_								COVER PAGE
C	ecipient Committee ampaign Statement over Page overnment Code Sections 84200-84216.5	1				PECEIVE		LIFORNIA 460 FORM
(0)	Sveriment code decuons 0+200-0+210.0	,		Statement covers period	Date of election if applicable:		Page	e <u>1</u> of <u>41</u>
			from	07/01/2017	(Month, Day, Year)	1118 JAN 29 AM	9: 09 Fage	For Official Use Only
SEI	E INSTRUCTIONS ON REVERSE		thro	ugh12/31/2017	11/06/2018	OFFICE OF		
1.	Type of Recipient Committee:	All Commit	tees – Complete	Parts 1, 2, 3, and 4.	2. Type of Statement:	CITY IF IN HADAT IN	1 1	
	 ☒ Officeholder, Candidate Controlled Co ☐ State Candidate Election Committee ☐ Recall (Also Complete Part 5) ☐ General Purpose Committee ☐ Sponsored ☐ Small Contributor Committee ☐ Political Party/Central Committee 		Commit Cont Spo (Also Com) Primarily Officeho	trolled	Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410) Amendment (Explain	Termination)	Supplementa	atement -Year Report al Preelection Attach Form 495
3.	Committee Information		I.D. NUM 13622		Treasurer(s)			
	COMMITTEE NAME (OR CANDIDATE'S NAME Diane Dixon for City Council 2				NAME OF TREASURER Lysa Ray MAILING ADDRESS 603 E Alton Ave STE	G		
	STREET ADDRESS (NO P.O. BOX)				CITY	STATE	ZIP CODE	AREA CODE/PHONE
	3419 Via Lido #197				Santa Ana	CA	92705	(714)540-229
	CITY	STATE	ZIP CODE	AREA CODE/PHONE	NAME OF ASSISTANT TREASU	JRER, IF ANY		
	Newport Beach	CA	92663	(949) 287-9211				
	MAILING ADDRESS (IF DIFFERENT) NO. AN	D STREET	OR P.O. BOX		MAILING ADDRESS			
	603 E Alton Ave STE G							
	CITY	STATE	ZIP CODE	AREA CODE/PHONE	CITY	STATE	ZIP CODE	AREA CODE/PHONE
	Santa Ana	CA	92705					
	OPTIONAL: FAX / E-MAIL ADDRESS				OPTIONAL: FAX / E-MAIL ADD	RESS		
	lysaray.campaignservices@gmail	.com		N				
4.	Verification I have used all reasonable diligence in preunder penalty of perjury under the laws of the Executed on				Xina Kay		schedules is tru	ue and complete. I certify
	Date Executed on01/12/2018 Date			BySignature of Co	Signature of Tip Genes or Assistar Dianu B Dia ntrolling Officeholder, Candidate, State Measure P	lon	Sponsor	
	Executed onDate			Ву	Signature of Controlling Officeholder, Candidate,			

Signature of Controlling Officeholder, Candidate, State Measure Proponent

FPPC Form 460 (Jan/2016)

Executed on __

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2								
CALIF FC	ORNIA ORM	460						
Page _	2 (of <u>41</u>						

Officeholder or Candidate Controlled Committee			6. Primarily Formed Ballot Measure Committee					
NAME OF OFFICEHOLDER OR CANDIDATE		NAME OF BALLOT MEASURE						
Diane Dixon								
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER I	F APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTI	ON	SUPPORT		
City Council Member: Newport Beach District 1						OPPOSE		
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY	STATE ZIP		Identify the controlling of	iceholder ca	ndidate or state measu	re proponent if an		
3419 Via Lido #197 Newport Bea	ch CA 92663		NAME OF OFFICEHOLDER, CAN		·	- proponent it any		
Related Committees Not Included in this Statement: not included in this statement that are controlled by you or are primal contributions or make expenditures on behalf of your candidacy.	•		OFFICE SOUGHT OR HELD		DISTRICT I	NO. IF ANY		
COMMITTEE NAME I.D. NUMBE	ER							
NAME OF TREASURER CONTROLL YES	ED COMMITTEE?	7.	Primarily Formed Can officeholder(s) or candidate(s					
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)			NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPORT OPPOSE		
CITY STATE ZIP CODE	AREA CODE/PHONE		NAME OF OFFICEHOLDER OR	CANDIDATE	OFFICE SOUGHT OR HEI			
COMMITTEE NAME I.D. NUMBE	ER		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOUGHT OR HEI	_D SUPPORT		
NAME OF TREASURER CONTROLL YES	ED COMMITTEE?		NAME OF OFFICEHOLDER OR (CANDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE		
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)								
CITY STATE ZIP CODE	AREA CODE/PHONE		Atta	ch continuatio	on sheets if necessary			

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statem	ent covers period	CALIFORNIA 160
from	07/01/2017	FORM 400
through _	12/31/2017	Page3 of41
		I.D. NUMBER
		1250245

NAME OF FILER Diane Dixon for City Council 2018 1362246 Column A Calendar Year Summary for Candidates Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROM ATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 44,720.94 58,171.94 7/1 to Date 1/1 through 6/30 15,000.00 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 44,720.94 73,171.94 Received 482.89 1,001.06 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures Made 74,173.00 **Expenditures Made Expenditure Limit Summary for State** Candidates 0.00 22. Cumulative Expenditures Made* 16,080.12 (If Subject to Voluntary Expenditure Limit) 1,667.30 1,667.30 Date of Flection Total to Date (mm/dd/yy) 482.89 1,001.06 18,748.48 **Current Cash Statement** To calculate Column B. add 44,720.94 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 0.00 from Column B of your last reported in Column B. report. Some amounts in 11,419.93 Column A may be negative 43,773.64 figures that should be 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ subtracted from previous If this is a termination statement. Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B. Part 2 \$ _____ carry over the amounts from Lines 2, 7, and 9 (if **Cash Equivalents and Outstanding Debts** any). 0.00

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

Schedule Monetary	A Contributions Received	Amounts may be rounded to whole dollars.		Statement covers period from07/01/2017		LIFORNIA FORM	460
SEE INSTRUCTIO	INS ON REVERSE			through	017 Pa	ge <u>4</u>	of41
NAME OF FILER					f.D.	NUMBER	
Diane Dixon	for City Council 2018				13	62246	
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)	TO	ELECTION D DATE EQUIRED)
11/02/2017	Bruce Akins	⊠IND □COM □OTH □PTY □SCC	Real Estate Development Summit Land Partners	500.00	500.	00 G2018	\$500.00
10/11/2017	Alarmx, Inc.	☐IND ☐COM ☑OTH ☐PTY ☐SCC		300.00	300.	00 G2018	\$300.00
10/11/2017	Debra Allen	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Retired	250.00	250.	00 G2018	\$250.00
10/11/2017	Associated Realty Service of Newport	□IND □COM ⊠OTH □PTY □SCC		250.00	250.	00 G2018	\$250.00
10/09/2017	Avery for City Council 2016 (ID# 1387480)	□IND IND COM OTH PTY SCC		400.00	400.	00 G2018	\$400.00
			SUBTOTAL	\$ 1,700.00			
Amount re (Include al	A Summary ceived this period – itemized monetary contributions. ! Schedule A subtotals.)				(ot	idual cipient Commi ner than PTY ner (e.g., busi	or SCC)

