Recipient Committee Campaign Statement	Type or print in it	nk.	Date Stamp	200	COVER PAGE FORNIA 01/02 460
(Government Code Sections 84200-84216.5)	-			FC	<u>JRM</u>
	Statement covers period from01/01/2008	Date of election if applicable: (Month, Day, Year)	1107-6 P	F: 33	or Official Use Only
SEE INSTRUCTIONS ON REVERSE	through 09/30/2008	11/04/2008			
1. Type of Recipient Committee: All Commit	tees - Complete Parts 1,2,3, and 4.	2. Type of Stateme	ent:	71:31	
<ul> <li>✓ Officeholder, Candidate Controlled Committee</li> <li>✓ State Candidate Election Committee</li> <li>✓ Recall</li> <li>(Also Complete Part 5.)</li> <li>✓ General Purpose Committee</li> <li>✓ Sponsored</li> <li>✓ Small Contributor Committee</li> <li>✓ Political Party/Central Committee</li> </ul>	Ballot Measure Committee O Primary Formed O Controlled O Sponsored (Also Complete Part 6.) Primary Formed Candidate/ Officeholder Committee (Also Complete Part 7.)		nent ment nent	Special O	Statement dd-Year Report ental Preelection t - Attach Form 495
3. Committee Information	I.D.NUMBER 1308623	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE Lou Penrose for City Council		NAME OF TREASURER Kelly Lawler		4400	
STREET ADDRESS (NO P.O. BOX) 34206 Doheny Park Road		MAILING ADDRESS 976 Pacific Avenue	A Company of the Comp		W. S. C.
CITY STATE ZIP COI Capo Beach CA 92624	-1111 (949) 201-6171	CITY Willows	STATE CA	ZIP CODE 95988-9788	AREA CODE/PHONE (530) 934-5823
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B	OX	NAME OF ASSISTANT TREASUR	RER, IF ANY		
CITY STATE ZIP COL	DE AREA CODE/PHONE	MAILING ADDRESS			***************************************
OPTIONAL: FAX/E-MAIL ADDRESS		CITY	STATE	ZIP CODE	AREA CODE/PHONE
		OPTIONAL: FAX/E-MAIL ADDRES	SS		
Executed on O O S DATE  By  SIGNATURE OF CO  DATE  By  SIGNATURE OF CO	reviewing this statement and to the under the laws of the State of Califurnian Signature of Treasurer or A NTROLLING OFFICEHOLDER, SIGNATURE OF CONTROLLING OFFICEHOLDER,	ornia that the foregoing is true a sistematic properties of the sistematic	OFFICER OF SPONSOR		
Executed on By	SIGNATURE OF CONTROLLING OFFICEHOLDER,	CANDIDATE, STATE MEASURE PROPONENT		FPF FPPC Toll-Free He	PC Form 460 (June/01) elpline: 866/ASK-FPPC State of California

COVER PAGE - PART 2

california 460

2/22

Officeholder or Candidate Controlle	ed Committee	6.	. Ballot Measure Cor	nmittee		
NAME OF OFFICEHOLDER OR CANDIDATE Lou Penrose (aka Luigi Rossetti, Jr.)			NAME OF BALLOT MEASURE		**************************************	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DIST Sought: City Council Member City Dana Pe	·		BALLOT NO. OR LETTER	JURISDICTIO	И	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling offic	eholder, cand	lidate, or state measure pr	oponent, if any.
34206 Doheny Park Road	Capo Beach CA 92624-1111		NAME OF OFFICEHOLDER, CAN	DIDATE, OR PE	ROPONENT	, , , , , , , , , , , , , , , , , , ,
Related Committees Not Included in this S not included in this statement that are controlled by you or contributions or to make expenditures on behalf of your care	are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT NO	). IF ANY
COMMITTEE NAME	I.D.NUMBER	7.	Primarily Formed C		List names of officeholde	r(s) or candidate(s) for
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.C	D.BOX)		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT
CITY STATE ZI	IP CODE AREA CODE/PHONE					OPPOSE
COMMITTEE NAME	I.D.NUMBER		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O	D.BOX)					
CITY STATE ZI	IP CODE AREA CODE/PHONE		Attach	continuation	sheets if necessary	

# Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SUMMARY PAGE

california 460

Statement covers period

from \_

20080101

SEE INSTRUCTIONS ON REVERSE		through	20080930	3 / 22
NAME OF FILER Lou Penrose for City Council				I.D. NUMBER
•	O-1			1308623
Contributions Received	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	COLUMN B CALENDAR YEAR TOTAL TO DATE		tummary for Candidates In the State Primary and
1. Monetary Contributions Schedule A, Line 3	\$ <u>16521.50</u> \$_	16521.50		
2. Loans Received Schedule B, Line 7	0.00	0.00		through 6/30 7/1 to Date
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>16521.50</u> \$	16521.50	20. Contribution Received \$	\$
4. Nonmonetary Contributions Schedule C, Line 3	291.59	291.59	21. Expenditures	
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	16813.09 \$	16813.09	Made \$	\$
Expenditures Made			Expenditure Lim	nit Summary for State
6. Payments Made Schedule E, Line 4	\$ <u>7701.16</u> \$_	7701.16	Candidates	
7. Loans Made Schedule H, Line 7	0.00	0.00	22. Cumula	ative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$ <u>7701.16</u> \$_	7701.16	(If Subject t	o Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	13717.50	13717.50	Date of Election	Total to Date
10. Nonmonetary Adjustment Schedule C, Line 3	291.59	291.59	(mm/dd/yy)	
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$ <u>21710.25</u> \$_	21710.25	•	<b>\$</b>
Current Cash Statement			<del> </del>	. \$
12. Beginning Cash Balance Previous Summary Page, Line 16	7	calculate Column B, add		
13. Cash Receipts Column A, Line 3 above	16521.50	responding amounts		
14. Miscellaneous Increases to CashSchedule I, Line 4	0.00	m Column B of your last ort, Some amounts in	*Amounts in this sect	ion may be different
Cash Payments Column A, Line 8 above	7701.16 <sub>Col</sub>	lumn A may be negative	from amounts reporte	
16. <b>ENDING CASH BALANCE</b> Add Lines 12 + 13 + 14, then subtract Line 15	% 00ZU.34 <b>1</b> °	ures that should be otracted from previous		
If this is a termination statement, Line 16 must be zero.	•	iod amounts. If this is first report being filed		
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$car	this calendar year, only ry over the amounts		
Cash Equivalents and Outstanding Debts	fror any	m Lines 2, 7, and 9 (if /).		
18. Cash Equivalents See instructions on reverse	\$0.00_			
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$13717.50			
	1		FPPC To	FPPC Form 460 (January/05) II-Free Helpline: 866/ASK-FPPC

Type or print in ink.
Amounts may be rounded

SCHEDULE A

Monetary Contributions Received			to whole dollars.		ers period 80101	CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through 200	80930		4 / 22
NAME OF FILER Lou Penrose fo	or City Council			1		I.D. Nu	ımber
Lou Felliose IC	City Council		*		<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	1308	623
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 09/08/2008	John B.T. Campbell III 57 Blue Heron	X IND ☐ COM ☐ OTH ☐ PTY	Congressman  US House of Represenativ-	630.00	630	0.00	
	Irvine CA 92603-0307	scc	es				
Rcpt Dt: 08/25/2008	Milton W Jones 303 N Indian Canyon Drive Palm Springs CA 92262-6015	X IND COM OTH PTY SCC	Publisher  Desert Publications Inc.	100.00	100	0.00	
Rcpt Dt: 09/08/2008	Inland Group 3501 Jamboree Road  Newport Beach CA 92660-2939 ID:	IND COM OTH PTY SCC		630.00	630	0.00	
Rcpt Dt: 09/02/2008	Mr. Craig P Alexander 33018 Christina Drive  Dana Point CA 92629-1040 ID:	X IND COM OTH PTY SCC	Attorney  Law Offices of Craig P. Alexander	100.00	100	0.00	
Rcpt Dt: 08/25/2008	Loran T Hall 2944 Winnebago Road Sartell MN 56377-2374 ID:	X IND COM OTH PTY SCC	President Mathew Hall Lumber	100.00	100	0.00	
			SUBTOTAL S	5			
Schedule A	Summary				[*Co	ntributor	Codes
	eived this period - itemized monetary contributions Schedule A subtotals.)		\$	15085.00	IND	- Indivi M - Reci	dual pient Committee
2. Amount rec	eived this period - unitemized contributions of less	than \$100	\$	1436.50		H- Other	
3. Total monet	ary contributions received this period.  1 and 2. Enter here and on the Summary Page, C		,	16521.50		r - Politic C- Small	cal Party  Contributor Committee

## Schedule A

Type or print in ink.

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SCL	71-1	16 11	_ ~

nent covers period CAI 20080101	california 460	
20080930	5 / 22	
	Number 08623	
OTHIS CALENDAR YEAR OD (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
500.00		
200.00		
00.00 100.00		
00.00 100.00		
00.00 100.00		
IND - Ind COM - Re (a OTH- Oth PTY - Pol	ecipient Committee other than PTY or SCC)	
	00.00 100.00  *Contribut IND - Ind COM - Ri (c) OTH- Ott PTY - Pol	

## Schedule A

Type or print in ink.

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56.65	~	$\sim$

Monetary Contributions Received			to whole dollars.		ers period 80101	CALIFORNIA Z	
SEE INSTRUCTION	NS ON REVERSE			through 200	80930		6 / 22
NAME OF FILER						I.D. Nu	umber
Lou Penrose fo	or City Council	•			¥	1308	623
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 09/29/2008	Apartment Association of Orange County PAC 12822 Garden Grove Boulevard Suite D Garden Grove CA 92843-2010 ID: 980470	☐ IND 区 COM ☐ OTH ☐ PTY ☐ SCC		630.00	630	0.00	
Rcpt Dt: 09/26/2008	Neil C Auricchio 124 Main Street Suite 14 Huntington NY 11743-6922 ID:	IND     COM     OTH     PTY     SCC	Dentist  Neil Auricchio, D.D.S.	200.00	200	0.00	
Rcpt Dt: 09/29/2008	Carlos Olvera 24901 Danafir Dana Point CA 92629-3153 ID:	IND     COM     OTH     PTY     SCC	Retired n/a	100.00	100	0.00	
Rcpt Dt: 09/30/2008	Mark Pickard 23832 Medinah Lane Laguna Niguel CA 92677-2450 ID:	X IND COM OTH PTY SCC	Marketing The Windstone Group	150.00	150	0.00	
Rcpt Dt: 09/15/2008	Mrs Valerie C Dickerson 418 12th Street Huntington Beach CA 92648-4521 ID:	X IND COM OTH PTY SCC	Attorney Deloitte Tax LLP	500.00	500	0.00	
			SUBTOTAL	\$			
Schedule A	Summary				*Cc	ontributor	Codes
(Include all	eived this period - itemized monetary contributions. Schedule A subtotals.)		·		CO	D - Indivî M - Recî oth)	idual ipient Committee er than PTY or SCC)
2. Amount rec	eived this period - unitemized contributions of less th	an \$100	\$		I '	H- Other Y - Politic	
	ary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colu	umn A, Line 1.)	)TOTAL \$				Contributor Committee

