23	of <u>62</u>
NAME OF FILER					1.0	. NUMBER	
Lisa Bartlett	for Supervisor 2014				1:	159658	
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)
08/15/2014	Parsons	□IND □COM ☑OTH □PTY □SCC		250.00	250.	00 G2014	\$250.00
08/25/2014	George Peterson	⊠IND □COM □OTH □PTY □SCC	President and CEO Project Dimensions, Inc	1,900.00	1,900.	00 G2014	\$1,900.00
09/30/2014	Ash Pirayou	⊠IND □COM □OTH □PTY □SCC	Attorney Rutan & Tucker, LLP	500.00	500.	00 G2014	\$500.00
09/30/2014	Pyro-Spectaculars	□IND □COM ☑OTH □PTY □SCC		250.00	1,000.	00 P2014 G2014	\$750.00 \$250.00
08/20/2014	John A. Ramirez		Attorney Rutan & Tucker, LLP	1,000.00	1,000.	00 P2014 G2014	\$250.00 \$1,000.00
			SUBTOTAL	\$ 3,900.00			

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

SCHEDULE A	(CONT.)
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Statement covers period

Monetary	nonetary Contributions Received		dollars.	from07/01/	2014 F	IFORNI <i>A</i> ORM	460
		7127		through 09/30/	Tage		of <u>62</u>
NAME OF FILER					I.D. N	JMBER	
Lisa Bartlet	t for Supervisor 2014			MENO SWANS OF STREET	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)	1	ELECTION O DATE REQUIRED)
09/30/2014	Real Estate Economics, LLC	□IND □COM ⊠OTH □PTY □SCC		999.00	999.00	G2014	\$999.00
08/27/2014	Michael J. Recupero	⊠IND □COM □OTH □PTY □SCC	Executive Recupero & Associates, Inc	250.00	250.00	G2014	\$250.00
09/30/2014	Jeffrey Redeker	IND COM OTH PTY SCC	Banker Union Bank	100.00	100.00	G2014	\$100.00
08/29/2014	Ricardo's Place, LLC	□IND □COM ☑OTH □PTY □SCC		200.00	200.00	G2014	\$200.00
09/10/2014	Roberto Brutocao Corporation	□IND □COM 図OTH □PTY □SCC		1,000.00	1,000.00	G2014	\$1,000.00
			SUBTOTAL\$	2,549.00			

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SCC - Small Contributor Committee

Type or print in ink. Amounts may be rounded

SCHEDULE A (CONT.)

1359658 1359			to whole	dollars.	from 07/01/	U/A	LIFORNIA FORM	460
Bartlett for Supervisor 2014 DATE RECEIVED DATE RECEIVED D9/30/2014 Luigi Rossetti Jr. D9/30/2014 Connie Sanchis D8/07/2014 D8/07/					through 09/30/	2014 Pag	je <u>25</u>	of62
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE of CONTRIBUTOR RECEIVED FAN INDIVIDUAL, ENTER OFFICE OFFI CODE * OCCUPATION AND EMPLOYER FOR FULL NAME, STREET ADDRESS AND ZIP CODE of COOM * OCCUPATION AND EMPLOYER RECEIVED THIS PERIOD (LENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL, ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (JAN. 1 - DEC. 31) FAN INDIVIDUAL ENTER OFFI CALENDAR YEAR (J	NAME OF FILER				**************************************	I.D.	NUMBER	
COUNTRIBUTE GFCOMMITTEE_ALSOENIERID NUMBER)	Lisa Bartlett	for Supervisor 2014				13!	9658	
COM OTH	RECEIVED	(IF COMMITTEE, ALSO ENTER I.D. NUMBER)		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR		TO DATE
COM	1,500 (5.70)		□COM □OTH □PTY	Apartment Association of	500.00	500.0	0 G2014	\$500.00
COM			□COM □OTH □PTY		100.00	100.0	0 G2014	\$100.00
COM SOTH PTY SCC	08/07/2014	David Sanford	□COM □OTH □PTY		50.00	149.0		\$99.00 \$50.00
SIND Tintegrated Healthcare Tintegrated	09/30/2014		□COM 図OTH □PTY		999.00	999.0	0 G2014	\$999.00
SUBTOTAL\$ 3,549.00	07/16/2014	Joseph Scott Schoeffel	COM OTH	Integrated Healthcare	1,900.00	1,900.0		\$1,900.00 \$1,900.00
				SUBTOTAL	3,549.00			

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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 to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from07/01/		ORM	400
NAME OF FILER		at a trace of the		through 09/30/	raye	26 JMBER	of <u>62</u>
Lisa Bartlett	t for Supervisor 2014				1359		
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 EQUIRED)
09/24/2014	SCS Engineers	□IND □COM ☑OTH □PTY □SCC		500.00	1,000.00	P2014 G2014	\$500.00 \$500.00
09/30/2014	Fasi Siddiqui	⊠IND □COM □OTH □PTY □SCC	President The Echo Group	250.00	750.00	P2014 G2014	\$750.00 \$250.00
08/04/2014	Julie Simer	⊠IND □COM □OTH □PTY □SCC	Attorney Buchalter Nemer	500.00	1,250.00	P2014 G2014	\$1,900.00 \$1,250.00
09/12/2014	Julie Simer	⊠IND □COM □OTH □PTY □SCC	Attorney Buchalter Nemer	500.00	1,250.00	P2014 G2014	\$1,900.00 \$1,250.00
09/30/2014	Julie Simer	⊠IND □COM □OTH □PTY □SCC	Attorney Buchalter Nemer	250.00	1,250.00	P2014 G2014	\$1,900.00 \$1,250.00
			SUBTOTAL	\$ 2,000.00			

*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

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

SCHEDULE A (CONT.)

CALIFORNIA 460

Statement covers period

DATE RECEIVED DATE RECEIVED THIS PERIOD DATE (JAN. 1 - DEC. 31) DATE CALENDAR YEAR DO ATE (JE REQUIRED) DATE CALENDAR YEAR DO ATE (JE REQUIRED) DATE CALENDAR YEAR DATE CALEN					from07/01/	2014	ORM	700
1359658 1359					through09/30/	^{'2014} Page	27_	of62
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE of CONTRIBUTOR CONTRIBUTOR CODE * CONTRIBUTOR CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR CODE * CODE * CONTRIBUTOR CODE * C	NAME OF FILER					I.D. NO	JMBER	
COUNTRIBUTOR COUN	Lisa Bartlet	t for Supervisor 2014				1359	658	
		FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEAR	T	ODATE
SC SC SC SC SC SC SC SC	09/10/2014		□COM □OTH □PTY	Principal Yellow Cab of Greater	250.00	250.00	G2014	\$250.00
None Solution So	08/25/2014	So Cal Veterinary Medical Assn PAC (ID# 802109)	⊠COM □OTH □PTY		200.00	200.00	G2014	\$200.00
Manufacturing Solution Solu	08/29/2014	Carol Soto	□COM □OTH □PTY		250.00	250.00	G2014	\$250.00
COM	07/29/2014		□COM □OTH □PTY		300.00	300.00	G2014	\$300.00
SUBTOTAL\$ 1,250.00	07/14/2014	Daniel Stetson	□COM □OTH □PTY		250.00	350.00		
			1120	SUBTOTAL	\$ 1,250.00			

