

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

<p>RECEIVED</p> <p>Date Stamp</p> <p>2012 MAY 31 AM 11:34</p> <p>OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH</p>	<p>CALIFORNIA FORM <b>460</b></p>
	<p>Page <u>1</u> of <u>6</u></p> <p>For Official Use Only</p>

Statement covers period  
from 07/01/2011  
through 12/31/2011

Date of election if applicable:  
(Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

**1. Type of Recipient Committee:** All Committees – Complete Parts 1, 2, 3, and 4.

- |   |   |
|---|---|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee | <input type="checkbox"/> Primarily Formed Ballot Measure Committee  |
| <input type="radio"/> State Candidate Election Committee              | <input type="radio"/> Controlled  |
| <input type="radio"/> Recall<br><i>(Also Complete Part 5)</i>         | <input type="radio"/> Sponsored<br><i>(Also Complete Part 6)</i>  |
| <input checked="" type="checkbox"/> General Purpose Committee         | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee<br><i>(Also Complete Part 7)</i> |
| <input checked="" type="radio"/> Sponsored                            |   |
| <input type="radio"/> Small Contributor Committee                     |   |
| <input type="radio"/> Political Party/Central Committee               |   |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement                                   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input checked="" type="checkbox"/> Amendment (Explain below)                               |   |

All pages are on the 2005 version. Updated phone number. Schedule A reflects street addresses.

**3. Committee Information**

I.D. NUMBER  
1243243

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

STREET ADDRESS (NO P.O. BOX)

c/o Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd.

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>North Hollywood</u>	<u>CA</u>	<u>91602</u>	<u>(818) 769-2010</u>

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

P.O. BOX 1695

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>NEWPORT BEACH</u>	<u>CA</u>	<u>92659</u>	<u>(949) 295-5817</u>

OPTIONAL: FAX / E-MAIL ADDRESS

**Treasurer(s)**

NAME OF TREASURER

PHILIP PUHEK

MAILING ADDRESS

P.O. BOX 1695

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>NEWPORT BEACH</u>	<u>CA</u>	<u>92659</u>	<u>(949) 295-5817</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS

**4. Verification**

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 05/18/2012  
Date

By PHIL PUHEK  
Signature of Treasurer or Assistant Treasurer

Executed on 05/18/2012  
Date

By PHIL PUHEK  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
Date

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**

Type or print in ink.

COVER PAGE - PART 2

<b>CALIFORNIA FORM</b>	<b>460</b>
Page <u>  2  </u> of <u>  6  </u>	

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE \_\_\_\_\_

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE) \_\_\_\_\_

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)    CITY                      STATE                      ZIP \_\_\_\_\_

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE                      ZIP CODE                      AREA CODE/PHONE

  

COMMITTEE NAME	I.D. NUMBER
NAME OF TREASURER	CONTROLLED COMMITTEE? <input type="checkbox"/> YES <input type="checkbox"/> NO
COMMITTEE ADDRESS	STREET ADDRESS (NO P.O. BOX)
CITY	STATE                      ZIP CODE                      AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE \_\_\_\_\_

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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**Identify the controlling officeholder, candidate, or state measure proponent, if any.**

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT \_\_\_\_\_

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE

*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

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

SUMMARY PAGE

Statement covers period from <u>07/01/2011</u>	<b>CALIFORNIA FORM 460</b>
through <u>12/31/2011</u>	
Page <u>3</u> of <u>6</u>	
I.D. NUMBER <u>1243243</u>	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>12984.22</u>	\$ <u>12984.22</u>
2. Loans Received ..... Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>12984.22</u>	\$ <u>12984.22</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>12984.22</u>	\$ <u>12984.22</u>

**Calendar Year Summary for Candidates  
Running in Both the State Primary and  
General Elections**

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

**Expenditures Made**

	Column A	Column B
6. Payments Made ..... Schedule E, Line 4	\$ <u>0.00</u>	\$ <u>0.00</u>
7. Loans Made ..... Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>0.00</u>	\$ <u>0.00</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>0.00</u>	\$ <u>0.00</u>

**Expenditure Limit Summary for State  
Candidates**

**22. Cumulative Expenditures Made\***  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

**Current Cash Statement**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>39629.52</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>12984.22</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>.51</u>
15. Cash Payments ..... Column A, Line 8 above	<u>0.00</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>52614.25</u>

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

If this is a termination statement, Line 16 must be zero.

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>0.00</u>
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**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

**Schedule A  
Monetary Contributions Received**

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

SCHEDULE A

Statement covers period from <u>07/01/2011</u> through <u>12/31/2011</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>4</u> of <u>6</u>
I.D. NUMBER 1243243	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
	SEE ATTACHED SCHEDULE	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>						

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>12084.00</u>
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$ <u>900.22</u>
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$ <u>12984.22</u></b>

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

**Schedule C  
Nonmonetary Contributions Received**

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

SCHEDULE C

Statement covers period from <u>07/01/2011</u> through <u>12/31/2011</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>5</u> of <u>6</u>
I.D. NUMBER	

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

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 SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
7/31/2011	Newport Beach Firefighters Association c/o Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd. North Hollywood, CA 91602	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Accounting Services - July 2011 \$335.00	0.00	0.00	
	Memo: Payment of administrative expense by sponsor. Reported pursuant to 2 CCR Section 18215(c) (16)	<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$**

**Schedule C Summary**

1. Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.) .....	\$	0.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100 .....	\$	0.00
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.) .....	<b>TOTAL \$</b>	0.00

\*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 I  
Miscellaneous Increases to Cash**

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

SCHEDULE I

Statement covers period  
from 07/01/2011  
through 12/31/2011

**CALIFORNIA  
FORM 460**

Page 6 of 6

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

I.D. NUMBER

1243243

DATE RECEIVED	FULL NAME AND ADDRESS OF SOURCE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	DESCRIPTION OF RECEIPT	AMOUNT OF INCREASE TO CASH

Attach additional information on appropriately labeled continuation sheets.