Schedule	Α	
Monetary	Contributions	Received

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received			Amounts may be rounded to whole dollars.		ers period 80101	FUR	CALIFORNIA 460	
SEE INSTRUCTION	IS ON REVERSE			through 2008	30930	7	/ 22	
NAME OF FILER				J		I.D. Numb	рег	
Lou Penrose fo	r City Council					130862	3	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC. 3	AR	PER ELECTION TO DATE (IF REQUIRED)	
Rcpt Dt: 09/29/2008	Albert S Barr III 111 S Calvert Street Suite 2700 Baltimore MD 21202-6143 ID:	X IND COM OTH PTY SCC	Attorney Albert S. Barr LLC	100.00	100	0.00		
Rcpt Dt: 09/30/2008	William P Brough 33791 Colegio Drive Dana Point CA 92629-2341 ID:		Consultant  Brought Consulting, Inc.	100.00	100	0.00		
Rcpt Dt: 09/29/2008	Cheryl Spates 26691 Calle Salida Capistrano Beach CA 92624-1412	IND     COM     OTH     PTY     SCC	Sales Self-Employed- Cheryl Spates	100.00	100	0.00		
Rcpt Dt: 08/13/2008	Margaret A Kivinski 32 Coronado Pointe Laguna Niguel CA 92677-5545 ID:	X IND COM OTH PTY SCC	Attorney TherOx	100.00	200	0.00		
Rcpt Dt: 09/15/2008	Mr Glenn F Hardy 226 7th Street Suite 302 Garden City NY 11530-5723 ID:	X IND COM OTH PTY SCC	Attorney Self Employed	100.00	100	0.00		
			SUBTOTAL	\$				
Include all ( 2. Amount rece 3. Total moneta	Summary  eived this period - itemized monetary contributions.  Schedule A subtotals.)  eived this period - unitemized contributions of less to ary contributions received this period.  1 and 2. Enter here and on the Summary Page, Contributions received this period.	han \$100	\$		OTH PTY	(other I H - Other Y - Political	al ent Committee than PTY or SCC)	

Type or print in ink.
Amounts may be rounded

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Monetary Contributions Received		to	to whole dollars.		80101	CALIFORNIA A	
SEE INSTRUCTION	NS ON REVERSE			through 2008	80930	8	3 / 22
NAME OF FILER	·			<u> </u>		I.D. Nun	ıber
Lou Penrose fo	or City Council					13086	23
DATE RECEIVED	FULL NAME, MAILING 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) 200.00		PER ELECTION TO DATE (IF REQUIRED)
Rept Dt: 09/29/2008	Patricia M Tedeschi 34312 Amber Lantern Street Dana Point CA 92629-3008 ID:	X IND COM OTH PTY SCC	Accountant Whitmore Accountancy Firm	200.00			
Rcpt Dt: 09/30/2008	Jeffrey Montejano 33 Via Jacobea San Clemente CA 92673-7201 ID:	X IND COM OTH PTY SCC	President K-Comm	630.00	63	0.00	
Rcpt Dt: 09/30/2008	Brian Yoki 27881 La Paz Road # G109 Laguna Niguel CA 92677-3933 ID:	IND     COM     OTH     PTY     SCC	Provider Relations Representative  Assurant Employee Benefits	125.00	12	5.00	
Rcpt Dt: 08/05/2008	Diane Harkey 76 Ritz Cove Drive Monarch Beach CA 92629-4230 ID:	IND COM OTH PTY SCC	City Council Member/Retired  Dana Point/Banking	630.00	63	0.00	
Rcpt Dt: 08/25/2008	Donald H Gilchrist 13591 Woodglen Drive Santa Ana CA 92705-2853 ID:	X IND COM OTH PTY SCC	Retired	500.00	50	0.00	
			SUBTOTAL	\$			
Amount rec (Include all     Amount rec     Total monel	eived this period - itemized monetary contributions Schedule A subtotals.)  eived this period - unitemized contributions of less tary contributions received this period.	than \$100	\$	<del></del>	OT PT	(other H - Other Y - Politica	ual lent Committee than PTY or SCC)
(Add Lines	1 and 2. Enter here and on the Summary Page, Co	Juinn A, Line T.	/   OIAL \$ _				