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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 to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Wolletary	Contributions Received	to whole o		from07/01/	CAL	JFORNIA FORM	460
				through 09/30/	2014 Page	28	of62
NAME OF FILER				- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	I.D. 1	IUMBER	
Lisa Bartlett	for Supervisor 2014				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)		ELECTION TO DATE REQUIRED)
09/15/2014	Sukut Construction Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC		1,900.00	1,900.00	G2014	\$1,900.00
09/30/2014	The Jasper Company	□IND □COM ☑OTH □PTY □SCC		999.00	999.00	G2014	\$999.00
08/20/2014	Tierra Verde Industries	□IND □COM 図OTH □PTY □SCC		1,000.00	1,000.00	G2014	\$1,000.00
09/30/2014	Timothy D. Carlyle Attorney at Law	□IND □COM 図OTH □PTY □SCC		200.00	200.00	G2014	\$200.00
09/29/2014	Carma Tomlinson	⊠IND □COM □OTH □PTY □SCC	Homemaker None	1,000.00	1,500.00	P2014 G2014	\$500.00 \$1,000.00
			SUBTOTALS	5,099.00			

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PTY - Political Party

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

07/01/2014

NAME OF FILER	t for Supervisor 2014			through09/30/		Page ₋ I.D. NU 13596	MBER	of62
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	AR	1	ELECTION O DATE REQUIRED)
09/29/2014	John Tomlinson	XIND ☐COM ☐OTH ☐PTY ☐SCC	Property Manager Tomlinson Management, Inc	1,000.00	1,500		P2014 G2014	\$500.00 \$1,000.00
09/08/2014	Pat Treister	⊠IND □COM □OTH □PTY □SCC	President Pacific Masonry Walls, Inc	250.00	250		P2014 G2014	\$250.00 \$250.00
07/21/2014	Truman & Elliott LLP	□IND □COM 図OTH □PTY □SCC		250.00	250	0.00	G2014	\$250.00
09/24/2014	Turkish Coalition California PAC (ID# 1332660)	□IND ICOM □OTH □PTY □SCC		250.00	250	0.00	G2014	\$250.00
09/13/2014	Yuri Vanetik	☑IND □COM □OTH □PTY □SCC	CEO Vanetik International	810.00	3,800		P2014 G2014	\$1,900.00 \$1,900.00
			SUBTOTAL\$	2,560.00				

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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 to whole dollars.

SCH	HEDU	LEA	(CONT.
201		LEA	(CONT.

Statement covers period

Monetary	Contributions Received	to whole dollars.			NUMBER OF STREET STREET, STREE		FORM 460	
				through 09/30/	^{'2014} Pa	ge30	of <u>62</u>	
NAME OF FILER				7,000	1.0	. NUMBER		
Lisa Bartlet	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)	
08/20/2014	Vanir Construction Management Inc.	☐IND ☐COM 図OTH ☐PTY ☐SCC	×	990.00	990.	00 G2014	\$990.00	
08/15/2014	Anita Varela	⊠IND □COM □OTH □PTY □SCC	Librarian Rancho Santiago Community College District	100.00	100.	00 G2014	\$100.00	
09/18/2014	Paul Walters	⊠IND □COM □OTH □PTY □SCC	Consultant EBI	1,000.00	1,000.	00 G2014	\$1,000.00	
09/26/2014	Ware Disposal	□IND □COM ☑OTH □PTY □SCC		1,900.00	3,550.	00 P2014 G2014	\$1,900.00 \$1,900.00	
09/30/2014	Water Concern	□IND □COM 図OTH □PTY □SCC		999.00	999.	00 G2014	\$999.00	
			SUBTOTAL\$	4,989.00				

*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 covers period		CALIFORNIA 460			
				through 09/30/	2014	Page.	31	_ of	62
NAME OF FILER			<u> </u>			I.D. NU	MBER		
Lisa Bartlet	t for Supervisor 2014		1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984 - 1984			13596	558		
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	1	TO DAT	ΓΕ
08/29/2014	Thomas J. Watts. Sr	⊠IND □COM □OTH □PTY □SCC	Real Estate Developer Majestic Housing & Development, LLC	1,900.00	1,9	00.00	G2014	\$	1,900.00
09/29/2014	Emily Webb	⊠IND □COM □OTH □PTY □SCC	Law Clerk Rutan & Tucker, LLP	250.00	.2	50.00	G2014		\$250.00
09/25/2014	White Pelican Gallery	□IND □COM 図OTH □PTY □SCC		100.00	1	.00.00	G2014		\$100.00
09/30/2014	William R. Mitchell, Inc	□IND □COM 図OTH □PTY □SCC		500.00	5	00.00	G2014		\$500.00
09/30/2014	Charlene H. Wolf	⊠IND □COM □OTH □PTY □SCC	Neurotherapist Center 4 Medicine	250.00	2	50.00	G2014		\$250.00
			SUBTOTAL	\$ 3,000.00		7+1			

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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.)

CALIFORNIA 160

Statement covers period

			from07/01/	2014	ORM	400
			through 09/30/	2014 Page	32	of 62
NAME OF FILER	**************************************	n i samuni L		I.D. NI	JMBER	
Lisa Bartlett for Supervisor 2014				1359	658	
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)		R ELECTION TO DATE REQUIRED)
09/30/2014 Bonnie Jane Wyatt	XIND COM OTH PTY SCC	Retired None	100.00	100.00	G2014	\$100.00
07/14/2014 Dana Yarger	⊠IND □COM □OTH □PTY □SCC	Chairman Elephant Parade	250.00	500.00	P2014 G2014	\$250.00 \$250.00
07/25/2014 Yorba Linda Estates, LLC	□IND □COM 図OTH □PTY □SCC		1,900.00	1,900.00	G2014	\$1,900.00
09/25/2014 Robert Zasa	⊠IND □COM □OTH □PTY □SCC	Healthcare ASD Corp	1,900.00	1,900.00	P2014 G2014	\$1,900.00 \$1,900.00
09/23/2014 Lori Zito	⊠IND □COM □OTH □PTY □SCC	Consultant Lori Zito	100.00	200.00	P2014 G2014	\$100.00 \$100.00
		SUBTOTAL	4,250.00			