FPPC Form 460 (Jan/2016)
FPPC Advice: advice@fppc.ca.gov (866/275-3772)
www.fppc.ca.gov

SCC - Small Contributor Committee

3. Total monetary contributions received this period.

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		Amounts may be rounded to whole dollars.		CA CA	FORM 460		
			through12/31/	^{'2017} Pag	Page 5 of 41		
NAME OF FILER				I.D.I	NUMBER		
Diane Dixon for City Council 2018				136	2246		
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBI	UTOR 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)	
10/11/2017 David Bahnsen	⊠IND □COM □OTH □PTY □SCC	Wealth Advisor The Bahnsen Group	617.11	1,100.0	G2018 G2014	\$1,100.00 \$900.00	
10/17/2017 Craig Bately	⊠IND □COM □OTH □PTY □SCC	Program Manager Burr White Realty	250.00	250.0	G2018 G2016	\$250.00 \$500.00	
10/17/2017 David Beek		Retail Manager Island Marine Fuel	250.00	250.0	G2018	\$250.00	
10/11/2017 Henry Beek	⊠IND □COM □OTH □PTY □SCC	President Balboa Island Ferry	400.00	400.00	G2018	\$400.00	
10/11/2017 Christopher Bergen	⊠IND □COM □OTH □PTY □SCC	CEO Core3 Tech	250.00	250.00	G2018	\$250.00	
		SUBTOTAL	\$ 1,767.11				

Amounts may be rounded

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

monotary		to whole	dollars.	from07/01/	/0015		460
NAME OF FILER					I.D	. NUMBER	
Diane Dixon	for City Council 2018				13	62246	
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)	_ 1	ELECTION O DATE REQUIRED)
10/05/2017	Daniel Bistany		Officer Breeze IT	250.00	250.	00 G2018	\$250.00
11/14/2017	Paul Blank	☑IND □COM □OTH □PTY □SCC	IT Executive Urban Decay Cosmetics	1,100.00	1,100.	00 G2018	\$1,100.00
11/02/2017	Dalbert Brandon	IND □COM □OTH □PTY □SCC	Engineer Self	500.00	500.	00 G2018	\$500.00
10/11/2017	Robert Briggs	⊠IND □COM □OTH □PTY □SCC	Real Estate Self	250.00	450.	00 G2018	\$450.00
11/14/2017	Robert Briggs		Real Estate Self	200.00	450.	00 G2018	\$450.00
			SUBTOTAL	\$ 2,300.00			

Amounts may be rounded

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from07/01/2017		CALIFORNIA 460		
				through12/31/2017		Page 7 of 41		
NAME OF FILER					1.	D. NUMBER		
Diane Dixon :	for City Council 2018				1	362246		
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 YEAI (JAN. 1 - DEC. 31	₹	R ELECTION TO DATE REQUIRED)	
10/11/2017	Harry Brooks	⊠IND □COM □OTH □PTY □SCC	Orthopedic Surgeon Self	250.00	250	.00 G2018	\$250.00	
11/02/2017	Richard Browne	⊠IND □COM □OTH □PTY □SCC	developer Self	500.00	500	.00 G2018	\$500.00	
11/02/2017	Gary Buntmann		Owner Crimson Resource Management Group	250.00	250	.00 G2018	\$250.00	
10/11/2017	Timothy Burnham	☑IND □COM □OTH □PTY □SCC	Albertini Italian Windows and Doors	250.00	250	.00 G2018	\$250.00	
10/11/2017	Grega Carlson		Core3tech Self	250.00	250	.00 G2018	\$250.00	
			SUBTOTAL	1,500.00				

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH - Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A (CONT.)

Monetary	Monetary Contributions Received		dollars.	Statement covers period from07/01/2017		FORM 460		
				through12/31/	^{'2017} Pa	ge8	of <u>41</u>	
NAME OF FILER				-	I.C	. NUMBER		
Diane Dixon	for City Council 2018				13	62246		
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)	_ T	ELECTION FO DATE REQUIRED)	
10/11/2017	Carlson & Jayakumar, LLP	☐IND ☐COM 図OTH ☐PTY ☐SCC		250.00	250.	00 G2018	\$250.00	
10/11/2017	Antonella Castro	IND COM OTH PTY SCC	Attorney Self	400.00	400.	00 G2018 G2014	\$400.00 \$250.00	
11/02/2017	Chandler's Sand Gravel	□IND □COM ☑OTH □PTY □SCC		400.00	400.	00 G2018	\$400.00	
10/11/2017	Shawn Cowles	☑IND □COM □OTH □PTY □SCC	Attorney Buchalter Nemer	250.00	250.	00 G2018	\$250.00	
10/11/2017	Scott Cunningham	IND □COM □OTH □PTY □SCC	Sales Broadcom	500.00	500.	00 G2018	\$500.00	
			SUBTOTAL	\$ 1,800.00				

*Contributor Codes

IND – Individual

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(other than PTY or SCC)

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PTY – Political Party

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

or.otary		to whole	dollars.	from07/01/	/2017	FORM	460
				through 12/31/	^{'2017} Pag	j e 9	of <u>41</u>
NAME OF FILER				. 75 No.	I.D.	NUMBER	
Diane Dixon :	for City Council 2018				13	52246	
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)	(IF F	ELECTION O DATE REQUIRED)
10/11/2017	Shawn Cunningham	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	500.00	500.0	0 G2018	\$500.00
12/04/2017	John Curci	⊠IND □COM □OTH □PTY □SCC	Real Estate Investment Curci Companies	500.00	500.0	0 G2018	\$500.00
12/04/2017	Michael Curci	IND COM OTH PTY SCC	Real Estate Investment Curci Companies	500.00	500.0	0 G2018	\$500.00
10/17/2017	Morgan Davis	⊠IND □COM □OTH □PTY □SCC	Retired	500.00	500.0	0 G2018	\$500.00
11/02/2017	Al DeGrassi	XIND ☐COM ☐OTH ☐PTY ☐SCC	Banker Plaza Bank	250.00	250.0	0 G2018	\$250.00
			SUBTOTALS	2,250.00			

Amounts may be rounded

*Contributor Codes

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(other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from 07/01/2017		california 460 form		
				through12/31/	^{/2017} Pa	je <u> </u>	of 41	
NAME OF FILER					I.D	NUMBER		
Diane Dixon	for City Council 2018				13	62246		
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)	- I	ELECTION TO DATE REQUIRED)	
07/18/2017	Dennis DeSnoo	⊠IND □COM □OTH □PTY □SCC	Consultant DeSnoo & DeSnoo	500.00	500.1	00 G2018	\$500.00	
10/11/2017	John Dravton	⊠IND □COM □OTH □PTY □SCC	Consultant Self	250.00	250.0	00 G2018	\$250.00	
11/07/2017	Rodney Emery	⊠IND □COM □OTH □PTY □SCC	CEO Steadfast Companies	500.00	500.4	00 G2018	\$500.00	
11/02/2017	E-W Services	□IND □COM ⊠OTH □PTY □SCC		500.00	500.(00 G2018	\$500.00	
11/19/2017	Roberta Fesler	☑IND □COM □OTH □PTY □SCC	Retired	500.00	500.0	00 G2018 G2014	\$500.00 \$1,100.00	
			SUBTOTAL	\$ 2,250.00				

*Contributor Codes
IND – Individual
COM – Recipient Committee
(other than PTY or SCC)
OTH – Other (e.g., business entity)
PTY – Political Party
SCC – Small Contributor Committee

SCHEDULE A (CONT.)