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

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Monetary Contributions Received			o whole dollars.		ers period 80101	FORM 460	
SEE INSTRUCTION	NS ON REVERSE			through 20080930		9 / 22	
NAME OF FILER				1		I.D. Nun	nber
Lou Penrose fo	or City Council					13086	23
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YE (JAN. 1 - DEC. )	AR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 09/08/2008	Luzuriaga Taylor Inc. 26440 La Alameda Suite 310 Mission Viejo CA 92691-6304 ID:	IND COM OTH PTY SCC		200.00	200.00		
Rept Dt: 09/30/2008	Southern California Fire Protection, Inc. 27665 Forbes Road Suite 8 Laguna Niguel CA 92677-1234 ID:	IND COM OTH PTY SCC		250.00	250.00		
Rcpt Dt: 08/13/2008	Amber Hall 26711 Calle Salida Capo Beach CA 92624-1414 ID:	X IND COM OTH PTY SCC	Broker Hall & Associates, Inc.	630.00	630.00		
Rcpt Dt: 09/02/2008	James G Rossetti 326 Minden Lane Matthews NC 28105-9140 ID:	X IND COM OTH PTY SCC	Resp. Therapist  Carolina Medical Center	100.00	100	0.00	
Rcpt Dt: 09/29/2008	Harold Kaufman 24325 Armada Drive Dana Point CA 92629-1306 ID:	X IND COM OTH PTY SCC	Structured Settlement Broker EPS Settlements Group	100.00	100	0.00	
***************************************			SUBTOTAL	\$			
(Include all	A Summary eived this period - itemized monetary contributions. Schedule A subtotals.) eived this period - unitemized contributions of less the				CO	other) H~ Other	ual ient Committee r than PTY or SCC)
	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Col	umn A. Line 1	) TOTAL \$			Y - Politica C- Small (	Contributor Committee

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received			Amounts may be rounded Sta to whole dollars.		Statement covers period from 20080101		CALIFORNIA 460	
SEE INSTRUCTION	NS ON REVERSE			through 2008	080930 10 / 22			
NAME OF FILER				<u> </u>		I.D. Nun	nber	
Lou Penrose fo	or City Council					13086	23	
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)	
Rcpt Dt: 09/29/2008	Margaret A Kivinski 32 Coronado Pointe Laguna Niguel CA 92677-5545 ID:	X IND COM OTH PTY SCC	Attorney TherOx	100.00	200.00			
Rcpt Dt: 07/16/2008	Diane K Hall 26411 Palisades Drive Capo Beach CA 92624-1718 ID:	IND     COM     OTH     PTY     SCC	Owner Hall & Assocaites, Inc.	500.00	500.00			
Rept Dt: 09/02/2008	James Houston 345 N Via Las Palmas Palm Springs CA 92262-4292		Retired n/a	630.00	63	0.00		
Rcpt Dt: 09/15/2008	Mr Clifford R Anderson 33381 Cockleshell Drive Dana Point CA 92629-4448 ID:	X IND COM OTH PTY SCC	Retired n/a	100.00	10	0.00		
Rept Dt: 09/26/2008	Michael J. Schroeder 32 Morro Bay Drive Corona Del Mar CA 92625-1021 ID:	IND     COM     OTH     PTY     Scc	Lawyer  Michael J. Schroeder, P.C.	200.00	20	00.00		
			SUBTOTAL	\$				
(Include all	A Summary eived this period - itemized monetary contributions. Schedule A subtotals.)				IN CC		ual ient Committee r than PTY or SCC)	
	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Co	olumn A, Line 1.	)TOTAL \$				Contributor Committee	

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

SCHEDULE A

Statement covers period

Monetary Contributions Received			nts may be rounded whole dollars.	Statement coverage from 2008	ers period 30101	CALIF FO	ORNIA 460
CEE INICTOMOTION	NC ON DEVEDSE			through 2008	20080930		11 / 22
SEE INSTRUCTION NAME OF FILER	NO ON REVERGE			<u> </u>		I.D. Nur	mber
Lou Penrose fo	or City Council					13086	323
DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)		PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 09/26/2008	Melvin A Moore Sea Island Drive, Niguel Shores Box 293 Dana Point CA 92629 ID:	X IND COM OTH PTY SCC	Retired n/a	630.00	630.00		
Rcpt Dt: 08/13/2008	Morris R. Beschloss 71000 Tamarisk Lane Rancho Mirage CA 92270-2363 ID:	X IND COM OTH PTY SCC	Conultant/Writer Self-Employed- Morris Beschloss	100.00	100.00		
Rcpt Dt: 09/15/2008	JVK Imaging Inc. 96 Discovery  Irvine CA 92618-3105 ID:	IND COM OTH PTY SCC		630.00	630.00		
Rcpt Dt: 09/15/2008	Doreen E Lilienfeld 210 W 101st Street #68 New York NY 10025-5059 ID:	X IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Sheaman & Staling	180.00	1	80.00	
Rcpt Dt: 09/02/2008	John W Wilks 80685 Columbia Avenue Indio CA 92201-4954 ID:		Consultant Self-Employed- John Wilk-s	100.00	1	00.00	
			SUBTOTAL	\$			
Schedule A	Summary					Contributor	Codes
1. Amount rec	eived this period - itemized monetary contributions. Schedule A subtotals.)		\$		ii C	ND - Individ OM - Recip othe	
2. Amount rec	eived this period - unitemized contributions of less t	than \$100	\$ _			TH- Other TY - Politic	al Partv
	tary contributions received this period. 1 and 2. Enter here and on the Summary Page, Co	lumn A, Line 1.	)TOTAL \$				Contributor Committee