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(other than PTY or SCC)
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PTY – Political Party
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Schedule A (Continuation Sheet) Type or print in ink. SCHEDULE A (CONT.) **Monetary Contributions Received** Amounts may be rounded Statement covers period **CALIFORNIA** to whole dollars. 07/01/2014 **FORM** from. 09/30/2014 through. Page 33 of 62 NAME OF FILER I.D. NUMBER Lisa Bartlett for Supervisor 2014 1359658 IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR AMOUNT DATE CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED THIS RECEIVED CALENDAR YEAR TO DATE CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 09/30/2014 Robert M. Zur Schmiede Managing Principal XIND 100.00 100.00 G2014 \$100.00 Kelly Associates ☐ COM OTH ☐ PTY □ SCC ☐ IND ПСОМ **□**OTH □ PTY □ SCC ☐ IND □ COM ПОТН PTY SCC ПСОМ □отн ☐ PTY □ SCC IND

SUBTOTAL\$

100.00

□COM □OTH □PTY □SCC

	*Con	tribul	tor (Cod	es
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IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Schedule B – Part 1 Loans Received		Type or print in in ounts may be ro to whole dollar	unded		Statement cover	ers period	SCHE CALIFORNI FORM	A 460
SEE INSTRUCTIONS ON REVERSE					through09/30)/2014	Page34	of62
NAME OF FILER							I.D. NUMBER	
Lisa Bartlett for Supervisor 2014							1359658	1 1- 1 21
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 PA OR FORGIVE THIS PERIO	EN. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Tisa Bartlett †☑ IND □ COM □ OTH □ PTY □ SCC	Partner/Councilwoman Blue Water Realty/City of Dana Point	\$ _20,000.00	\$0.00	\$0.0	\$_20,000.00	0.00% % RATE	\$ 20,000.00 08/10/2013 DATE INCURRED	\$ 42,601.80 PER ELECTION**
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point	s_55,000.00	\$0.00	\$ 0.0	\$ 55,000.00	%%	\$ 55,000.00	CALENDAR YEAR \$ 42,601.80 PER ELECTION ** \$ P2014 117,601.80
T⊠ IND □ COM □ OTH □ PTY □ SCC					DATE DUE		DATE INCURRED	
Lisa Bartlett	Partner/Councilwoman Blue Water Realty/City of Dana Point		gs	\$O.0	7.6	0.00% % RATE	\$_20,000.00	CALENDAR YEAR \$ _42,601.80 PER ELECTION**
To IND □ COM □ OTH □ PTY □ SCC		\$ _20,000.00	\$0.00	\$0.0	DATE DUE	\$0.00	05/09/2014 DATE INCURRED	\$ P2014 117,601.80
		SUBTOTALS S	0.00	\$ 0	.00\$ 95,000.00	\$ 0.00		
Schedule B Summary 1. Loans received this period (Total Column (b) plus unitemized loar	ns of less than \$100 \			\$_	0.00	_		
Loans paid or forgiven this period (Total Column (c) plus loans under \$10	······································			\$_	0.00	IN	Contributor Codes D – Individual DM – Recipient Co	ommittee

*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.

(Include loans paid by a third party that are also itemized on Schedule A.)

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

PTY - Political Party

SCC - Small Contributor Committee

(May be a negative number)

Schodule D. Devt 4 (Continuation Chart)	Type or print in	ink.	_			SCHEDULE B	- PART 1 (CONT.)
Schedule B – Part 1 (Continuation Sheet) Loans Received	Amounts may be re to whole dollar	ounded		Statement cov	ers period	CALIFORN FORM	^A 460
SEE INSTRUCTIONS ON REVERSE				through09/3	0/2014	Page35	of62
NAME OF FILER						I.D. NUMBER	
						- 10.15.11	
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, OCCUPATION AND EM (IF SELF-REMPLOYED, E NAME OF BUSINES	MPLOYER BALANCE	(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/Councilwo Blue Water Realty	oman		PAID	PERIOD			CALENDAR YEAR
of Dana Point	//City		\$0.00	\$_5,000.00	0.00% RATE	\$_5,000.00	\$_42,601.80
			FORGIVEN		RAIE		PER ELECTION**
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC	\$5,000.00	s	\$0.00	DATE DUE	\$0.00	06/13/2014 DATE INCURRED	\$ P2014 117,601.80
Lisa Bartlett Partner/Councilwo Blue Water Realty			PAID				CALENDAR YEAR
of Dana Point	, 626)		s0.00	\$ 17,000.00	%	\$ 17,000.00	s 42,601.80
			FORGIVEN		RATE		PER ELECTION **
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC	\$17,000.00	\$0.00	\$0.00	DATE DUE	\$0.00	06/30/2014 DATE INCURRED	\$ P2014 117,601.80
			PAID				CALENDAR YEAR
			s	s	%		
			FORGIVEN		RATE	<u> </u>	PER ELECTION**
† IND COM OTH PTY SCC	s	s	s	DATE DUE	s		s
				DATE DUE	*	DATE INCURRED	
		_	PAID	1			CALENDAR YEAR
			\$	\$	%	s	s
			FORGIVEN				PER ELECTION **
[†] □ IND □ COM □ OTH □ PTY □ SCC	\$	s	\$	DATE DUE	\$	DATE INCURRED	s
	SUBTOTALS \$	0.00\$	0.0	0\$ 22,000.00	\$ 0.00	20 1 1 4 5	

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

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(other than PTY or SCC)
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Schedule C **Nonmonetary Contributions Received**

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

SCHEDULE C Statement covers period **CALIFORNIA FORM** 07/01/2014 from 09/30/2014 Page 36 of 62 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Lisa Bartlett for Supervisor 2014 1359658 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ FULL NAME, STREET ADDRESS AND CONTRIBUTOR PER ELECTION DATE **DESCRIPTION OF** DATE OCCUPATION AND EMPLOYER **FAIR MARKET** ZIP CODE OF CONTRIBUTOR TO DATE CODE * GOODS OR SERVICES RECEIVED CALENDAR YEAR (IF SELF-EMPLOYED, ENTER VALUE (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF REQUIRED) NAME OF BUSINESS) (JAN 1 - DEC 31) 09/15/2014 John Alpapy Attorney 9/15 Event Venue XIND 175.00 175.00 G2014 \$175.00 Oakley, Inc ПСОМ ПОТН **PTY** □ SCC 07/11/2014 Brio Tuscany Grille 7/11 - Reception 107.50 **TIND** 107.50 G2014 \$107.50 Costs COM X OTH □ PTY □SCC 07/31/2014 Dale L. Dykema Executive 7/31 Campaign XIND 999.00 1,999.00 G2014 \$999.00 T.D. Service Financial Strategy Luncheon P2014 \$1,000.00 ПСОМ 20 Attendees **□OTH** including Candidate PTY □SCC 08/20/2014 Faubel Public Affairs 8/20 Reception 640.65 1,639.65 P2014 \$250.00 Costs G2014 \$1,639.65 COM X OTH PTY □SCC Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,922.15 Schedule C Summary *Contributor Codes

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) 5,432.24 2. Amount received this period – unitemized nonmonetary contributions of less than \$100\$ 3. Total nonmonetary contributions received this period.