Monetary	Contributions Received	to whole dollars.		from07/01/	· CA	FORM 460	
				through12/31/	2017 Page	_ Page <u>11</u> of <u>41</u>	
NAME OF FILER					I.D.1	NUMBER	
Diane Dixon	for City Council 2018				136	2246	
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)	TO TO	ELECTION D DATE EQUIRED)
12/31/2017	Brett Feuerstein	IND COM OTH PTY SCC	Management Mira Mesa Shopping Center	250.00	250.00	G2018	\$250.0
12/31/2017	Diane Feuerstein	IND COM OTH PTY SCC	Homemaker	250.00	250.00	G2018	\$250.00
12/31/2017	Elliot Feuerstein	□IND □COM ☑OTH □PTY □SCC	Management Mira Mesa Shopping Center	250.00	250.00	G2018	\$250.00
12/31/2017	Helene Feuerstein	⊠IND □COM □OTH □PTY □SCC	Homemaker	250.00	250.00	G2018	\$250.0
12/31/2017	Roberta Feuerstein	IND COM OTH PTY SCC	Owner Mira Mesa Shopping Center	250.00	250.00	G2018	\$250.0
			SUBTOTALS	1,250.00			

*Contributor Codes
IND – Individual
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(other than PTY or SCC)
OTH – Other (e.g., business entity)

PTY - Political Party

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

07/01/2017

Date RCEIVED FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * RECEIVED FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (GOODE * RECEIVED RECEIVED FULL NAME. STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (GOODE * RESELVENCE OF SUBJECT OF CODE OF CONTRIBUTOR (GOODE * RESELVENCE OF SUBJECT OF CODE OF CONTRIBUTOR (GOODE * RESELVENCE OF SUBJECT OF CODE OF CONTRIBUTOR (GOODE * RESELVENCE OF SUBJECT OF CODE OF CONTRIBUTOR (GOODE * RESELVENCE OF SUBJECT OF COLOR OF COLOR OF CODE OF CONTRIBUTOR (GOODE OF CODE OF					from07/01,	/2017	FORIVI	-100
Date Date Pull Name, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CODE * CODE * COUPATION AND EMPLOYER CALENDAR YEAR (JAN.1-) DEC. 31) CODE * CODE * COLUMN CODE * CODE * COLUMN CODE * CODE * COLUMN CODE *					through12/31,	^{/2017} F	age12	of41
DATE RECEIVED FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR COON # COUNTRIBUTOR CODE * COUNTRIBUTOR COON # COU	NAME OF FILER					- 1	D. NUMBER	
Date Received Politic Politi	Diane Dixon	for City Council 2018					1362246	
11/14/2017 Russell Fluter			CONTRIBUTOR	OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME	RECEIVED THIS	CALENDAR YEA	R	TO DATE
COM OTH PTY SCC	11/14/2017	Russell Fluter	□COM □OTH □PTY	Real Estate manager	400.00	400		
Coldwell Banker	10/11/2017	Fourcher 4340, LLC	COM OTH PTY		250.00	250	.00 G2018	\$250.00
COM	10/11/2017	Teri Hardke	□COM □OTH □PTY		250.00	250	.00 G2018	\$250.00
□ COM □ COM □ OTH □ PTY □ SCC	10/11/2017	Kathleen Harrison	□COM □OTH □PTY	Retired	100.00	100	.00 G2018	\$ \$100.00
SUBTOTAL\$ 1,500.00	10/17/2017	Harry S. Tinker Investments	□COM IOTH □PTY		500.00	500	.00 G2018	\$ \$500.00
				SUBTOTALS	1,500.00			

Amounts may be rounded

to whole dollars.

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period		CALIFORNIA 460		
				through12/31/	2017 Pa	ge <u>13</u>	of41	
NAME OF FILER					I.D	NUMBER		
Diane Dixon	for City Council 2018				13	62246		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)	
10/11/2017	Cythnia Helfrich	IND COM OTH PTY SCC	Real Estate Investors Self	400.00	400.	00 G2018	\$400.00	
10/11/2017	William Hendricksen	⊠IND □COM □OTH □PTY □SCC	Retired	400.00	400.	00 G2018	\$400.00	
07/18/2017	Cathy Henn	☑IND □COM □OTH □PTY □SCC	Homemaker	1,100.00	1,100.	00 G2018	\$1,100.00	
10/16/2017	Gavin Herbert	☑IND □COM □OTH □PTY □SCC	Retired	1,000.00	1,000.	G2018 G2014	\$1,000.00 \$1,000.00	
10/11/2017	Jose Hernandez	☑IND □COM □OTH □PTY □SCC	Owner Cielo Lindo Restaurant	100.00	100.4	00 G2018	\$100.00	
			SUBTOTAL	3,000.00				

Amounts may be rounded

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY - Political Party SCC – Small Contributor Committee

SCHEDULE A (CONT.) Amounts may be rounded Statement covers period **CALIFORNIA**

				from07/01/	/2017	FORM	700
				through 12/31	/2017 Pa	ge <u>14</u>	of 41
NAME OF FILER					I.D	. NUMBER	
Diane Dixon	for City Council 2018				13	62246	
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)
09/01/2017	Irvine Company LLC	□IND □COM ☑OTH □PTY □SCC		581.83	1,100.	00 G2018	\$1,100.0
10/17/2017	Brion Jeannette	☑IND □COM □OTH □PTY □SCC	Architect Self	100.00	100.	00 G2018	\$100.0
10/11/2017	John L Curci Company	□IND □COM ☑OTH □PTY □SCC		500.00	1,000.	00 G2018 G2014	\$1,000.0 \$1,000.0
11/14/2017	John L Curci Company	□IND □COM 図OTH □PTY □SCC		500.00	1,000.	G2018 G2014	\$1,000.00 \$1,000.00
10/25/2017	William Johns	⊠IND □COM □OTH □PTY □SCC	President Inland Group	1,000.00	1,000.	00 G2018	\$1,000.00
			SUBTOTALS	2,681.83			

to whole dollars.