#### Schedule A Type or print in ink. SCHEDULE A Amounts may be rounded Statement covers period **Monetary Contributions Received** CALIFORNIA 460 to whole dollars. 20080101 **FORM** from\_ 20080930 12 / 22 through\_ SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. Number Lou Penrose for City Council 1308623 IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** PER ELECTION FULL NAME, MAILING ADDRESS DATE CONTRIBUTOR OCCUPATION AND EMPLOYER CALENDAR YEAR TO DATE RECEIVED THIS AND ZIP CODE OF CONTRIBUTOR CODE \* RECEIVED (IF SELF-EMPLOYED, ENTER NAME **PERIOD** (JAN, 1 - DEC, 31) (IF REQUIRED) (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OF BUSINESS) Rcpt Dt: 07/16/2008 X IND 500.00 511.46 District Director Lou Penrose (aka Luigi Rossetti, Jr.) COM 34206 Doheny Park Road OTH Congressman John Campbel-PTY Capo Beach CA 92624-1111 ∟ scc ID: X IND Rcpt Dt: 09/29/2008 150.00 150.00 Retired Luigi Rossetti, Sr. COM 2176 Via Puerta OTH Apt. P n/a PTY Laguna Woods 92637-6849 SCC X IND 630.00 630.00 Rcpt Dt: 09/02/2008 Attorney Michael J Bartlett COM 34871 Doheny Place OTH Dean Law Firm PTY Capo Beach 92624-1715 CA SCC Rcpt Dt: 09/15/2008 500.00 500.00 ⊠ сом California Real Estate Political Action Committee 525 S Virgil Avenue OTH PTY Los Angeles ID: 890106 CA 90020-1403 ⊒ scc Rcpt Dt: 08/13/2008 X IND Sales 100.00 100.00 Erik E Brown COM

### SUBTOTAL \$

DMI

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PTY

SCC

#### Schedule A Summary

1.	Amount received this period - itemized monetary contributions.	
	(Include all Schedule A subtotals.)	\$
	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>
2.	Amount received this period - unitemized contributions of less than \$100	\$

3. Total monetary contributions received this period.

44 Castletree

Rancho Santa Marga@fa

92688-5506

\*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

OTH- Other

PTY - Political Party

SCC- Small Contributor Committee

Type or print in ink.
Amounts may be rounded

SCHEDULE A

Monetary Contributions Received		to	to whole dollars.		80101	california 460 FORM
SEE INSTRUCTION	NS ON REVERSE			through 2008	80930	13 / 22
NAME OF FILER	A					I.D. Number
Lou Penrose fo	or City Council					1308623
DATE RECEIVED	FULL NAME, MAILING 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 I CALENDAR YEA (JAN. 1 - DEC. 3	AR TO DATE
Rcpt Dt: 09/08/2008	Ariana Hall 34206 Doheny Park Road Dana Point CA 92624-1111 ID:	IND COM OTH PTY SCC	Realtor/Broker Self Employed	100.00	100	.00
Rcpt Dt: 08/25/2008	Development Management Group Inc. 40112 Sagewood Drive  Palm Desert CA 92260-2321 ID:	IND COM OTH PTY SCC		100.00	100	.00
Rcpt Dt: 09/15/2008	Lyle J Robertson 26992 Stonehaven Mission Viejo CA 92691-7428	X IND COM OTH PTY SCC	Judicial Officer Orange County	100.00	100	.00
Rcpt Dt: 09/02/2008	Glenn A Goldstein 23 Reunion Road Rye Brook NY 10538	X IND COM OTH PTY SCC	Music Publisher  EMI Music Publishing	100.00	100	.00
Rcpt Dt: 09/26/2008	Thomas H. Antunez 54 Secret Gdn Irvine CA 92620-4805 ID:	X IND COM OTH PTY SCC	CEO Percentix, Inc.	250.00	250	.00
			SUBTOTAL	\$		
I. Amount rec (Include all 2. Amount rec	eived this period - itemized monetary contributions Schedule A subtotals.) eived this period - unitemized contributions of less tary contributions received this period.				IND COM OTH PTY	ntributor Codes - Individual M - Recipient Committee (other than PTY or SCC) H- Other 7 - Political Party C- Small Contributor Committee
	1 and 2. Enter here and on the Summary Page. Co	olumn A. Line 1.	)TOTAL \$ _		[000	