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 (Continuation Sheet) Nonmonetary Contributions Received

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 CUMULATIVE TO IF AN INDIVIDUAL, ENTER AMOUNT/ FULL NAME, STREET ADDRESS AND CONTRIBUTOR PER ELECTION DATE **DESCRIPTION OF** DATE OCCUPATION AND EMPLOYER FAIR MARKET ZIP CODE OF CONTRIBUTOR CODE * TO DATE RECEIVED GOODS OR SERVICES CALENDAR YEAR (IF SELF-EMPLOYED, ENTER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) VALUE (IF REQUIRED) NAME OF BUSINESS) (JAN 1 - DEC 31) 09/30/2014 Chris Keller X IND 9/30 Event Food 943.50 1,443.00 P2014 \$499.50 Casa Resorts, Inc and Beverages -G2014 \$943.50 COM Reception Only OTH **□PTY** SCC 09/28/2014 Crystal Kochendorfer Retired 9/28 Reception □IND 106.14 106.14 G2014 \$106.14 None Costs □ COM X OTH PTY SCC 09/30/2014 Jason Pitkin President XIND 9/30 Event Food 120.44 120.44 G2014 \$120.44 PFS and Beverages -□ COM Reception Only □ OTH PTY SCC 09/05/2014 Bryan Stephens Manager XIND 9/3 Reception 775.01 775.01 G2014 \$775.01 Deluxe Media Costs ПСОМ □ OTH PTY □ SCC 09/29/2014 Frank Urv Engineer 8/20 & 9/29 Meet & XIND 475.00 475.00 G2014 \$475.00 Hewlett Packard Greet Costs ПСОМ OTH PTY □SCC Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 2,420.09

Schedule C (Continuation Sheet) Nonmonetary Contributions Received

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

SCHEDULE C (CONT.) Statement covers period CALIFORNIA FORM 07/01/2014 from

NAME OF FILE	TIONS ON REVERSE R Lett for Supervisor 2014				thro	ugh ^{09/30/201}		I.D. NUME		62
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	DESCRIPTION GOODS OR SERV		AMOUNT/ FAIR MARKET VALUE	CUMULATIV DATE CALENDAR (JAN 1 - DE	YEAR	PER EI	LECTION DATE QUIRED)
08/22/2014	Yuri Vanetik	⊠IND □COM □OTH □PTY □SCC	CEO Vanetik International	8/22 Event Luncheon - 19 Attendees including Candidate		1,090.00	3,	800.00	P2014 G2014	\$1,900.00
		□IND □COM □OTH □PTY □SCC			Y		19.1000,000			
		□IND □COM □OTH □PTY □SCC								5 (1100-1100-1100-1100-1100-1100-1100-110
		□IND □COM □OTH □PTY □SCC				at .		THE THE STATE OF T	0	* 100 or 400 or
		□IND □COM □OTH □PTY □SCC			V V					
Attach ad	ditional information on appropriately lab	peled continuat	ion sheets.	SUBTO	OTAL \$	1,090.00				

Schedule E	Type or print in ink				SCHEDULE B				
Payments Made	Type or print in ink. Amounts may be rounded			S	tatemer	iod CALIFO	ORNIA 460		
r ayments made	to whole d	ollars.		froi	m	07/01/2014	FOI	RM 400	
SEE INSTRUCTIONS ON REVERSE				thre	ough	09/30/2014	Page	39 of 62	
NAME OF FILER							I.D. NUN	MBER	
Lisa Bartlett for Supervisor 2014							135965	0	
CODES: If one of the following codes accurately describe campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearances ses lating survey researc	n senger services	RAD RFD SAL TEL TRC TRS TSF VOT	radio a returne campa t.v. or c candida staff/sp transfe voter re	irtime and prod d contributions gn workers' sa able airtime an ate travel, lodgin ouse travel, loc r between comegistration	uction costs laries d production costs ng, and meals dging, and meals	ne candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE O		DESCRIPTION					
		CODE O	-	DESCRIPTIO	ON OF PAY	MENI		AMOUNT PAID	
AFCO Insurance		OFC						52.50	
AFCO Insurance		OFC	**************************************			-		52.50	
AFCO Insurance		OFC		***	-		100	52.50	
								32.30	
* Payments that are contributions or independent expenditures	must also be summ	arized on Sc	hedule D.				SUBTOTAL\$	157.5	
Schedule E Summary				*****					
1. Itemized payments made this period. (Include all Schedule	E subtotals.)						\$	99,326.14	
2. Unitemized payments made this period of under \$100									
3. Total interest paid this period on loans. (Enter amount from									

Schedule E	
(Continuation	Sheet)
Payments Mad	de

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDUL	EE(CC	ONT.)
		,

(Continuation Sheet) Payments Made	Amounts may be to whole do	rounded	<u>F</u> # *	Statement covers period	CALIFORI FORM	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through09/30/2014	Page40	of 62
Lisa Bartlett for Supervisor 2014					I.D. NUMBER 1359658	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circul PHO phone banks POL polling and s POS postage, deli	munications d appearance ses ating urvey researd very and mes	s	RAD radio airtime and production RFD returned contributions SAL campaign workers' salarie TEL t.v. or cable airtime and production are candidate travel, lodging, a Staff/spouse travel, lodging TSF transfer between committee voter registration WEB information technology cos	s costs soduction costs ind meals g, and meals es of the same	2
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	DR DESC	CRIPTION OF PAYMENT		AMOUNT PAID
American Express American Express		FND	7/11 Event Costs	- Reception Only		146.10
		FOS				51.18
Best Valet		FND				265.00
California Hope Trust		OFC		1000		810.78
California Hope Trust	a.	OFC				500.00
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.		s	UBTOTAL \$	1,773.06

Schedule E (Continuation Sheet)

Type or print in ink. Amounts may be rounded

SCHEDULE E (CONT.)