**SUBTOTAL \$ 0.00**

**Schedule I Summary**

1. Itemized increases to cash this period. ....	\$ 0.00
2. Unitemized increases to cash of under \$100 this period. ....	\$ .51
3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).) .....	\$ 0.00
4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) .....	<b>TOTAL \$ .51</b>

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC  
I.D. NUMBER: 1243243  
Schedule A - Monetary Contributions Received  
Statement covers period from 07/01/2011 through 12/31/2011

Contributor	Occupation	Employer	Amount Received this Period				Total
			07/08/11	07/08/11	11/11/11	11/11/11	
Amat, Alex	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Amrose, Mathew	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Anderson, Bryce	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Anderson, Mathew	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Beuch, Rob	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Blythe, Casey	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Bogin, Jeff	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Boland, James	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Boullianne, Bill	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Boyd, Adam	Ind	Fire Fighter	30.00	30.00	24.00	18.00	102.00
Boyles, Jeff	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Brown, Chris	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Brown, Erin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Bullock, Ryan	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Carr, Justin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Carter, Bryan	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Cathey, Geoff	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Chapman, Dan	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Chidley, Steve	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Conklin, Brent	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Dall, Charles	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Davenport, Adam	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Dean, Justin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Duncan, Charles	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Cykesten, Oscar	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Edgar, James	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Edwards, Dennis	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Ellis, Lloyd	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Fanti, Chris	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Fernandez, Jason	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Frasz, Brian	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00

All contributors employment address is [REDACTED]  
All contributors are Firefighters and employed by the City of Newport Beach  
Contributions received through intermediary - Newport Beach Firefighters Association

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

I.D. NUMBER: 1243243

Schedule A - Monetary Contributions Received

Statement covers period from 07/01/2011 through 12/31/2011

Contributor	Occupation	Employer	Amount Received this Period				Total
			07/08/11	07/08/11	11/11/11	11/11/11	
Freeman, Cory	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Gamble, Ronald	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Garcia, Pete	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Garman, Mark	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Geddis, Clifford	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Gonzalez, Kevin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Gorman, Kelly	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Gutierrez, Ron	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Harrison, Joe	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Hendenberg, Keith	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Herr, Thomas	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Hopper, Andres	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Hutzler, Cameron	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Janis, Andrew	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Jeziorski, James	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Kang, Ray	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Keen, Charles	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Keene, Justin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Kent, Brandon	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Kime, Justin	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Kluve, John	Ind	Fire Fighter	18.00	30.00	24.00	24.00	96.00
Knipp, Todd	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Laser, Joseph	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lauderdale, Jon	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lazar, Garrick	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lazar, Jerry	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Leftige, Jason	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lerch, Kim	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Liberto, Michael	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lloy, Thomas	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lucas, Nic	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00

All contributors employment address is: [REDACTED]

All contributors are Firefighters and employed by the City of Newport Beach

Contributions received through intermediary - Newport Beach Firefighters Association



NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

I.D. NUMBER: 1243243

Schedule A - Monetary Contributions Received

Statement covers period from 07/01/2011 through 12/31/2011

Contributor	Occupation	Employer	Amount Received this Period				Total
			07/08/11	07/08/11	11/11/11	11/11/11	
Lunde, Ty	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Lyons, John	Ind	Fire Fighter	30.00	30.00	24.00	18.00	102.00
Mahnken, Brian	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Martin, Jeremiah	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Martin, Steve	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
McAllister, Grett	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
McClarey, Mathew	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
McDonough, Brian	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Medina, Carlos	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Michae, Steven	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Mollica, John	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Morris, Nadine	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Mullen, Mike	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Novak, Adam	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
O'Leary, Ryan	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Olivas, Jude	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Oseguera, Armando	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Parsons, Grant	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Philbin, James	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Ponegalek, Chad	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Popovich, Ryan	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Puhek, Phil	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Reed, Aaron	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Reideler, James	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Restadius, Ralph	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Richards, Timothy	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Ruffini, Richard	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Rush, Dean	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Salerno, Bobby	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Schwegman	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00
Shank, David	Ind	Fire Fighter	30.00	30.00	24.00	24.00	108.00

All contributors employment address is: [REDACTED]

All contributors are Firefighters and employed by the City of Newport Beach

Contributions received through intermediary - Newport Beach Firefighters Association

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC  
I.D. NUMBER: 1243243  
Schedule A - Monetary Contributions Received  
Statement covers period from 07/01/2011 through 12/31/2011

Contributor	Occupation	Amount Received this Period	Amount Received this Period				Total
			Code	Employer	07/08/11	07/08/11	
Shook, Travis	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Smith, Brad	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Sodergren, Michael	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Spiker, Chad	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Stankevitz, Chris	Ind Fire Fighter	12.00	-	-	-	-	12.00
Stocks, Nick	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Strack, James	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Sutherland, Brett	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Tajeron, Roman	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Teale, Terry	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Testa, John	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Tiscareno, Kevin	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Van Andel	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
White, Glenn	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Wick, Edward	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Winokur, Keith	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Yaroma, Nick	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Ybarra, Mike	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Zaccaro, Michael	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
Zaccaro, Rick	Ind Fire Fighter	30.00	30.00	30.00	24.00	24.00	108.00
		<u>3,360.00</u>	<u>3,360.00</u>	<u>2,688.00</u>	<u>2,676.00</u>	<u>12,084.00</u>	

All contributors employment address is [REDACTED]

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