_		-			_	
	∩⊢	J.,	31	ш		Δ

Scheamle /	A		e or print in ink.	SCHEDOLE A			
Monetary Contributions Received			Amounts may be rounded to whole dollars.		ers period 30101	CALIFORNIA 460	
SEE INSTRUCTION	IS ON REVERSE			through 2008	30930		14 / 22
NAME OF FILER Lou Penrose fo	r City Council					1.D. N 1308	umber 3623
DATE RECEIVED	FULL NAME, MAILING 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	PER ELECTION TO DATE (IF REQUIRED)
Rept Dt: 09/02/2008	Lisa A Bartlett 34871 Doheny Place Capo Beach CA 92624-1715	X IND COM OTH PTY	Real Estate Broker  Blue Water Realty & Investments	630.00	63	0.00	
Rcpt Dt: 09/02/2008	Lois J Godfrey 1281 Miramar Drive Fullerton CA 92831-2038 ID:		Not Employed	150.00	15	0.00	
Rcpt Dt: 08/05/2008	Scott R. Baugh 6662 Blue Heron Drive Huntington Beach CA 92648-2652 ID:	X IND COM OTH PTY SCC	Attorney Scott Baugh & Associates	500.00	50	0.00	
Rept Dt: 08/25/2008	Elmer Meagher Properties 12882 Main Street Garden Grove CA 92840-5238 ID:	☐ IND☐ COM☐ OTH☐ PTY☐ SCC		100.00	10	0.00	

	SUBTOTAL \$	15085.00	
Schedule A Summary			*Contributor Codes
Amount received this period - itemized monetary contributions.  (Include all Schedule A subtotals.)	\$		IND - Individual COM - Recipient Committee (other than PTY or SCC)
2. Amount received this period - unitemized contributions of less than \$100	\$		OTH- Other PTY - Political Party
3. Total monetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A. Line 1.)	TOTAL \$		SCC- Small Contributor Committee

Schedul	e C		print in ink.					SCHEDULE	
Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.			Statement covers period from 20080101			ORNIA 460
	IONS ON REVERSE				throug	gh <u>2008093</u> 0	0		5 / 22
Lou Penrose	र a for City Council							1.D. Num 13086	
DATE RECEIVED	FULL NAME, STREET ADDRESS ZIP CODE OF CONTRIBUTO! (IF COMMITTEE, ALSO ENTER I.D. N	CODE*	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	GOODS OR SERVICES FAIR M		AMOUNT/ FAIR MARKET VALUE	DAT CALENDA	UMULATIVE TO DATE ALENDAR YEAR JAN 1 - DEC 31)  PER ELE TO DA (IF REQU	
Rcpt Dt: 09/29/2008	Jack LoConsolo 24462 Del Prado Dana Point CA 9262 ID:	X IND   COM   OTH   PTY   SCC	Owner  Jack's Restaurant	Appetizers for F aiser	Fundr-	240.00		240.00	
Rcpt Dt: 08/16/2008	Lou Penrose (aka Luigi Rossetti, 34206 Doheny Park Road Capo Beach CA 9262	Jr.)	District Director  Congressman John Campl	Coffee for Meet	ing	11.46		511.46	

Capo Beach ID:

Attach additional information on appropriately labeled continuation sheets.	SUBTOTAL \$	251.46	
Schedule C Summary			
Amount received this period - itemized nonmonetary contributions.  (Include all Schedule C subtotals.)	\$	251.46	*Contributor Codes
2. Amount received this period - unitemized nonmonetary contributions of less than \$100	\$	40.13	COM- Recipient Committee - (other than PTY or SCC) OTH - Other
3. Total nonmonetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	TOTAL \$	291.59	PTY - Political Party SCC - Small Contributor Committee

Schedule	E
<b>Payments</b>	Made

		SCHEDULE E
Statem	ent covers period	CALIFORNIA AGO
from	20080101	FORM 400
through	20080930	16 / 22
		I.D. NUMBER
		1308623

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lou Penrose for City Council

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
СТВ	contribution (explain nonmonetary)*	OFC	office expenses	SAL	campaign workers' salaries
CVC	civic donations	PET	petition circulating	TEL	t.v. or cable airtime and production costs
FIL	candidate filing/ballot fees	PHO	phone banks	TRC	candidate travel, lodging, and meals
FND	fundraising events	POL	polling and survey research	TRS	staff/spouse travel, lodging, and meals
IND	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services	TSF	transfer between committees of the same candidate/sponsor
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	campaign literature and mailings	PRT	print ads	WEB	information technology costs (internet, email)
	AND ADDRESS OF DAVIS OF OPENIOR				

N	AME AND ADDRESS OF PAYEE OR C (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	REDITOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Horizon Law Grou 1920 Main Street Suite 210 Irvine		ID:	PRO		1000.00
CompleteCampai 3635 Ruffin Road Floor 3 San Diego	gns.com	ID:	OFC		512.50
DMI 1145 W Collins A		ID:	OFC		210.00
Orange	CA 92867-5445				

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

**SUBTOTAL \$** 

#### Schedule E Summary

1. Itemized payments made this period. (Include all Schedule E subtotals.)	\$ _	7701.16
Unitemized payments made this period of under \$100.	\$ .	0.00
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	·	0.00
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	AL \$	7701.16