CALIFORNIA ACO

Statement covers period

JONES FLER 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. MPR member communications MRR member communications MRG meetings and appearances MRG meeting and appearan	Payments Made to whole d		ollars.		from	07/01/20	FOF	RM 400
Liza BartLett for Supervisor 2014 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. APP campaign parapheralisalmise. APP campaign parapheralisalmise. APP campaign parapheralisalmise. APP campaign portalmise with a contribution costs. APP campaign portalmise with a contribution costs. APP campaign contribution in contribution (explain nonmonetary). CPC office expenses SAL campaign workers stallings ITC contributions. APP campaign avoids the sainting about fees per pertine circulating the pertine pertine circulating the pertine circulati	SEE INSTRUCTIONS ON REVERSE				throu	gh <u>09/30/20</u> :	14 Page	41 of 62
CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. APP campaign paraphenallamise. APP campaign paraphenallamise. APP campaign consultants Scampaign consultants Scampaign consultants Scampaign consultants Scampaign consultants Scampaign consultants Scampaign consultants OFC OFC OFC OFC OFC OFC OFC OF	NAME OF FILER				Lu		I.D. NUME	BER
Amp campaign paraphenalismisc. Amp campaign consultants Campaign	Lisa Bartlett for Supervisor 2014						135965	8
Amp campaign paraphenalismisc. Amp campaign consultants Campaign	CODES: If one of the following codes accurately de-	escribes the payment, y	ou may ei	nter the code. (Otherwise,	describe the	payment.	
California Hope Trust OFC Salifornia Hope Trust OFC Sampaign Compliance Group Inc PRO PRO Sampaign Compliance Group Inc	CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filling/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain legal defense campaign literature and mailings	MBR member commeetings an OFC office exper PET petition circu PHO phone banks POL polling and spostage, del PRO professional	munications d appearance ses lating survey reseas ivery and me	es rch ssenger services	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and returned contribution campaign worket.v. or cable airtition candidate travel, staff/spouse travitransfer between voter registration	d production costs utions ers' salaries me and production cost lodging, and meals rel, lodging, and meals n committees of the sain	me candidate/sponsor
Campaign Compliance Group Inc PRO PRO 950.00 Campaign Compliance Group Inc PRO PRO 950.00 PRO 950.00	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	OF PAYMENT		AMOUNT PAID
Tampaign Compliance Group Inc PRO PRO 950.00 Tampaign Compliance Group Inc PRO PRO 950.00 PRO 950.00	California Hope Trust		OFC					643.9
Campaign Compliance Group Inc PRO PRO 950.00 Campaign Compliance Group Inc PRO PRO 950.00 PRO 950.00	California Hope Trust	CONTROL L	OFC	4		- 19		500.00
PRO Sampaign Compliance Group Inc PRO PRO 950.00 PRO 950.00 PRO 950.00 Pro PRO 950.00								500.00
PRO 950.00 Campaign Compliance Group Inc PRO 950.00 PRO 950.00 Pro 950.00 Pro 950.00								
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	Campaign Compliance Group Inc		PRO					950.00
Payments that are contributions or independent expenditures must also be summarized on Schedule D.	Campaign Compliance Group Inc		PRO	Property of the second				950.00
Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL \$ 3,993.97	Campaign Compliance Group Inc	7704	PRO			The second second	XXXII WALL	950.00
Payments that are contributions or independent expenditures must also be summarized on Schedule D. SUBTOTAL\$ 3,993.97							1597	
	* Payments that are contributions or independent expenditures r	must also be summarized on	Schedule D.				SUBTOTAL S	3,993.97

Schedule E (Continuation Sheet) Payments Made

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

SEE INSTRUCTIONS ON REVERSE				throu	gh09/30/2014	Page	42 of 62
NAME OF FILER				7/		I.D. NUMBE	:R
Lisa Bartlett for Supervisor 2014			W W			1359658	
CODES: If one of the following codes accurately describes campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member co meetings a OFC office exper PET petition circ PHO phone ban POL polling and POS postage, d	MBR member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting)			describe the payment. radio airtime and production returned contributions campaign workers' salaries t.v. or cable airtime and production candidate travel, lodging, and staff/spouse travel, lodging, transfer between committees voter registration information technology costs	luction costs d meals and meals s of the sam	e candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DE	SCRIPTIO	N OF PAYMENT		AMOUNT PAID
Evan Chaffee		CNS		8			3,500.00
Evan Chaffee		CNS					1,750.00
Evan Chaffee		CNS					1,750.00
Evan Chaffee		CNS	3				1,750.00
Chicks Plumbing, Inc		OFC					120.94
Payments that are contributions or independent expenditures must also	be summarized o	n Schedule D.			SIII	BTOTAL \$	0.070.04
					301	DIOINE 9	8,870.94

Schedule E (Continuation Sheet)

Type or print in ink.
Amounts may be rounded

(Continuation Sheet) Payments Made SEE INSTRUCTIONS ON REVERSE NAME OF FILER	Amounts may be to whole do	rounded		Statement covers per from 07/01/2014 through 09/30/2014	FORM	7 400
Lisa Bartlett for Supervisor 2014					I.D. NUMBE 1359658	R
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member common meetings and office expensions petition circul phone banks polling and suppostage, deliversely.	munications appearance ses ating urvey resear very and me	es	RAD radio airtime and returned contribut SAL campaign worker. TEL t.v. or cable airtim TRC candidate travel, I TRS staff/spouse trave	rayment. production costs tions s' salaries e and production costs odging, and meals I, lodging, and meals committees of the same	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	SCRIPTION OF PAYMENT		AMOUNT PAID
County of Orange Registrar of Voters		FIL				3,774.00
Cox Communications		OFC				1,051.00
Tanya Flink		FND	See Schedule G f	or Details	3, 7	242.33
Frances Hicks		OFC				128.46
Minuteman Press	-	LIT				258,18
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.			SUBTOTAL \$	5,453.97

Schedule E (Continuation Sheet) Payments Made

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

SCHEDULE E (CONT.)

CALIFORNIA 460

Statement covers period

r ayments made			from	07/01/201	FOR	M
SEE INSTRUCTIONS ON REVERSE			throu	gh <u>09/30/201</u>	.4 Page	44 of 62
NAME OF FILER					I.D. NUMBE	ER .
Lisa Bartlett for Supervisor 2014						
CODES: If one of the fellowing codes provided the city of	- Automotive				1359658	
LEG legal defense PRO professional campaign literature and mailings PRT print ads	munications d appearan ses lating survey rese ivery and n	ces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and returned contribu campaign worker t.v. or cable airtin candidate travel, staff/spouse travel transfer between voter registration	production costs utions rs' salaries ne and production costs lodging, and meals el, lodging, and meals committees of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Pacific Fundraising Strategies	CNS					3,500.00
Pacific Fundraising Strategies	CNS		Williams B. Williams	100 1000		4,121.00
					· · · · · · · · · · · · · · · · · · ·	
Sergio Prince	CNS					3,000.00
Sergio Prince	CNS					3,000.00
Sergio Prince	CNS				TAI.	3,750.00
			- 2000			
* Payments that are contributions or independent expenditures must also be summarized on	Schedule D	•			SUBTOTAL \$	17,371.00

Schedule E	
(Continuation	Sheet)
Payments Mad	e

Type or print in ink.

SCHEDULE E (CONT.)

