

**Recipient Committee  
Campaign Statement  
Cover Page**

(Government Code Sections 84200 - 84216.5)

COVER PAGE

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CALIFORNIA FORM **460**

2010 FEB -1 AM 9:10

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A For Official Use Only

Statement covers period  
from 01/01/2009  
through 12/31/2009

Date of Election if applicable:  
(Month, Day, Year)  
 / /

OFFICE OF  
THE CITY CLERK  
CITY OF NEWPORT BEACH

**1. Type of Recipient Committee:**

- Officeholder, Candidate Controlled Committee
- State Candidate Election Committee
- Recall
- General Purpose Committee
- Sponsored
- Small Contributor Committee
- Political Party/Central Committee
- Ballot Measure Committee
- Primarily Formed
- Controlled
- Sponsored
- Primarily Formed Candidate Officeholder Committee

**2. Type of Statement:**

- Pre-election Statement
- Semi-annual Statement
- Termination Statement
- Amendment (Explain below)
- Quarterly Statement
- Special Odd-Year Report
- Supplemental Pre-election Statement - Attach Form 495

**3. Committee Information**

I.D. NUMBER  
1319106

COMMITTEE NAME  
Newport Beach Police Employees Association Political Action

STREET ADDRESS (NO P.O. BOX)  
1415 L Street, Suite 410

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>(916) 556-1776</u>

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE

OPTIONAL: FAX/E-MAIL ADDRESS  
( ) /

**Treasurer(s)**

NAME OF TREASURER  
Wayne Ordos

MAILING ADDRESS  
1415 L St Ste 410

CITY	STATE	ZIP CODE	AREA CODE/PHONE
<u>Sacramento</u>	<u>CA</u>	<u>95814</u>	<u>(916) 556-1776</u>

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
			<u>( )</u>

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 1/29/10  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

Executed on \_\_\_\_\_  
DATE

By Wayne Ordos  
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

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

**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OF CANDIDATE

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

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

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

COMMITTEE NAME	I.D. NUMBER
----------------	-------------

NAME OF TREASURER	CONTROLLED COMMITTEE?
-------------------	-----------------------

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?
-------------------	-----------------------

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

**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
-----------------------	---------------------

**7. Primarily Formed Candidate/Officeholder Committee**

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

Recipient Committee  
Summary Page

Statement covers period from <u>01/01/2009</u> through <u>12/31/2009</u>	<b>CALIFORNIA FORM 460</b>
Page <u>3</u> of <u>29</u>	I.D. NUMBER <u>1319106</u>

NAME OF FILER Newport Beach Police Employees Association Political Action

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... <i>Schedule A, Line 3</i>	\$ <u>10,856.56</u>	\$ <u>10,856.56</u>
2. Loans Received ..... <i>Schedule B, Line 7</i>	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... <i>Add Lines 1 + 2</i>	\$ <u>10,856.56</u>	\$ <u>10,856.56</u>
4. Nonmonetary Contributions ..... <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... <i>Add Lines 3 + 4</i>	\$ <u>10,856.56</u>	\$ <u>10,856.56</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 .... \$	<u>                    </u>	<u>                    </u>
21. Expenditures Made ..... \$	<u>                    </u>	<u>                    </u>

**Expenditures Made**

6. Cash Payments ..... <i>Schedule E, Line 4</i>	\$ <u>5,331.59</u>	\$ <u>5,331.59</u>
7. Loans Made ..... <i>Schedule H, Line 7</i>	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS ..... <i>Add Lines 6 + 7</i>	\$ <u>5,331.59</u>	\$ <u>5,331.59</u>
9. Accrued Expenses (Unpaid Bills) ..... <i>Schedule F, Line 3</i>	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment ..... <i>Schedule C, Line 3</i>	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE ..... <i>Add Lines 8 + 9 + 10</i>	\$ <u>5,331.59</u>	\$ <u>5,331.59</u>

**Expenditure Limit Summary for State  
Candidates**

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

Date of Election (mm/dd/yy)	Total to Date
<u>                    </u>	<u>                    </u>
<u>                    </u>	<u>                    </u>