*Contributor Codes

IND-Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

Statement covers period

Monetary	Contributions Received	Amounts may be rounded to whole dollars.			CAI	FORM 460		
				through12/31/	<u>'2017</u> Pag	e <u>15</u> (of41	
NAME OF FILER					1.D. I	NUMBER		
Diane Dixon	for City Council 2018				136	2246		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	Т,	ELECTION ODATE EQUIRED)	
11/02/2017	Joanne Kozberg	IND COM OTH PTY SCC	Consultant California Strategies LLC	250.00	250.0	G2018 G2014	\$350.00 \$250.00	
10/11/2017	Larry I Smith & Assoc.	□IND □COM ☑OTH □PTY □SCC		150.00	150.0	G2018	\$150.00	
11/02/2017	Donald Lawrenz	☑IND □COM □OTH □PTY □SCC	Healthcare BestLife	125.00	125.0	G2018	\$125.00	
11/02/2017	Geoffrey LePlastrier	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	President Newport Pacific Land Co	250.00	250.0	G2018	\$250.00	
10/11/2017	Daniel Livingston	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Payne & Fears LLP	100.00	100.0	G2018	\$100.00	
			SUBTOTAL\$	875.00				

Amounts may be rounded

*Contributor Codes

IND - Individual

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

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		utions Received Amounts may be rounded to whole dollars.			ers period CA	CALIFORNIA 460		
				through12/31/	2017 Pag	e <u> </u>	of41	
NAME OF FILER					I.D.	NUMBER		
Diane Dixon :	for City Council 2018				136	2246		
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)	
10/11/2017	Michael Lugo		Sales Integro Insurance	150.00	150.0	0 G2018	\$150.00	
10/11/2017	Mario Marovic		Owner The Stag Bar & Kitchen	1,000.00	1,000.0	0 G2018	\$1,000.00	
10/11/2017	Marie Marston	☑IND □COM □OTH □PTY □SCC	Engineer Civil Works Engineers	250.00	250.0	0 G2018	\$250.00	
11/02/2017	Richard Matros	⊠IND □COM □OTH □PTY □SCC	Psychologist Self	500.00	500.0	0 G2018	\$500.00	
10/11/2017	Carol McDermott		Consultant Entitlement Advisors	250.00	250.0	0 G2018 G2014	\$250.00 \$249.00	
			SUBTOTAL\$	2,150.00				

*Contributor Codes

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PTY - Political Party

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from07/01/	2017	FORM	-100
				through	['] 2017 Pa	ge17 o	f41
NAME OF FILER					I.D	. NUMBER	
Diane Dixon	for City Council 2018				13	62246	
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)	ТС	LECTION DATE QUIRED)
10/09/2017	Brandon McKennon	⊠IND □COM □OTH □PTY □SCC	CEO Breeze IT, Inc.	200.00	200.1	00 G2018	\$200.00
11/03/2017	Robert Meadows		Exec Worrow-Meadows Corp	500.00	500.0	00 G2018	\$500.00
10/11/2017	John Meindl	XIND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Minshaw & Culbertson	250.00	250.(00 G2018	\$250.00
07/27/2017	MHET PAC (ID# 820165)	□IND ☑COM □OTH □PTY □SCC		250.00	250.0	00 G2018	\$500.00
11/02/2017	Lesley Miller	⊠IND □COM □OTH □PTY □SCC	Lawyer Self	500.00	500.0	00 G2018 G2014	\$600.00 \$100.00
			SUBTOTAL\$	1,700.00			

Amounts may be rounded

to whole dollars.

*Contributor Codes

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

Statement covers period

Monetary	Contributions Received	to whole	to whole dollars.		ers period CA	FORM 460		
				through12/31/	/2017 Pag	e <u>18</u>	of <u>41</u>	
NAME OF FILER					I.D.	NUMBER		
Diane Dixon	for City Council 2018				136	2246		
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)	
09/12/2017	Nat'l Assoc. Industrial & Office Properties NATOP PAC (TD# 950520)	☐IND ☑COM ☐OTH ☐PTY ☐SCC		500.00	500.0	G2018	\$500.00	
09/20/2017	Ron Newman Newman Hospitality	□IND □COM ☑OTH □PTY □SCC		900.00	900.0	G2018 G2014	\$900.00 \$1,000.00	
11/02/2017	Alan Oleson	☑IND □COM □OTH □PTY □SCC	Retired	250.00	250.0	G2018	\$250.00	
10/17/2017	William O'Neill	IND COM OTH PTY SCC	Lawyer Ross, Werschling & Wolcott	100.00	100.0	G2018	\$350.00	
10/11/2017	Oxford Investment Partners	□IND □COM 図OTH □PTY □SCC		250.00	250.0	G2018	\$250.00	
			SUBTOTAL \$	2,000.00			:	

*Contributor Codes

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OTH – Other (e.g., business entity)

PTY - Political Party

SCHEDULE A (CONT.)

Monetary	Contributions Received	Amounts may to whole		Statement coverage from07/01/	· C	ALIFORN FORM	^{IA} 460
				through12/31/	2017 Pa	ge <u>19</u>	_ of41
NAME OF FILER					1.D	. NUMBER	
Diane Dixon	for City Council 2018	,			13	62246	
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)		ER ELECTION TO DATE REQUIRED)
11/02/2017	Pacific Life	□IND □COM 図OTH □PTY □SCC		500.00	500.	00 G2018	\$500.00
10/24/2017	James Parker		Owner Port Calypso	1,100.00	1,100.	00 G2018	\$1,100.00
12/12/2017	John Pomer	⊠IND □COM □OTH □PTY □SCC	Co-Founder/Managing Director Redwood West	250.00	250.	00 G2018	\$250.00
10/26/2017	Todd Priest	IND COM OTH PTY SCC	Public Affairs Curt Pringle & Assoc	100.00	100.	00 G2018	\$100.00
12/04/2017	Thomas Purcell	⊠IND □COM □OTH □PTY □SCC	Executive Curci Companies	1,000.00	1,000.	00 G2018	\$1,000.00
			SUBTOTAL	2,950.00			

*Contributor Codes

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(other than PTY or SCC)

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PTY - Political Party

SCHEDULE A (CONT.)

Statement covers period

Monetary	Contributions Received	Amounts may to whole		Statement cove	CAL 2017	IFORNI/ FORM	460
				through12/31/	^{'2017} Page	20	of41
NAME OF FILER					I.D. N	UMBER	
Diane Dixon	for City Council 2018				1362	246	
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	R ELECTION TO DATE REQUIRED)
10/11/2017	Quimby Group Consulting	□IND □COM 図OTH □PTY □SCC		100.00	100.00	G2018	\$100.00
10/25/2017	Susan Riddle	IND COM OTH PTY SCC	Flight Attendant American Airlines	500.00	0.00	G2018 G2014	\$1,100.00 \$750.00
11/08/2017	Susan Riddle	☑IND □COM □OTH □PTY □SCC	Flight Attendant American Airlines	-500.00	0.00	G2018 G2014	\$1,100.00 \$750.00
11/02/2017	Ronald Kent MD	□IND □COM 図OTH □PTY □SCC		500.00	500.00	G2018 G2014	\$500.00 \$300.00
10/30/2017	Andrew Rose	☑IND □COM □OTH □PTY □SCC	Attorney Self	1,100.00	1,100.00	G2018	\$1,100.00
			SUBTOTAL	1,700.00			

Amounts may be rounded

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IND - Individual

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PTY - Political Party

SCHEDULE A (CONT.)