Payments Made	to whole dollars.			from07/01/2	CALIFO	
SEE INSTRUCTIONS ON REVERSE				through09/30/2	2014 Page	45 of 62
NAME OF FILER					I.D. NUMB	ER
Lisa Bartlett for Supervisor 2014					1359658	\$
CODES: If one of the following codes accurat	ely describes the payment,	you may	enter the code	. Otherwise, describe the	e payment.	
CMP 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 legal defense LIT campaign literature and mailings	MBR member co meetings a OFC office experiment of petition circle phone bank POL polling and (explain)* POS postage, de	mmunication appearan anses ulating as survey rese	ns nces	RAD radio airtime a returned control SAL campaign wor TEL t.v. or cable air TRC candidate travet TRS staff/spouse transfer betwee VOT voter registratives.	and production costs ributions rkers' salaries rtime and production costs el, lodging, and meals ravel, lodging, and meals ren committees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PA (IF COMMITTEE, ALSO ENTER I.D. NU	/EE MBER)	CODE	OR	DESCRIPTION OF PAYMENT		AMOUNT PAID
SmithJohnson Research		POL				12,700.00
US Postmaster		POS		•		98.00
Venture Strategic Inc		CNS				3,500.00
Venture Strategic Inc		LIT				12,530.50
Venture Strategic Inc	V	CNS			*	3,500.00
				*		
Payments that are contributions or independent expendi	tures must also be summarized or	Schedule I	 D.		SUBTOTAL \$	20 202
			ASSAULT CONTRACTOR OF THE PARTY		SOBIOIAL \$	32,328.50

Schedule E (Continuation Sheet) Payments Made

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

Statement covers period from 07/01/2014 CALIFORNIA FORM 460

		A A A B A A A A A A A A A A A A A A A A	tillough	Page46 of62
				I.D. NUMBER
				1359658
member come meetings and office expenpetition circul phone banks polling and s postage, delid professional	munications I appearance ses ating urvey researd very and mes	s ch ssenger services	RAD radio airtime and production RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production TRC candidate travel, lodging, and TRS staff/spouse travel, lodging.	duction costs and meals and meals s of the same candidate/sponsor
	CODE (DR DESC	CRIPTION OF PAYMENT	AMOUNT PAID
	CMP	Outdoor Signs	8	5,842.50
	LIT	Slate Card		6,440.00
	CNS			4,050.00
544 - 545 - 51	CNS			350.00
	CNS			4,500.00
summarized on	Schedule D.	J	SL	JBTOTAL \$ 21,182.50
	R member coming meetings and office expenipation circul phone banks polling and s postage, delip professional print ads	member communications meetings and appearance office expenses petition circulating phone banks polling and survey researc postage, delivery and mee professional services (leg.) CMP LIT CNS CNS	R member communications G meetings and appearances Office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads CODE OR DESC CMP Outdoor Signs CNS CNS CNS CNS	e payment, you may enter the code. Otherwise, describe the payment. R member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads CODE OR DESCRIPTION OF PAYMENT CMP Outdoor Signs CNS CNS CNS CNS CNS RAD radio airtime and production returned contributions campaign workers' salaries c

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		Statement covers period	CALIFOR FORM	
SEE INSTRUCTIONS ON REVERSE				through 09/30/2014	– Page <u>4</u>	17 of 62
20 Maria 20 M (2000)					I.D. NUMBE	R
Lisa Bartlett for Supervisor 2014			1000	51 CO 100 MARS	1359658	
CODES: If one of the following codes accurate CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others legal defense LIT campaign literature and mailings	MBR member community meetings and office expension office expension circul PHO phone banks POL polling and s postage, deliver postage, deliver member community meetings and community policing and s postage, deliver member community member community member community member community meetings and community policing and community member community meetings and community member community meetings and community member community meetings and community policing and community meetings are community meetings and community meetings are community meetings and community meetings and community meetings and community meetings are community meetings and community meetings and community meetings are community meetings and community meetings and community meetings and community meetings are community meetings and community meetings and community meetings are community meetings and community meetings are community meetings and community meetings and community meetings are community meetings a	munications d appearance ses ating urvey resea very and m	rch	RAD radio airtime and product returned contributions SAL campaign workers' salar t.v. or cable airtime and TRC candidate travel, lodging TRS staff/spouse travel, lodging TSF transfer between commit voter registration WEB	ries production costs , and meals ng, and meals ttees of the same	
NAME AND ADDRESS OF PAY (IF COMMITTEE, ALSO ENTER I.D. NUM	EE MBER)	CODE	OR DES	SCRIPTION OF PAYMENT		AMOUNT PAID
Venture Strategic Inc		LIT	Slate Card			6,612.50
Voter Connections/eFundraising		OFC		k		322.50
Joter Connections/eFundraising		OFC				39.50
Joter Connections/eFundraising		OFC				88.50
oter Connections/eFundraising		OFC				133.50
Payments that are contributions or independent expendit	tures must also be summarized on S	Schedule D.			SUBTOTAL \$	7,196.50

Schedule E (Continuation Sheet) Payments Made

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDU	JLE E (CONT.)
State	ement covers period	CALIFORNIA	460
m	07/01/2014	FORM	-100

SEE INSTRUCTIONS ON REVERSE NAME OF FILER		throug	jh <u>09/30/201</u>	14 Page	48 of 62	
Lisa Bartlett for Supervisor 2014					I.D. NUMB	
	70(1 WILLIAM)				1359658	
CODES: If one of the following codes accurately describes the payment, y CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense campaign literature and mailings MBR member com meetings and office expensions of the contribution (explain nonmonetary)* PET petition circuit phone banks polling and supporting of the contribution (explain)* PCS postage, delignation of the following codes accurately describes the payment, y member com meetings and office expensions of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* petition circuit phone banks polling and supporting of the contribution (explain nonmonetary)* professional print additional print and supporting of the contribution (explain nonmonetary)*	munication d appeara ses ating urvey resivery and	ns nces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and returned contribu campaign worke t.v. or cable airtir candidate travel, staff/spouse trav transfer between voter registration	I production costs utions uts' salaries me and production costs lodging, and meals lotging, and meals committees of the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DE	SCRIPTION	OF PAYMENT		AMOUNT PAID
Voter Connections/eFundraising	OFC			724 - 314 - 344 - AC-		187.00
					×	
Voter Connections/eFundraising	OFC					267.00
Voter Connections/eFundraising						
voter connections/erundralsing	OFC					173.00
Voter Connections/eFundraising	OFC					272.20
Voter Connections/eFundraising	OFC					99.00
* Payments that are contributions or independent expenditures must also be summarized on	Schedule	D.	7.500		SUBTOTAL \$	998.20