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.			Staten	Statement covers period from 20080101		CALIFORNIA 460	
SEE INSTRUCTIONS ON REVERSE				through _	20080930	_	7 / 22	
NAME OF FILER						I.D. NUM	BER	
Lou Penrose for City Council						130862	)2	
CODES: If one of the following codes accurately describes to	the payment, you n	nay enter the	code. Other	wise, describe th	e payment.	1 100002		
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 LIT campaign literature and mailings	POS postage, de	nd appearances nses ulating s survey research		RFD re SAL ca TEL t.v TRC ca TRS st TSF tra VOT vo	dio airtime and producturned contributions turned contributions of turned contributions of the contribution of the contributio	ies production c ,, and meals ing, and mea ttees of the s	als same candidate/sponsor	
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE OR		DESCRIPTION OF PA	AYMENT		AMOUNT PAID	
CompleteCampaigns.com 3635 Ruffin Road Floor 3	ID:	FND					5.00	
San Diego CA 92123-1880  The KAL Group 976 Pacific Avenue	ID:	PRO			***************************************		71.98	
Willows CA 95988-9788								
The KAL Group 976 Pacific Avenue	ID:	PRO					343.17	
Willows CA 95988-9788								
* Payments that are contributions or independent expenditures must	also be summarized (	on Schedule D.			SUI	BTOTAL \$		
Schedule E Summary			N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	***************************************	TTTO TO THE TOTAL THE TAXABLE			
Itemized payments made this period. (Include all Schedule)	e E subtotals.)		•	••••••		\$		
2. Unitemized payments made this period of under \$100.					•			
3. Total interest paid this period on loans. (Enter amount from	m Schedule B, Part	t 1, Column (e	).)	***********	***********************	\$		
4. Total payments made this period. (Add lines 1, 2, and 3. I	Enter here and on t	the Summary						

SCHEDULE E

Schedule	E
<b>Payments</b>	Made

		SCHEDULE F
Statem	ent covers period	CALIFORNIA 460
from	20080101	FORM 400
through	20080930	18 / 22
		I.D. NUMBER
		1308623

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lou Penrose for City Council

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	(DAD) weekle elektron and analysis to a source.
		RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals
IND independent expenditure supporting/opposing others (explain)*	POS postage, delivery and messenger services	TSF transfer between committees of the same candidate/sponsor
LEG legal defense	PRO professional services (legal, accounting)	VOT voter registration
LIT campaign literature and mailings	PRT print ads	WEB information technology costs (internet, email)
NAME AND ADDRESS OF PAYEE OR CREDITOR	CODE OR	DESCRIPTION OF DAYMENT

	AND ADDRESS OF PAYEE OR CRED! F COMMITTEE, ALSO ENTER 1.D. NUMBER)	TOR	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Hart and Associates, L 1300 Bristol Street N Suite 100 Newport Beach	LC CA 92660-2989	ID:	CNS		3000.00
California Voter Guide 1954 W Carson Street Suite B Torrance		ID:	LIT		500.00
ONPVGC 921 11th Street Suite 400 Sacramento	CA 95814-2882	ID:	LIT		575.00

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

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#### Schedule E Summary

1.	Itemized payments made this period.	(Include all Schedule	E subtotals.)	 !	\$
2.	Unitemized payments made this period	d of under \$100.		 	\$

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

Schedule	Ε
<b>Payments</b>	Made

		SCHEDULE E
Statem	ent covers period	california 460
from	20080101	FORM 400
through	20080930	19 / 22
		I.D. NUMBER
		1308623

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Lou Penrose for City Council

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 cor	nmunicatio	ns		RAD radio a	airtime and production costs	
CNS	campaign consultants	MTG	meetings an	d appearar	nces		RFD returne	ed contributions	
CTB	contribution (explain nonmonetary)*	OFC	office expen	ses			SAL campa	ign workers' salaries	
CVC	civic donations	PET	petition circu	ılating			TEL t.v. or	cable airtime and production	costs
FIL	candidate filing/ballot fees	PHO phone banks POL polling and survey research		~	÷ i		TRC candidate travel, lodging, and meal		5
FND	fundraising events			arch		TRS staff/s	als		
IND	independent expenditure supporting/opposing others (explain)*	POS		•		ervices		er between committees of the	
LEG	legal defense							egistration	
	campaign literature and mailings	PRT	•		-9,	رق		ation technology costs (intern	et, email)
	NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR		DESCRIPTION OF PAYMI	ENT	AMOUNT PAID
	CompleteCampaigns.com 3635 Ruffin Road	ID:		OFC					275.00
	Floor 3								
	San Diego CA 92123-1880								

		<u> </u>	
CompleteCampaigns.com 3635 Ruffin Road Floor 3 San Diego CA 92123-1880	ID:	OFC	275.00
Tri Counties Bank 210 N Tehama Street	ID:	OFC	168.51
Willows CA 95988-2834			
DMI 1145 W Collins Avenue	ID:	LIT	600.00
Orange CA 92867-5445			

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

SL	JB1	TO	AL	\$

#### **Schedule E Summary**

- 1. Itemized payments made this period. (Include all Schedule E subtotals.)
- 2. Unitemized payments made this period of under \$100.
- 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