Statement covers period

Monetary Contributions Received		ntributions Received Amounts may be rounded to whole dollars.			ers period CA	CALIFORNIA 460		
				through12/31/	^{'2017} Pa	ge <u>21</u>	of41	
NAME OF FILER		<u></u>		· • · · · ·	I.D	NUMBER		
Diane Dixon f	for City Council 2018				13	62246		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DAT CALENDAR YEAR (JAN. 1 - DEC. 31)		R ELECTION TO DATE REQUIRED)	
10/09/2017	Ronald Rus	IND COM OTH PTY SCC	Attorney Brown Rudnick LLP	250.00	250.	00 G2018	\$250.00	
10/17/2017	Ron Salisbury	⊠IND □COM □OTH □PTY □SCC	Owner The Cannery/El Cholo	1,100.00	1,100.	00 G2018	\$1,100.00	
12/31/2017	Chase Sanderson	IND COM OTH PTY SCC	Real Estate Development Sanderson J Ray	500.00	500.	00 G2018	\$500.00	
10/11/2017	Douglas Simpson	⊠IND □COM □OTH □PTY □SCC	Real Estate Investor Self	250.00	250.	00 G2018	\$250.00	
12/20/2017	Craig Smith	☑IND □COM □OTH □PTY □SCC	Publisher Dockside Sailing Press	100.00	100.	00 G2018	\$100.00	
			SUBTOTAL	\$ 2,200.00				

Amounts may be rounded

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OTH – Other (e.g., business entity)

PTY - Political Party

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from07/01/	2017	FURI	
				through 12/31/	^{'2017} F	age2	22 of 41
NAME OF FILER		. ,			t	D. NUMBE	R
Diane Dixon	for City Council 2018				1	.362246	
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D. CALENDAR YEA (JAN. 1 - DEC. 3	R	PER ELECTION TO DATE (IF REQUIRED)
10/16/2017	Matthew Smith	⊠IND □COM □OTH □PTY □SCC	Owner Pinpoint Properties	250.00	250	.00 G20	18 \$250.00
10/05/2017	Joseph Stapleton	⊠IND □COM □OTH □PTY □SCC	President Spinnaker Investment Group	1,100.00	1,100	.00 G20	18 \$1,100.00
10/25/2017	Shawn Steel	IND COM OTH PTY SCC	Attorney Shawn Steel Law Firm	500.00	500	.00 G20	18 \$500.00
12/31/2017	Harold Struck, Jr	⊠IND □COM □OTH □PTY □SCC	Retired	500.00	500	.00 G20	18 \$500.00
12/04/2017	T.C. Collins & Assoc.	□IND □COM ☑OTH □PTY □SCC		250.00	250	.00 G20	18 \$250.00
			SUBTOTAL\$	2,600.00			

Amounts may be rounded

to whole dollars.

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC)

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

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from

07/01/2017

						4	
				through 12/31/	2017 Paç	je <u>23</u>	of41
NAME OF FILER					I.D.	NUMBER	
Diane Dixon :	for City Council 2018				13/	62246	
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)
07/18/2017	Satoru Tamaribuchi	IND COM OTH PTY SCC	Consultant Self	250.00	250.0	00 G2018	\$250.00
10/11/2017	The Cashion Foundation	☐IND ☐COM 図OTH ☐PTY ☐SCC		400.00	400.0	00 G2018	\$400.00
10/11/2017	The File Group LLC	□IND □COM ⊠OTH □PTY □SCC		400.00	400.0	00 G2018	\$400.00
12/12/2017	Thomas Tucker	⊠IND □COM □OTH □PTY □SCC	Chairman Pennhill Land Company	500.00	500.0	G2018 G2014	\$500.00 \$500.00
10/17/2017	Jim Ulcickas	⊠IND □COM □OTH □PTY □SCC	Restaurant Blue Water Grill	1,100.00	1,100.0	00 G2018	\$1,100.00
_			SUBTOTAL	\$ 2,650.00	-		

Amounts may be rounded

to whole dollars.

*Contributor Codes

IND – Individual

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may be rounded to whole dollars.		Statement covers period from07/01/2017		CALIFORNIA 460		
				through12/31/	²⁰¹⁷ Pa	ge <u>24</u>	of41	
NAME OF FILER				***************************************	1.0	. NUMBER		
Diane Dixon	for City Council 2018				13	62246		
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)	
11/02/2017	Charles Unsworth	IND COM OTH PTY SCC	Retired	500.00	500.	00 G2018	\$500.0	
12/14/2017	Ben Ware	IND COM OTH PTY SCC	VP Ware Disposal	1,000.00	1,000.	00 G2018	\$1,000.00	
12/14/2017	Judith Ware	⊠IND □ COM □ OTH □ PTY □ SCC	President Ware Disposal	-800.00	200.	00 G2018 G2014	\$1,100.00 \$250.00	
11/02/2017	Waterpointe Properties	□IND □COM 図OTH □PTY □SCC		500.00	500.	00 G2018	\$500.00	
10/11/2017	Paul Watkins	IND □ COM □ OTH □ PTY □ SCC	Attorney Self/Paul Watkins	250.00	250.	G2018 G2014	\$350.00 \$250.00	
			SUBTOTAL	\$ 1,450.00			·	

Amounts may be rounded

*Contributor Codes IND - Individual COM - Recipient Committee (other than PTY or SCC) OTH – Other (e.g., business entity) PTY - Political Party SCC - Small Contributor Committee

SCHEDULE A (CONT.) Amounts may be rounded Statement covers period **CALIFORNIA**

07/01/2017

				through 12/31/	<u></u>	e 25	_ of41
NAME OF FILER					I.D.	NUMBER	
Diane Dixon f	for City Council 2018				136	52246	
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)		ER ELECTION TO DATE REQUIRED)
11/02/2017	Paul Weinberg	XIND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Attorney Law Offices of Paul Weinberg	250.00	250.0	0 G2018	\$250.00
10/11/2017	Carol Wilken	IND COM OTH PTY SCC	Retired	400.00	400.0	0 G2018	\$400.00
10/11/2017	Gary Williams	⊠IND □COM □OTH □PTY □SCC	Executive UPS Store	250.00	250.0	0 G2018	\$250.00
10/24/2017	Ron Williams	⊠IND □COM □OTH □PTY □SCC	Owner Talon Executive Services	200.00	200.0	0 G2018	\$200.00
11/02/2017	William Witte	☑IND □COM □OTH □PTY □SCC	Real Estate Related California	500.00	500.0	0 G2018	\$500.00
			SUBTOTALS	1,600.00			

to whole dollars.

*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

FORM

Schedule A (Continuation Sheet)

SCHEDULE A (CONT.)