Schedule F				SCHEDULE F	
Accrued Expenses (Unpaid Bills)	Type or print in ink. Amounts may be roun to whole dollars.		Statement cove	F-C	ORNIA 460
SEE INSTRUCTIONS ON REVERSE			through09/30/2	Page	49 of 62
NAME OF FILER				I.D. NUM	MBER
Lisa Bartlett for Supervisor 2014				13596	58
CODES: If one of the following codes accurately descriced 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 campaign literature and mailings	MBR member communication meetings and appears office expenses PET petition circulating phone banks POL polling and survey res postage, delivery and PRO professional services PRT member communication meetings and appears of professional services print ads	ns inces earch messenger services	RAD radio airtime an RFD returned contribution SAL campaign work t.v. or cable airt TRC candidate travel TRS staff/spouse transfer betwee VOT voter registration	d production costs butions ers' salaries ime and production cost I, lodging, and meals vel, lodging, and meals en committees of the sal	me candidate/sponsor
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	3,500.00	0.00	3,500.00	0.00
Political Data Inc.	LIT	3,614.62	-3,614.62	0.00	0.00
Cardmember Services	TEL See Schedule G for Details	5,145.00	0.00	0.00	5,145.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	12,259.62\$	-3,614.62\$	3,500.00\$	5,145.00
 Schedule F Summary Total accrued expenses incurred this period. (Include all accrued expenses of \$100 or more, plus total unitemized Total accrued expenses paid this period. (Include all Schaccrued expenses of \$100 or more, plus total unitemized Net change this period. (Subtract Line 2 from Line 1. En 	accrued expenses under \$ nedule F, Column (c) subtot payments on accrued expense.	als for payments on enses under \$100.).			

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

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

SCHEDULE F (CONT.)

Statement covers period		CALIFORNIA 160
from	07/01/2014	FORM 400
through09/30/2014	Page 50 of 62	
		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.

			Control of the contro		
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)		
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	3,500.00	0.00	3,500.00	0.00
Campaign Solutions	WEB	73.30	0.00	0.00	73.30
Venture Strategic Inc	LIT	12,530.50	0.00	12,530.50	0.00
Campaign Solutions	WEB	376.67	0.00	0.00	376.67
	SUBTOTALS S	16,480.47	0.00\$	16,030.50	449.97

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

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA AGO
from07/01/2014	FORM 40U
through 09/30/2014	Page51 of62
	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

00020. II of	ie of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP campaign particles of the contribution CVC civic donation candidate fill fill fundraising independent LEG legal defens	araphernalia/misc. consultants (explain nonmonetary)* ns ng/ballot fees events expenditure supporting/opposing others (explain)*	MBR MTG OFC PET PHO POL POS	member communications meetings and appearances office expenses petition circulating phone banks polling and survey research postage, delivery and messenger services professional services (legal, accounting) print ads	RAD RFD SAL TEL TRC TRS TSF VOT	Section 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1

^{*} 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
Venture Strategic Inc	CNS	4,050.00	0.00	4,050.00	0.00
Campaign Compliance Court					
Campaign Compliance Group Inc	PRO	950.00	0.00	950.00	0.00
Pacific Fundraising Strategies	CNS	3,500.00	0.00	3,500.00	0.00
	SUBTOTALS	\$ 18,500.00\$	0.00\$	8,500.00 \$	10,000.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

State	nent covers period	CALIFORNIA 160
from	07/01/2014	FORM 400
through.	09/30/2014	Page52 of62
		I.D. NUMBER
		1359658

WEB information technology costs (internet, e-mail)

NAME OF FILER

Lisa Bartlett for Supervisor 2014

campaign literature and mailings

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

print ads

PRT

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)* office expenses OFC SAL campaign workers' salaries CVC civic donations petition circulating PET 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 staff/spouse travel, lodging, and meals POL polling and survey research independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF transfer between committees of the same candidate/sponsor legal defense professional services (legal, accounting) PRO VOT voter registration

^{*} 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) AMOUNTINCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Campaign Solutions	WEB	51.42	0.00	0.00	51.42
Venture Strategic Inc	CNS	350.00	0.00	350.00	0.00
The Pacific Club	MTG 7/31 Campaign Strategy Luncheon - 21 Attendees including Candidate	0.00	761.36	0.00	761.36
Campaign Solutions	WEB	0.00	90.68	0.00	90.68
	SUBTOTALS	\$ 401.42	852.04\$	350.00 \$	903.46

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 07/01/2014	FORM 400
through09/30/2014	Page53 of62
	I.D. NUMBER
	1359658

campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign paraphernalia/misc. MBR member communications meetings and appearances office expenses OFC OFC OFC OFC OFC OFC OFC OF	CO	DES: If one of the following codes accurately describ	es the	payment,	, you may ente	r the code.	Otherwise	, describe the payment.
* Payments that are contributions or independent expanditures must also be summerized an Cabadala D	CMP CNS CTB CVC FIL FND IND LEG LIT	campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR MTG OFC PET PHO POL POS PRO PRT	member co meetings a office exp petition circ phone ban polling and postage, d profession print ads	ommunications and appearances enses culating iks d survey research lelivery and messer al services (legal, a	nger services	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production costs returned contributions 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

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	4,500.00	0.00	4,500.00
Venture Strategic Inc	PRT	0.00	287.50	0.00	287.50
	-11				
Venture Strategic Inc	LIT	0.00	345.00	0.00	345.00
Political Data Inc.	LIT	0.00	3,700.00	0.00	3,700.00
	SUBTOTALS \$	0.00\$	8,832.50\$	0.00\$	8,832.50

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

candidate/sponsor

Statement covers period	CALIFORNIA AGO
from07/01/2014	FORM 400
through09/30/2014	Page54 of62
	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.

			(*)		231
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
	campaign consultants	MTG	meetings and appearances		returned contributions
	contribution (explain nonmonetary)*	OFC	office expenses	2200 4 550	campaign workers' salaries
	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks		candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		transfer between committees of the same cand
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	LIT Slate Card	0.00	1,696.25	0.00	1,696.25	
Campaign Solutions	WEB	0.00	258.18	0.00	258.1	
Cox Communications	OFC	0.00	342.00	0.00	342.0	
Cardmember Services	FND	0.00	8,499.19	0.00	8,499.19	
	SUBTOTALS \$	0.00\$	10,795.62\$	0.00 \$	10,795.62	

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
from <u>07/01/2014</u>	FORM 400
through09/30/2014	Page 55 of 62
	I.D. NUMBER
	1359658

CO	DES: If one of the following codes accurately describe	es the	payment, you may enter the code.	Otherwise	e, describe the payment.
CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
		MTG	meetings and appearances	RFD	returned contributions
	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		
* Pay	ments that are contributions or independent expanditures must all	o ho ei	Immerized on Cahadula D		See See Card Card Salestron And Secretion And E

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 4,500.00	
Venture Strategic Inc	CNS	0.00	4,500.00	0.00		
Venture Strategic Inc	LIT	0.00	287.50	0.00	287.50	
California Hope Trust	OFC	0.00	721.33	0.00	721.33	
Campaign Compliance Group Inc	PRO	0.00	612.50	0.00	612.50	
	SUBTOTALS S	\$ 0.00\$	6,121.33\$	0.00\$	6,121.33	

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

State	ement covers period	CALIFORNIA 160
from	07/01/2014	FORM 400
through	09/30/2014	Page 56 of 62
***************************************	The second secon	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.