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

**Current Cash Statement**

12. Beginning Cash Balance ..... <i>Previous Summary Page, Line 16</i>	\$ <u>0.00</u>
13. Cash Receipts ..... <i>Column A, Line 3 above</i>	<u>10,856.56</u>
14. Miscellaneous Increases to Cash ..... <i>Schedule I, Line 4</i>	<u>0.00</u>
15. Cash Payments ..... <i>Column A, Line 8 above</i>	<u>5,331.59</u>
16. <b>ENDING CASH BALANCE</b> ..... <i>Lines 12+13+14, less Line 15</i>	\$ <u>5,524.97</u>

*If this is a Termination Statement, Line 16 must be zero.*

17. LOAN GUARANTEES RECEIVED *Schedule B, Part 1, Column (b)* \$ 0.00

**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents .....	\$ <u>0.00</u>
19. Outstanding Debts ..... <i>Add Line 2 + Line 9 in Column C above</i>	\$ <u>0.00</u>

**Schedule A  
Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
--	------------------------

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)
07/10/2009	Voter Awareness Committee [REDACTED]	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ID# 1222121	2,231.56	2,231.56	
(I) 09/22/2009	Jennifer Allen	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Jennifer Allen (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/17/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
(I) 12/15/2009	Vladimir Anderson	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Vladimir Anderson (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				2,471.56		

**Schedule A Summary**

1. Amount received this period - itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$ <u>10,511.56</u>
2. Amount received this period - unitemized monetary contributions of less than \$100. .....	\$ <u>345.00</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>10,856.56</u></b>

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>5</u> of <u>29</u>
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
--	------------------------

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)
(I) 12/29/2009	Bradley Aubuchon	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Bradley Aubuchon (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Brandy Banks	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Brandy Banks (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	William Beverly	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	William Beverly (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>6</u> of <u>29</u>
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 11/03/2009	Jason Blakely	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Jason Blakely (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	Christopher Burns	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Christopher Burns (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	David Darling	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	David Darling (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
<b>Page</b> <u>7</u> <b>of</b> <u>29</u>	<b>I.D. NUMBER</b> 1319106

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 11/03/2009	Antonio De La Torre	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Antonio De La Torre (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Marie Depweg	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Marie Depweg (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	William Depweg	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	William Depweg (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>8</u> of <u>29</u>
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 12/15/2009	Amanda Diaz	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Amanda Diaz (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	Shawn Dugan	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Shawn Dugan (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Jeremy Dutton	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Jeremy Dutton (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**



**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
Page <u>9</u> of <u>29</u>	
I.D. NUMBER	
1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 10/20/2009	Kent Eishen	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Kent Eishen (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/17/2009	Thomas Encheff	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Thomas Encheff (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/29/2009	Gerald Faludi	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Gerald Faludi (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 11/17/2009	Julie FASTER	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Julie FASTER (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	David FATTAL	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	David FATTAL (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	Miles FISHER	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Miles FISHER (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 12/02/2009	Garrett Fitzgerald	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Garrett Fitzgerald (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/29/2009	Mark Fitzpatrick	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Mark Fitzpatrick (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/29/2009	Michael Fletcher	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Michael Fletcher (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>12</u> of <u>29</u>
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 12/29/2009	Robert Foss	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Robert Foss (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	Helen Freeman	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Helen Freeman (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Devon Garner	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Devon Garner (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>13</u> of <u>29</u>
NAME OF FILER <u>Newport Beach Police Employees Association Political Action</u>	
I.D. NUMBER <u>1319106</u>	

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)
(I) 11/03/2009	Glen Garrity	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Glen Garrity (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	Matthew Graham	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Matthew Graham (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/03/2009	Nicole Gumiran	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Nicole Gumiran (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
Page <u>14</u> of <u>29</u>	
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 10/20/2009	Andrew Halpin	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Andrew Halpin (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Brice Hardy	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Brice Hardy (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Joseph Horton	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Joseph Horton (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A (cont.)