Monetary Contributions Received		Amounts may to whole		Statement cove	ers period	CALIFORNIA 460		
				through12/31/	2017	Page26 of41		
NAME OF FILER						I.D. NU	MBER	
Diane Dixon	for City Council 2018					13622	.46	
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 YI (JAN. 1 - DEC.	EAR	ТО	LECTION DATE QUIRED)
10/11/2017	Donald Yahn	IND COM OTH PTY SCC	Real Estate Cushman & Wakefield	250.00	2	50.00	G2018	\$250.00
11/06/2017	Robert Yates	IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Engineer Self	250.00	2.	50.00	G2018	\$250.00
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
		□IND □COM □OTH □PTY □SCC						
			SUBTOTAL	500.00				

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY – Political Party SCC – Small Contributor Committee

Schedule B – Part 1 Loans Received	Amounts may be rounded to whole dollars.				Statement cov	rers period	CALIFORN FORM	^{IIA} 460
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2017	Page27	of <u>41</u>
NAME OF FILER							I.D. NUMBER	
Diane Dixon for City Council 2018							1362246	·
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIOR	N. CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants	6 200 00	. 0.00	\$ 0.00		0.00 % RATE	\$ 6,000.00	\$
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		s_6,000.00	\$	\$0.00	DATE DUE	\$0.00	DATE INCURRED	\$
Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants	\$_5,000.00	s0.00	\$ 0.00 PAID \$ 0.00 PAID FORGIVEN \$ 0.00		0.00 % RATE	\$ _5,000.00	\$ 2,200.00 PERELECTION*** G2018 3,700.00 G2014 11,025.0 \$
T⊠ IND ☐ COM ☐ OTH ☐ PTY ☐ SCC Diane Dixon 232 Via San Remo	Owner Diane Dixon Global			PAID				CALENDAR YEAR
Newport Beach, CA 92663 TIME IND COM OTH PTY SCC	Consultants	\$_2,000.00	\$0.00	\$0.00		0.00 % RATE	\$ 2,000.00 07/29/2015 DATE INCURRED	\$ _ 2,200.00 PERELECTION*** G2018 3,700.00 G2014 11,025.0
		SUBTOTALS \$	0.00	0.0	00\$ 13,000.00	\$ 0.00		
Schedule B Summary						(Enter (e) on Schedule E, Line 3)	4	
Loans received this period (Total Column (b) plus unitemized loan				\$	0.00	_	Contributor Codes	
2. Loans paid or forgiven this period				\$	0.00	IN CO	D – Individual DM – Recipient Co	ommittee PTY or SCC) business entity)
Net change this period. (Subtract Lin Enter the net here and on the Summar				NET \$	0 . 0 0 May be a negative number)	1 90	CC – Small Contril	
*Amounts forgiven or paid by another party also ** If required.	must be reported on Schedule A.						EDDC E	orm 460 (lon/201

SCHEDULE B - PART 1 (CONT.)

Schedule B – Part 1 (Continuation Sheet) Loans Received		ounts may be re to whole dollar			Statement cov	ers period	CALIFORNIA 460 FORM		
SEE INSTRUCTIONS ON REVERSE					through12/3	1/2017	Page28	of <u>41</u>	
NAME OF FILER							I.D. NUMBER		
Diane Dixon for City Council 2018							1362246		
FULL NAME, STREET ADDRESS AND ZIP CODE OF LENDER (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IFSELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PAI OR FORGIVE THIS PERIO	N CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE	
Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants	s500.00	\$0.00	PAID \$ 0.0 FORGIVEN 0.0	0	0.00 % RATE	\$ 500.00	\$ 2,200.00 PERELECTION** G2018 3,700.00 G2014 11,025.0 \$	
TIND COM OTH PTY SCC Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants			PAID \$ 0.0 FORGIVEN	0 \$500.00	0.00 _%	\$500.00	CALENDAR YEAR \$ _ 2,200.00 PER ELECTION **	
†⊠ IND □ COM □ OTH □ PTY □ SCC		s500.00	\$0.00	s0.0	DATE DUE	s0.00	02/13/2017 DATE INCURRED	G2014 11,025.0	
Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants			PAID \$ 0.0 FORGIVEN	500.00	0.00 _%	\$ <u>500.00</u>	\$ 2,200.00 PERELECTION** G2018 3,700.00 G2014 11,025.01	
†⊠ IND □ COM □ OTH □ PTY □ SCC		\$500.00	\$0.00	\$0.0	DATE DUE	\$0.00	04/11/2017 DATE INCURRED	\$	
Diane Dixon 232 Via San Remo Newport Beach, CA 92663	Owner Diane Dixon Global Consultants			PAID \$ 0.0 FORGIVEN		<u>0.00</u> % RATE	\$ 500.00	\$ 2,200.00 PER ELECTION ** G2018 3,700.00 G2014 11,025.01	
[†] ⊠ IND □ COM □ OTH □ PTY □ SCC		\$500.00	\$0.00	\$	DATE DUE	\$0.00	05/16/2017 DATE INCURRED	\$	

SUBTOTALS \$

0.00\$

0.00\$

2,000.00\$

†Contributor Codes

IND-Individual

0.00

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC – Small Contributor Committee

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

FPPC Form 460 (Jan/2016)

Schedule C Nonmonetary Contributions Received			Amounts may be rounded to whole dollars.			Statement covers period from07/01/2017			CALIFORNIA 460		
SEE INSTRUCT	TIONS ON REVERSE				through_	12/31/201	.7	Page	29 of	41	
NAME OF FILER								I.D. NUME	BER		
Diane Dixo	n for City Council 2018							136224	6		
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 OF GOODS OR SERVIC	FA	AMOUNT/ IR MARKET VALUE	CALEN	ATIVE TO ATE DAR YEAR - DEC 31)	TC	ELECTION DATE EQUIRED)	
09/19/2017	David Bahnsen	⊠IND □COM □OTH □PTY □SCC	Wealth Advisor The Bahnsen Group	Food for Fundraising Ever	nt	482.89		1,100.00	G2018 G2014	\$1,100.0 \$900.0	
		□IND □COM □OTH □PTY □SCC									
		□IND □COM □OTH □PTY □SCC									
		□IND □COM □OTH □PTY □SCC									
Attach add	ditional information on appropriately labe	eled continuat	ion sheets.	SUBTOTA	AL\$	482.89					
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				\$	482.8	INE	ontributor Co) – Individual M – Recipier	nt Committe		
2. Amount	received this period – unitemized nonmone	tary contributio	ons of less than \$100		\$	0.0		otner tr) H – Other (e Y – Political F			
	nmonetary contributions received this period es 1 and 2. Enter here and on the Summar		ın A, Lines 4 and 10.)	TOTAL	\$	482.8	sc	C – Small Co		committee	

Schedule D **Summary of Expenditures Supporting/Opposing Other** Candidates Measures and Committees

Amounts may be rounded to whole dollars.

SCHEDULE D Statement covers period **CALIFORNIA FORM** 07/01/2017 from.

	es, measures and Commutees						
SEE INSTRUCTI	IONS ON REVERSE		through	<u>17</u> Page	Page30 of41		
NAME OF FILER	₹				I.D. NU	MBER	
Diane Dixor	n for City Council 2018				13622	46	
DATE	NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR MEASURE NUMBER OR LETTER AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
11/21/2017	ONeill for City Council 2020 Support Oppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure		200.00	200.00	G2018 \$200	
07/25/2017	Royce Campaign Committee	Monetary Contribution Nonmonetary Contribution Independent Expenditure		800.00	800.00	G2018 \$800	
	Support Dppose	Monetary Contribution Nonmonetary Contribution Independent Expenditure					
		+	SUBTOTAL S	1,000.00		!	