	_			SCHEDULE 5			
Schedule E Payments Made	Атоип	e or print in ink. ts may be rounded whole dollars.	Statement covers period	CALIFORNIA 460			
r dymonio mado	το	wnoie dollars.	from20080101	1 OKM 1 O O			
SEE INSTRUCTIONS ON REVERSE			through20080930	20 / 22			
NAME OF FILER				I.D. NUMBER			
Lou Penrose for City Council				1308623			
CODES: If one of the following codes accurately describes	the payment, you n	nay enter the code	e. 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 IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings		d appearances ses ulating s		s oduction costs ind meals i, and meals es of the same candidate/sponso			
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID			
CompleteCampaigns.com 3635 Ruffin Road Floor 3 San Diego CA 92123-1880	ID:	OFC		275.00			
Tri Counties Bank 210 N Tehama Street	ID:	OFC		15.00			
Willows CA 95988-2834							
CompleteCampaigns.com 3635 Ruffin Road Floor 3	ID:	OFC		150.00			
San Diego CA 92123-1880							
* Payments that are contributions or independent expenditures must	also be summarized	on Schedule D.	SUBT	TOTAL \$ 7701.16			
Schedule E Summary	A CONTRACTOR OF THE CONTRACTOR						
Itemized payments made this period. (Include all Schedul	e E subtotals.)	***************************************		\$			
2. Unitemized payments made this period of under \$100.	,						
manual payments made into position of discord of the	********************	· · · · · · · · · · · · · · · · · · ·	***************************************	· · · · · · · · · · · · · · · · · · ·			

3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)

.....\$

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

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

Statement covers period CALIFORNIA **FORM** 20080101 from 20080930 through 21/22

SEE INSTRUCTIONS ON REVERSE NAME OF FILER I.D. NUMBER Lou Penrose for City Council 1308623

**CODES:** If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. campaign paraphernalia/misc. MBR member communications RAD radio airtime and production costs campaign consultants MTG meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* OFC office expenses SAL campaign workers' salaries CVC civic donations petition circulating TEL t.v. or cable airtime and production costs candidate filing/ballot fees TRC candidate travel, lodging, and meals PHO phone banks FIL FND fundraising events POL polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* POS postage, delivery and messenger services transfer between committees of the same candidate/sponsor TSF IND PRO professional services (legal, accounting) VOT voter registration legal defense LEG WEB information technology costs (internet, email) campaign literature and mailings PRT print ads (d) NAME AND ADDRESS OF PAYEE OR CREDITOR CODE OR OUTSTANDING AMOUNT INCURRED AMOUNT PAID **OUTSTANDING** (IF COMMITTEE, ALSO ENTER I.D. NUMBER) DESCRIPTION OF PAYMENT **BALANCE BEGINNING** THIS PERIOD THIS PERIOD BALANCE AT CLOSE OF THIS PERIOD (ALSO REPORT ON E) OF THIS PERIOD ID: **FND** 0.00 240.00 0.00 240.00 Jack's Restaurant 24462 Del Prado Dana Point 92629-2739 ID: IIT 0.00 1000.00 0.00 1000.00 California Voter Guide 1954 W Carson Street Suite B

Newport Beach	CA	92660-2989				
* Payments that are contrib summarized on Schedule D		dependent expendi	tures must also be	SUBTOTALS	\$ \$	\$ \$

0.00

3000.00

#### Schedule F Summary

Hart and Associates, LLC 1300 Bristol Street N

Torrance

Suite 100

90501-3218

ID:

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

CNS

13717.50	RRED TOTALS \$ _	accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)
0.00	PAID TOTALS \$ _	2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on accrued expenses of \$100 or more, plus total unitemized payments on accrued expenses under \$100.)
13717.50	NET \$	3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)

FPPC Form 460 (January/05)

0.00

3000.00

FDDC Tall.Free Helaline, 868/ASK\_FDDC

Schedule	F		
Accrued	Expenses (	(Unpaid	Bills)

CALIFORNIA 460 Statement covers period

Accided Expenses (Offipaid Bills)	to whole dollars	5.	from2008	0101	ORM TOO
SEE INSTRUCTIONS ON REVERSE			through 2008	0930	22 / 22
NAME OF FILER				IDN	UMBER
Lou Penrose for City Council				1.5.14	014.62.4
Lour States for Sky Sourish				1308	623
CODES: If one of the following codes accurately describes	the payment, you may ente	er the code. Otherwi	se, describe the pay	ment.	
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 LIT campaign literature and mailings	MBR member communication MTG meetings and appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	ances earch messenger services	RFD returned c SAL campaign TEL t.v. or cab TRC candidate TRS staff/spous TSF transfer be VOT voter regis	workers' salaries le airtime and production travel, lodging, and mo se travel, lodging, and etween committees of	on costs eals meals the same candidate/spons
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. 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
ID: Horizon Law Group, LLP 1920 Main Street Suite 210 Irvine CA 92614-7223	PRO	0.00	9120.00	0.00	9120.00
Discover Card 2500 Lake Cook Road	POS	0.00	239.73	0.00	239.73
Deerfield IL 60015-3851					
ID: Discover Card 2500 Lake Cook Road	СМР	0.00	86.06	0.00	86.06
Deerfield IL 60015-3851					
* Payments that are contributions or independent expenditures must also summarized on Schedule D.	be SUBTOTALS	\$ 0.00	\$ 13685. <b>7</b> 9\$	0.00	\$ 13685.79
Schedule F Summary					
Total accrued expenses incurred this period. (Include all Seaccrued expenses of \$100 or more, plus total unitemized at a control of the			INCU	RRED TOTALS \$	
<ol><li>Total accrued expenses paid this period. (Include all Schedaccrued expenses of \$100 or more, plus total unitemized p</li></ol>				PAID TOTALS \$	
3. Net change this period. (Subtract Line 2 from Line 1. Enter on the Summary Page, Column A, Line 9.)				NET\$	May be a negative number.