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events	OFC PET PHO POL	office expenses petition circulating phone banks polling and survey research	RFD SAL TEL TRC TRS	campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals
FIL candidate filing/ballot fees	PHO POL POS	phone banks	TRC TRS TSF VOT	candidate travel, lodging, and meals

^{*} 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	0.00	7,294.90	0.00	7,294.90
and the state of t	Test, No. of				
Pacific Fundraising Strategies	OFC	0.00	77.25	0.00	77.25
Evan Chaffee	CNS	2,500.00	0.00	0.00	2,500.00
Evan Chaffee	CNS	3,500.00	0.00	3,500.00	0.00
	SUBTOTALS	\$ 6,000.00	7,372.15\$	3,500.00	9,872.15

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE F (CONT.)

Statement covers period	CALIFORNIA 160
from 07/01/2014	FORM 400
through09/30/2014	Page 57 of 62
	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.

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 t.v. or cable airtime and production costs FIL candidate filing/ballot fees PHO phone banks candidate travel, lodging, and meals FND fundraising events polling and survey research staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)* 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 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	0.00	1,750.00	0.00	1,750.00
Evan Chaffee	CNS	0.00	1,750.00	0.00	1,750.00
Evan Chaffee	CNS	0.00	1,750.00	0.00	1,750.00
Sergio Prince	CNS	0.00	3,750.00	0.00	3,750.00
	SUBTOTALS \$	0.00\$	9,000.00\$	0.00	9,000.00

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

	77	SCHEDULE O
State	ment covers period	CALIFORNIA ACO
from	07/01/2014	FORM 460
through	09/30/2014	Page <u>58</u> of <u>62</u>
5 117-500		I.D. NUMBER
		1359658

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lisa Bartlett for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

American Express

CODES:	If one of the	following	codes ac	ccurately	describes	the	payment,	you	may	enter	the	code.	Otherwise,	describe	the	payme	en

CMP	campaign paraphernalia/misc.	MBR	member communications	RAD	radio airtime and production costs
CNS	campaign consultants	MTG	meetings and appearances		returned contributions
CTB	contribution (explain nonmonetary)*	OFC	office expenses		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		professional services (legal, accounting)		voter registration
LIT	campaign literature and mailings	PRT	print ads		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	AMOUNT PAID	
Brio Tuscany Grille	FND	7/11 - Reception Costs Only	146.10
Federal Express	POS		51.18
	-73 -		-

* 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.

197.28

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

independent expenditure supporting/opposing others (explain)*

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

candidate filing/ballot fees

fundraising events

legal defense

IND

LEG

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

SCHEDULE G Statement covers period **CALIFORNIA** 07/01/2014 **FORM** from 09/30/2014 through_ Page ____59__ of ___62

transfer between committees of the same candidate/sponsor

candidate travel, lodging, and meals

TSF

staff/spouse travel, lodging, and meals

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Lisa Bartlett for Supervisor 2014 1359658 NAME OF AGENT OR INDEPENDENT CONTRACTOR Cardmember Services 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 radio airtime and production costs campaign consultants meetings and appearances MTG returned contributions CTB contribution (explain nonmonetary)* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs

professional services (legal, accounting) VOT voter registration campaign literature and mailings PRT print ads WEB information technology costs (internet, e-mail)

polling and survey research

postage, delivery and messenger services

phone banks

PHO

POL

POS

	AMOUNT PAID
50 Attendees	8,499.1
_	

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

Attach additional information on appropriately labeled continuation sheets.

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

TOTAL* \$

8,499.19

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

SCHEDULE G Statement covers period **CALIFORNIA** 07/01/2014 from

SEE INSTRUCTIONS ON REVERSE	through09/30/2014	Page 60 of 62
NAME OF FILER		I.D. NUMBER
Lisa Bartlett for Supervisor 2014		1359658
NAME OF AGENT OR INDEPENDENT CONTRACTOR		2337030

Tanya Flink

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)*		office expenses	2,000,000	campaign workers' salaries
CVC	civic donations	PET	petition circulating		t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees		phone banks		
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*		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		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
BevMo!		FND	7/11 Beverages	for Event Reception	187.9

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

TOTAL* \$

187.92

Type or print in ink.

Amounts may be rounded to whole dollars.

Statement covers period m 07/01/2014 CALIFORNIA FORM 460

through 09/30/2014

Page 61 of 62

I.D. NUMBER

1359658

Lisa Bartlett for Supervisor 2014

NAME OF AGENT OR INDEPENDENT CONTRACTOR

candidate filing/ballot fees

campaign literature and mailings

fundraising events

legal defense

Venture Strategic Inc

CVC civic donations

FIL

FND

IND

LEG

SEE INSTRUCTIONS ON REVERSE

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.
CNS campaign consultants
CTB contribution (explain nonmonetary)*

independent expenditure supporting/opposing others (explain)*

MBR MTG

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

t.v. or cable airtime and production costs 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
CA Republican Taxpavers Assn (ID# 1286135)	LIT	Slate Card		5,750.00
California Latino Voters Guide (ID# 596004)	LIT	Slate Card		1,475.00
DMI Direct	СМР	Outdoor Sign	ns	5,842.50
				-
Attach additional information an assessing to be built in the state of				

Attach additional information on appropriately labeled continuation sheets.

TOTAL* \$

13,067.50

^{*} 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 I	Part (All Part (Towns and distributed		SCUEDING
Miscellaneous Increases to Cash		Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from07/01/2014 through09/30/2014	CALIFORNIA FORM 460 Page 62 of 62
NAMÉ OF FILER				I.D. NUMBER
Lisa Bartlett	for Supervisor 2014			1359658
DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH
07/30/2014	Seth Christian	Payment for	Rainbow Sandals	100.00
07/09/2014	Venture Strategic Inc	Payment for	Rainbow Sandals	99.00
10.00			902	
Attach addit	tional information on appropriately labeled continuation sheets.		SUBTOTA	L\$ 199.00
Schedule I	Summary			
1. Itemized in	creases to cash this period.		\$199.0	00
2. Unitemized increases to cash of under \$100 this period.				90
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)\$\$				00
 Total misce 	ellaneous increases to cash this period. (Add Lines 1, Page, Line 14.)	2, and 3. Enter here and on th	e	