

# Recipient Committee Campaign Statement Cover Page

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OFFICE OF THE CITY CLERK  
CITY OF NEWPORT BEACH

**CALIFORNIA FORM 460**

Page 1 of 3  
For Official Use Only

Statement covers period  
from 01.01.2017  
through 06.30.2017

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.

- Officeholder, Candidate Controlled Committee
  - State Candidate Election Committee
  - Recall  
(Also Complete Part 5)
- General Purpose Committee
  - Sponsored
  - Small Contributor Committee
  - Political Party/Central Committee
- Primarily Formed Ballot Measure Committee
  - Controlled
  - Sponsored  
(Also Complete Part 6)
- Primarily Formed Candidate/Officeholder Committee  
(Also Complete Part 7)

### 2. Type of Statement:

- Preelection Statement
- Semi-annual Statement
- Termination Statement  
(Also file a Form 410 Termination)
- Amendment (Explain below)  
Remove Assistant Treasurer; Correct Name of Creditor Schedule F;  
and, Correct Statement Summary Page
- Quarterly Statement
- Special Odd-Year Report

### 3. Committee Information

I.D. NUMBER  
1369133

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

Line in the Sand

STREET ADDRESS (NO P.O. BOX)

10 Wild Goose Court

|                      |           |              |                     |
|----------------------|-----------|--------------|---------------------|
| CITY                 | STATE     | ZIP CODE     | AREA CODE/PHONE     |
| <u>Newport Beach</u> | <u>CA</u> | <u>92663</u> | <u>949.612.7521</u> |

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

PO Box 15725

|                      |           |              |                     |
|----------------------|-----------|--------------|---------------------|
| CITY                 | STATE     | ZIP CODE     | AREA CODE/PHONE     |
| <u>Newport Beach</u> | <u>CA</u> | <u>92659</u> | <u>949.612.7521</u> |

OPTIONAL: FAX / E-MAIL ADDRESS

dorothykraus@gmail.com

### Treasurer(s)

NAME OF TREASURER

Dorothy Kraus

MAILING ADDRESS

10 Wild Goose Court

|                      |           |              |                     |
|----------------------|-----------|--------------|---------------------|
| CITY                 | STATE     | ZIP CODE     | AREA CODE/PHONE     |
| <u>Newport Beach</u> | <u>CA</u> | <u>92663</u> | <u>949.612.7521</u> |

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

|      |       |          |                 |
|------|-------|----------|-----------------|
| CITY | STATE | ZIP CODE | AREA CODE/PHONE |
|------|-------|----------|-----------------|

OPTIONAL: FAX / E-MAIL ADDRESS

### 4. Verification

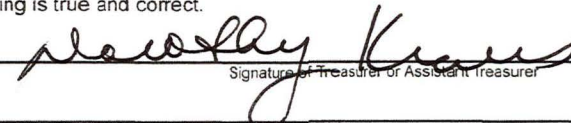
I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and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

Executed on 27 January 2018  
Date

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

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

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

By   
Signature of Treasurer or Assistant Treasurer

By \_\_\_\_\_  
Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

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

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

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

|  |                                |
|--|--------------------------------|
| Statement covers period<br>from 01.01.2017<br>through 06.30.2017 | <b>CALIFORNIA<br/>FORM 460</b> |
|  | Page 2 of 3                    |
| I.D. NUMBER<br>1369133   |                                |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Line in the Sand

**Contributions Received**

|  | Column A<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 1. Monetary Contributions..... Schedule A, Line 3    | \$ 16,678.00   | \$ 16,678.00                               |
| 2. Loans Received..... Schedule B, Line 3            | 0.00   | 0.00                                       |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2  | \$ 16,678.00   | \$ 16,678.00                               |
| 4. Nonmonetary Contributions..... Schedule C, Line 3 | 291.60   | 291.60                                     |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4 | \$ 16,969.60   | \$ 16,969.60                               |

**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<br>TOTAL THIS PERIOD<br>(FROM ATTACHED SCHEDULES) | Column B<br>CALENDAR YEAR<br>TOTAL TO DATE |
|--|--|--|
| 6. Payments Made..... Schedule E, Line 4                   | \$ 23,726.06   | \$ 23,726.06                               |
| 7. Loans Made..... Schedule H, Line 3                      | 0.00   | 0.00                                       |
| 8. SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7             | \$ 23,726.06   | \$ 23,726.06                               |
| 9. Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3 | 52,093.95  | 52,093.95                                  |
| 10. Nonmonetary Adjustment..... Schedule C, Line 3         | 291.60   | 291.60                                     |
| 11. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10      | \$ 76,111.61   | \$ 76,111.61                               |

**Expenditure Limit Summary for State  
Candidates**

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

| Date of Election<br>(mm/dd/yy) | Total to Date |
|--------------------------------|---------------|
| ____/____/____                 | \$ _____      |
| ____/____/____                 | \$ _____      |

**Current Cash Statement**

|  |              |
|--|--------------|
| 12. Beginning Cash Balance..... Previous Summary Page, Line 16             | \$ 37,454.97 |
| 13. Cash Receipts..... Column A, Line 3 above                              | 16,678.00    |
| 14. Miscellaneous Increases to Cash..... Schedule I, Line 4                | 51.77        |
| 15. Cash Payments..... Column A, Line 8 above                              | 23,726.06    |
| 16. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 30,458.66 |

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

|  |         |
|--|---------|
| 17. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2 | \$ 0.00 |
|--|---------|

**Cash Equivalents and Outstanding Debts**

|  |         |
|--|---------|
| 18. Cash Equivalents..... See instructions on reverse            | \$ 0.00 |
| 19. Outstanding Debts..... Add Line 2 + Line 9 in Column B above | \$ 0.00 |

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.

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

Amounts may be rounded to whole dollars.

|  |                            |
|--|----------------------------|
| Statement covers period<br>from <u>01.01.2017</u><br>through <u>06.30.2017</u> | <b>CALIFORNIA FORM 460</b> |
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|  | I.D. NUMBER<br>1369133     |

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

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

| NAME AND ADDRESS OF CREDITOR<br>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)   | CODE OR DESCRIPTION OF PAYMENT | (a)<br>OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b)<br>AMOUNT INCURRED THIS PERIOD | (c)<br>AMOUNT PAID THIS PERIOD<br>(ALSO REPORT ON E) | (d)<br>OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|--------------------------------|---|------------------------------------|--|--|
| Strumwasser & Woocher LLP<br>10940 Wilshire Blvd<br>Los Angeles CA 90024 | LEG / Legal Defense            | 0.00  | 57,093.95                          | 5,000.00   | 52,093.95  |
|  |                                |   |                                    |  |  |
|  |                                |   |                                    |  |  |
| <b>SUBTOTALS \$</b>  |                                | <b>0.00 \$</b>                                      | <b>57,093.95 \$</b>                | <b>5,000.00 \$</b>                                   | <b>52,093.95</b>                                   |

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

**Schedule F Summary**

- Total 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 \$** 57,093.95
- 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 \$** 5,000.00
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) ..... **NET \$** 52,093.95  
May be a negative number