Schedule D Summary

1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	\$ _	1,000.00
2. Unitemized contributions and independent expenditures made this period of under \$100	. \$ _	0.00
3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.)	_ \$ _	1,000.00

							SC	HEDULE E
Schedule E Payments Made	Amounts may to whole d		fro		o7/01/2017	CALIF		160
SEE INSTRUCTIONS ON REVERSE			thr	ough _	12/31/2017	Page	31 of _	41
NAME OF FILER						I.D. NU	MBER	
Diane Dixon for City Council 2018	_					136224	16	
CODES: If one of the following codes accurately describes CMP campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events ND independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circui PHO phone banks POL polling and s POS postage, deli	munications d appearances ises lating	RAD RFD SAL TEL TRC TRS rvices TSF ing) VOT	radio a returne campa t.v. or c candid staff/sp transfe	e the payment intime and producted contributions ign workers' salar cable airtime and pate travel, lodging, bouse travel, lodging between commit egistration ation technology contributions in the payment in the paymen	ies production costs and meals ng, and meals tees of the sar	ne candidate	₃/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTIO	ON OF PAY	MENT		AMOUN	T PAID
Anedot Brd St #2B Baton Rouge, LA 70801		cc proce	essing					43.20
Anedot Brd St #2B Baton Rouge, LA 70801		cc proce	essing					19.80
Anedot Brd St #2B Baton Rouge, LA 70801		cc proce	essing					35.40
Payments that are contributions or independent expenditures m	nust also be summ	arized on Schedule D.				SUBTOTAL\$		98.40
Schedule E Summary								
Itemized payments made this period. (Include all Schedule I	E subtotals.)					\$	11,41	.9.93
2. 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

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

CNS campaign consultants

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses

MTG meetings and appearances

Statement covers period **CALIFORNIA FORM** 07/01/2017 through ____12/31/2017 Page 32 of 41 I.D. NUMBER

RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1362246 Diane Dixon for City Council 2018 CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment.

CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	POS postage, del	lating		duction costs d meals and meals s of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 3rd St #2B Baton Rouge, LA 70801		cc process	sing	53.25
Anedot 3rd St #2B Baton Rouge, LA 70801		cc process	sing	18.15
Anedot 3rd St #2B Baton Rouge, LA 70801		cc process	sing	4.16
Anedot 3rd St #2B Baton Rouge, LA 70801		cc process	sing	20.10
Anedot 3rd St #2B Baton Rouge, LA 70801		cc process	sing	94.80
* Payments that are contributions or independent expenditures must al	so be summarized on	Schedule D.	SU	BTOTAL \$ 190.46

Amounts may be rounded to whole dollars.

Statement covers period **CALIFORNIA FORM** 07/01/2017 through 12/31/2017 Page 33 of 41 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1362246 Diane Dixon for City Council 2018

CNS campaign consultants MTG meetin CTB contribution (explain nonmonetary)* OFC office CVC civic donations PET petition FIL candidate filing/ballot fees PHO phone FND fundraising events POL polling IND independent expenditure supporting/opposing others (explain)* MTG meetin meetin OFC office PET petition phone PHO phone POL polling POS postage	ommunications and appearances lenses culating d survey research delivery and messenger services lal services (legal, accounting) RAD radio airti returned campaigr tt.v. or cat TRC candidate TRS staff/spou transfer b VOT voter reg	ime and production costs contributions n workers' salaries ble airtime and production costs travel, lodging, and meals use travel, lodging, and meals between committees of the same candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMI	ENT AMOUNT PAID
Anedot 3rd St #2B Baton Rouge, LA 70801	cc Processing	51.30
Anedot 3rd St #2B Baton Rouge, LA 70801	cc Processing	83.10
Anedot 3rd St #2B Baton Rouge, LA 70801	cc Processing	4.16
Anedot 3rd St #2B Baton Rouge, LA 70801	cc processing	43.20
Anedot 3rd St #2B Baton Rouge, LA 70801	cc Processing	19.80
* Payments that are contributions or independent expenditures must also be summariz	on Schedule D.	SUBTOTAL \$ 201.56

Amounts may be rounded to whole dollars.

MBR member communications

OFC office expenses PET petition circulating

phone banks

PHO

POL

MTG meetings and appearances

polling and survey research

POS postage, delivery and messenger services

	SCHEDULE E (CONT.
statement covers period	CALIFORNIA 460
07/01/2017	FORM 400

I.D. NUMBER 1362246

rom	07/01/2017	FO	FORM 46				
hrough_	12/31/2017	Page _	34	of_	41		

SEE INSTRUCTIONS ON REVERSE

CMP campaign paraphernalia/misc.

CTB contribution (explain nonmonetary)*

independent expenditure supporting/opposing others (explain)*

candidate filing/ballot fees

campaign consultants

CVC civic donations

FND fundraising events

FIL

IND

NAME OF FILER

Diane Dixon for City Council 2018

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs

RFD returned contributions

SAL campaign workers' salaries

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

staff/spouse travel, lodging, and meals

TSF transfer between committees of the same candidate/sponsor

LEG legal defense LIT campaign literature and mailings		nal services (legal, accounti		ts (internet, e-mail)
NAME AND ADDRESS OF PA (IF COMMITTEE, ALSO ENTER I.D. NU	YEE JMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Anedot 3rd St #2B Baton Rouge, LA 70801		cc Proce	ssing	19.80
Anedot 3rd St #2B Baton Rouge, LA 70801		cc proce	ssing	43.20
Anedot 3rd St #2B Baton Rouge, LA 70801		cc proce	ssing	19.80
Anedot 3rd St #2B Baton Rouge, LA 70801		cc proce	ssing	29.85
Anedot 3rd St #2B Baton Rouge, LA 70801		cc Proce	ssing	39.30
* Payments that are contributions or independent expand	litures must also be summarized	on Schodulo D	91	URTOTAL \$ 151 95

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

SUBTOTAL \$

151.95

Amounts may be rounded to whole dollars.

MBR member communications

		SCHEDULE E (CONT.)
Stat	ement covers period	CALIFORNIA 460
from	07/01/2017	FORM TOO

through ____12/31/2017

Page ___35_ of __41_

I.D. NUMBER 1362246

NAME OF FILER

CMP campaign paraphernalia/misc.

SEE INSTRUCTIONS ON REVERSE

Diane Dixon for City Council 2018

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

RAD radio airtime and production costs

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	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)		RFD SAL TEL TRC TRS TSF VOT	voter registration	is salaries and production costs ging, and meals odging, and meals mmittees of the same o	oduction costs and meals and meals and meals and meals as of the same candidate/sponsor	
LIT campaign literature and mailings NAME AND ADDRESS OF PAYEE	PRT print ads	CODE	OR	WEB DESCRIPTION		gy costs (internet, e-ma	AMOUNT PAID
(IF COMMITTEE, ALSO ENTER I.D. NUMBER) Bank of America 3730 Bristol St Santa Ana, CA 92705							50.00
Bell McAndrews & Hiltachk 455 Capitol Mall #600 Sacramento, CA 95814		PRO					1,000.00
Bell McAndrews & Hiltachk 455 Capitol Mall #600 Sacramento, CA 95814		PRO					1,000.00
Bell McAndrews & Hiltachk 455 Capitol Mall #600 Sacramento, CA 95814		PRO					667.30
Bieber Communications 3609 W MacArthur Blvd #812 Santa Ana, CA 92704		CMP					495.20
* Payments that are contributions or independent expenditures must a	lso be summarized on	Schedule I).			SUBTOTAL \$	3,212.50

CMP campaign paraphernalia/misc.