Statement covers period from <u>01/01/2009</u> through <u>12/31/2009</u>	<b>CALIFORNIA FORM 460</b>
Page <u>15</u> of <u>29</u>	I.D. NUMBER <u>1319106</u>

NAME OF FILER <u>Newport Beach Police Employees Association Political Action</u>	I.D. NUMBER <u>1319106</u>
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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)
(I) 12/02/2009	Todd Hughes	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009		<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009		<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Todd Hughes (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/17/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	William Hume	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/29/2009		<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009		<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	William Hume (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Kirk Jacobi	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009		<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/20/2009		<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Kirk Jacobi (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

Schedule A (Continuation Sheet)  
 Monetary Contributions Received

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	<b>Page</b> <u>16</u> <b>of</b> <u>29</u>
through <u>12/31/2009</u>	

<b>NAME OF FILER</b>	<b>I.D. NUMBER</b>
Newport Beach Police Employees Association Political Action	1319106

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)
(I) 12/29/2009	Rachel Johnson	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/03/2009	Rachel Johnson (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/03/2009	Christopher Kimble	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Christopher Kimble (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/17/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/17/2009	Wendy Koudelka	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Wendy Koudelka (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		



**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

SCHEDULE A (cont.)

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u> through <u>12/31/2009</u>	
Page <u>17</u> of <u>29</u>	
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 11/03/2009	Keith Krallman	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Keith Krallman (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/17/2009	David Kresge	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	David Kresge (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	Scott Laruffa	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Scott Laruffa (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
<b>Page</b> <u>18</u> <b>of</b> <u>29</u>	<b>I.D. NUMBER</b> 1319106

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 10/06/2009	Brian Mack	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Brian Mack (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/03/2009	Dennis Maisano Jr	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Dennis Maisano Jr (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	Kathryn McGlinchey	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Kathryn McGlinchey (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/17/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

<b>SUBTOTAL \$</b>	360.00
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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
Page <u>19</u> of <u>29</u>	
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 09/22/2009	Tracy McKenzie	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Tracy McKenzie (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Thomas Monarch	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Thomas Monarch (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/20/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/20/2009	Mario Montero	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/06/2009	Mario Montero (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 12/02/2009	Bryan Moore	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Bryan Moore (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Anthony Olivas	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Anthony Olivas (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/03/2009	Jeffrey Perkins	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Jeffrey Perkins (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 11/17/2009	Ryan Peters	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Ryan Peters (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/17/2009	Jeanne Reincke	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Jeanne Reincke (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	Sam Sa	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Sam Sa (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	Page <u>22</u> of <u>29</u>
I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 10/06/2009	David Sanborn	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	David Sanborn (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Michael Schiavi	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Michael Schiavi (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 11/17/2009	Brian Schlottach	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Brian Schlottach (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 10/06/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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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)
(I) 11/17/2009	Neal Schuster	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Neal Schuster (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/02/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Jason Servin	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	Jason Servin (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 11/03/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 09/22/2009	David Stark	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	David Stark (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

<b>SUBTOTAL \$</b>	360.00
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**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 10/06/2009	Roland Stucken	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/29/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Roland Stucken (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 09/22/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/20/2009	David Syvock	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 09/22/2009	David Syvock (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/29/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/02/2009	Mary Valle	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/15/2009	Mary Valle (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		



**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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I.D. NUMBER 1319106	

NAME OF FILER Newport Beach Police Employees Association Political Action

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)
(I) 09/22/2009	John Veale	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	John Veale (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 10/20/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 10/06/2009	Todd Vinson	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Todd Vinson (continued)	<input type="checkbox"/> IND		15.00		
(I) 11/03/2009		<input type="checkbox"/> COM		15.00		
(I) 11/17/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/29/2009	Corey Wolik	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport Beach	15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Corey Wolik (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/15/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				