Amounts may be rounded to whole dollars.

MBR member communications

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

Statement covers period **CALIFORNIA FORM** 07/01/2017 from through ____12/31/2017 Page ___36 of __41 I.D. NUMBER

RAD radio airtime and production costs

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1362246 Diane Dixon for City Council 2018

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	MTG		RFD SAL TEL TRC TRS TSF VOT	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 sam voter registration information technology costs (internet, e-i	iction costs meals nd meals of the same candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
Bieber Communications 3609 W MacArthur Blvd #812 Santa Ana, CA 92704		CMP				455.00
Chase Card PO Box 94014 Palatine, IL 60094		CMP				1,232.84
Chase Card PO Box 94014 Palatine, IL 60094		OFC				72.73
Chase Card PO Box 94014 Palatine, IL 60094		CMP				105.67
Chase Card PO Box 94014 Palatine, IL 60094		CMP				843.52
* Payments that are contributions or independent expenditures must al	so be summarized	on Schedule	D.		SUBTOTAL \$	2,709.76

CMP campaign paraphernalia/misc.

CNS campaign consultants

Amounts may be rounded to whole dollars.

MBR member communications

MTG meetings and appearances

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

SCHEDULE E (CONT.)

Statement covers period **CALIFORNIA FORM** 07/01/2017 from. through ___12/31/2017 Page 37 of 41 i.D. NUMBER 1362246

RAD radio airtime and production costs

RFD returned contributions

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Diane Dixon for City Council 2018

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 LT campaign literature and mailings		ises lating s survey rese ivery and n			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 sar voter registration information technology costs (internet, e	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT	AMOUNT PAID
Dina Cards 25 Parkcrest Newport Coast, CA 92657		CMP				378.00
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO				25.00
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO				25.00
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO				25.00
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO				25.00
* Payments that are contributions or independent expenditures must al	so be summarized on	Schedule F)		SUBTOTAL \$	478 00

SUBTOTAL \$

478.00

Amounts may be rounded to whole dollars.

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

Statement covers period **CALIFORNIA FORM** 07/01/2017 through ____12/31/2017 Page 38 of 41 I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1362246 Diane Dixon for City Council 2018

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LT campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads		RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals transfer between committees of the sam VOT voter registration WEB information technology costs (internet, e-			me candidate/sponsor	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTIO	N OF PAYMENT		AMOUNT PAID
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO					50.00
Lysa Ray Campaign Services 603 E Alton Ave STE G Santa Ana, CA 92705		PRO					50.00
Phyllis Schneider & Assoc 360 E 1st St #736 Tustin, CA 92780		FND					520.00
Phyllis Schneider & Assoc 360 E 1st St #736 Tustin, CA 92780		FND					3,757.30
* Payments that are contributions or independent expenditures must als	so be summarized on	Schedule D.				SUBTOTAL \$	4,377.30

Schedule F Accrued Expenses (Unpaid Bills)	Amounts may be round to whole dollars.	ded	Statement cove	-	SCHEDULE IFORNIA 460
SEE INSTRUCTIONS ON REVERSE NAME OF FILER			through12/31/	2017 Page I.D. NU	e 39 of 41
Diane Dixon for City Council 2018				1362	246
CODES: If one of the following codes accurately described. 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 appeara OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	ns inces earch messenger services	RAD radio airtime a RFD returned contri SAL campaign worl TEL t.v. or cable air TRC candidate trave TRS staff/spouse tra TSF transfer betwee VOT voter registrati	nd production costs ibutions kers' salaries time and production cost, lodging, and meals avel, lodging, and meals en committees of the sa	s ame 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
Bell McAndrews & Hiltachk	PRO	0.00	1,667,30	0.00	1,667

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
Bell McAndrews & Hiltachk 455 Capitol Mall #600 Sacramento, CA 95814	PRO	0.00	1,667.30	0.00	1,667.30
* Payments that are contributions or independent expenditures must also be	SUBTOTALS	\$ 0.00	1 667 30	0.00\$	1 667 30

SUBTOTALS \$ 0.00\$ 1,667.30\$ 0.00\$ 1,667.30 summarized on Schedule D.

Schedule F Summary

lotal accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for accrued expenses of \$100 or more, plus total unitemized accrued expenses under \$100.)	. INCURRED TOTALS \$	1,667.30
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.)	PAID TOTALS \$	0.00
Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.)	NET \$	1,667.30 May be a negative number

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

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers period	CALIFORNIA 160
from07/01/2017	FORM 460
through 12/31/2017	Page40 of41
	I.D. NUMBER
	1362246

Diane Dixon for City Council 2018

NAME OF AGENT OR INDEPENDENT CONTRACTOR

SEE INSTRUCTIONS ON REVERSE

Chase Card

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 MTG meetings and appearances RFD returned contributions CNS campaign consultants CTB contribution (explain nonmonetary)* OFC office expenses SAL campaign workers' salaries TEL t.v. or cable airtime and production costs CVC civic donations PET petition circulating 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 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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
California Republican Party	СТВ		100.00
Mail Boxes Lido 3419 Via Lido Newport Beach, CA 92663	CMP		300.00
ONeill for City Council 2020 (ID# 1380984) 603 E. Alton Ave., Ste. G Santa Ana, CA 92705	CTB		200.00
Republican Party of Orange County 1422 Edinger Ave #110 Tustin, CA 92780	CMP		250.00
Attach additional information on appropriately labeled continuation st	neets		TOTAL* \$ 850.00

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

FPPC Form 460 (Jan/2016) FPPC Advice: advice@fppc.ca.gov (866/275-3772) www.fppc.ca.gov

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

Amounts may be rounded to whole dollars.

SCHEDULE G (CONT.)

Statement covers period	CALIFORNIA 160	
from 07/01/2017	FORM 40U	
through 12/31/2017	Page 41 of 41	
	I.D. NUMBER	
	1362246	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Diane Dixon for City Council 2018

NAME OF AGENT OR INDEPENDENT CONTRACTOR

Chase Card

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

print ads

PRO

PRT

CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations PET candidate filing/ballot fees FIL FND fundraising events IND independent expenditure supporting/opposing others (explain)* POS

legal defense LEG

campaign literature and mailings

MBR member communications RAD radio airtime and production costs MTG meetings and appearances RFD returned contributions

OFC office expenses SAL campaign workers' salaries petition circulating TEL t.v. or cable airtime and production costs

PHO phone banks TRC candidate travel, lodging, and meals POL polling and survey research TRS staff/spouse travel, lodging, and meals postage, delivery and messenger services

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

^{*} 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
Royce Campaign Committee 9460 Tegner Rd. Hilmar, CA 95324	CTB			800.00
	1			
Attach additional information on appropriately labeled continuation sheets.			TOTAL* \$	800.00

professional services (legal, accounting)

^{*} 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.