**SUBTOTAL \$ 360.00**

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 09/22/2009	Matthew Wood	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/29/2009	Matthew Wood (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/15/2009	Justin Yee	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 12/02/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 10/20/2009	Justin Yee (continued)	<input type="checkbox"/> IND		15.00		
(I) 10/06/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I) 12/29/2009	Anthony Yim	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 09/22/2009	[REDACTED]	<input type="checkbox"/> COM	City of Newport Beach	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> OTH		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> PTY		15.00		
(I) 10/06/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 11/17/2009	Anthony Yim (continued)	<input type="checkbox"/> IND		15.00		
(I) 12/15/2009		<input type="checkbox"/> COM		15.00		
(I) 12/02/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
<b>SUBTOTAL \$</b>				360.00		

**Schedule A (Continuation Sheet)**  
**Monetary Contributions Received**

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
through <u>12/31/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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)
(I) 10/06/2009	Troy Zeeman	<input checked="" type="checkbox"/> IND	Police Officer	15.00	120.00	
(I) 11/17/2009	[REDACTED]	<input type="checkbox"/> COM		15.00		
(I) 10/20/2009	[REDACTED]	<input type="checkbox"/> OTH	City of Newport	15.00		
(I) 11/03/2009	[REDACTED]	<input type="checkbox"/> PTY	Beach	15.00		
(I) 12/15/2009	[REDACTED]	<input type="checkbox"/> SCC		15.00		
(I) 12/02/2009	Troy Zeeman (continued)	<input type="checkbox"/> IND		15.00		
(I) 09/22/2009		<input type="checkbox"/> COM		15.00		
(I) 12/29/2009		<input type="checkbox"/> OTH		15.00		
		<input type="checkbox"/> PTY				
		<input type="checkbox"/> SCC				
(I)	Intermediary for above contribution(s): Newport Beach Police Officers Association 1415 L St Ste 410 Sacramento, CA 95814	<input type="checkbox"/> IND				
		<input type="checkbox"/> COM				
		<input checked="" 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>				120.00		

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

SCHEDULE D

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	
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NAME OF FILER Newport Beach Police Employees Association Political Action

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)
10/28/2009	OC Cops PAC	<input checked="" type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure		1,000.00	1,000.00	1,000.00 ( 09)
	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
		<input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Nonmonetary Contribution <input type="checkbox"/> Independent Expenditure				
	<input type="checkbox"/> Support <input type="checkbox"/> Oppose					
<b>SUBTOTAL \$</b>				1,000.00		

**Schedule D Summary**

- Itemized contributions and independent expenditures made this period. (Include all Schedule D subtotals.) ..... \$ 1,000.00
- Unitemized contribution and independent expenditures made this period of under \$100 ..... \$ 0.00
- Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) ..... **TOTAL \$** 1,000.00

**Schedule E  
Payments Made**

SCHEDULE E

<b>Statement covers period</b>	<b>CALIFORNIA FORM 460</b>
from <u>01/01/2009</u>	<b>Page</b> <u>29</u> <b>of</b> <u>29</u>
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NAME OF FILER Newport Beach Police Employees Association Political Action	I.D. NUMBER 1319106
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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 (explain)             |
| FND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging and meals (explain)          |
| 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 PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT		AMOUNT PAID
	CODE	DESCRIPTION OF PAYMENT	
AT&T Mobility PO Box 6463 Carol Stream, IL 60197-6463		161.59 Cell Phone 163.69 Cell Phone 161.73 Cell Phone 161.53 Cell Phone 86.87 Cell Phone	735.41
OC Cops PAC 1415 L St Ste 410 Sacramento, CA 95814 ID# 1245511	CTB		1,000.00
Wayne Ordos, Attorney at Law 1415 L St Ste 410 Sacramento, CA 95814	PRO		3,500.00

**SUBTOTAL \$ 5,235.41**

**Schedule E Summary**

1. Itemized payments made this period. (Include all Schedule E subtotals.) .....	\$ 5,235.41
2. Unitemized payments made this period of under \$100. ....	\$ 96.18
3. Total interest paid this period on outstanding loans. (Enter amount from Schedule B, Part 1, Column(e).) .....	\$ 0.00
4. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) .... <b>TOTAL</b>	<b>\$ 5,331.59</b>