

**Recipient Committee
Campaign Statement
Cover Page**

(Government Code Sections 84200-84216.5)

Type or print in ink.

COVER PAGE

Date Stamp
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OFFICE OF
THE CITY CLERK

CALIFORNIA FORM **460**

Page 1 of 32

For Official Use Only

Statement covers period
from 10/22/2006
through 12/31/2006

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 <i>(Also Complete Part 5)</i> | <input type="radio"/> Sponsored <i>(Also Complete Part 6)</i> |
| <input checked="" type="checkbox"/> General Purpose Committee | <input type="checkbox"/> Primarily Formed Candidate/Officeholder Committee <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: CITY OF NEWPORT BEACH

- | | |
|---|---|
| <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 <i>(Also file a Form 410 Termination)</i> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input checked="" type="checkbox"/> Amendment (Explain below) | |

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) 472-6154</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) 472-6154</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 08/27/2010
Date

Executed on 08/27/2010
Date

Executed on _____
Date

Executed on _____
Date

By PHIL PUHEK 
Signature of Treasurer or Assistant Treasurer

By PHIL PUHEK 
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**

| |
|--------------------------------|
| CALIFORNIA FORM 460 |
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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 to 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. 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 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>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| | 3 / 32 |
| NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

Contributions Received

| | | Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES) | Column B CALENDAR YEAR TOTAL TO DATE |
|--------------------------------------|--------------------|--|--|
| 1. Monetary Contributions | Schedule A, Line 3 | \$ 3053.80 | \$ 13878.75 |
| 2. Loans Received | Schedule B, Line 7 | 0.00 | 0.00 |
| 3. SUBTOTAL CASH CONTRIBUTIONS..... | Add Lines 1 + 2 | \$ 3053.80 | \$ 13878.75 |
| 4. Nonmonetary Contributions | Schedule C, Line 3 | 0.00 | 0.00 |
| 5. TOTAL CONTRIBUTIONS RECEIVED..... | Add Lines 3 + 4 | \$ 3053.80 | \$ 13878.75 |

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

| | 1/1 through 6/30 | 7/1 to Date |
|---------------------------|------------------|-------------|
| 20. Contribution Received | \$ 0.00 | \$ 0.00 |
| 21. Expenditures Made | \$ 0.00 | \$ 0.00 |

Expenditures Made

| | | Column A | Column B |
|--|----------------------|------------|-------------|
| 6. Payments Made | Schedule E, Line 4 | \$ 7329.99 | \$ 32662.17 |
| 7. Loans Made | Schedule H, Line 7 | 0.00 | 0.00 |
| 8. SUBTOTAL CASH PAYMENTS..... | Add Lines 6 + 7 | \$ 7329.99 | \$ 32662.17 |
| 9. Accrued Expenses (Unpaid Bills) | Schedule F, Line 3 | -4533.08 | 4533.08 |
| 10. Nonmonetary Adjustment | Schedule C, Line 3 | 0.00 | 0.00 |
| 11. TOTAL EXPENDITURES MADE..... | Add Lines 8 + 9 + 10 | \$ 2796.91 | \$ 37195.25 |

**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 | \$ 18055.10 |
| 13. Cash Receipts | Column A, Line 3 above | 3053.80 |
| 14. Miscellaneous Increases to Cash | Schedule I, Line 4 | 2.61 |
| Cash Payments | Column A, Line 8 above | 7329.99 |
| 16. ENDING CASH BALANCE..... | Add Lines 12 + 13 + 14, then subtract Line 15 | \$ 13781.52 |
| If this is a termination statement, Line 16 must be zero. | | |
| 17. LOAN GUARANTEES RECEIVED | Schedule B, Part 2 | \$ 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).

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 | \$ 4533.08 |

*Since January 1, 2001. Amounts in this section may be different from amounts reported in Column B.

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 4 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/13/2006 | Oscar Dykesten [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Alex Amat [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Rob Beuch [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jeff Bogin [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | James Boland [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

| | | |
|---|-----------------|---------|
| 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.) | \$ | 2811.90 |
| 2. Amount received this period - unitemized contributions of less than \$100 | \$ | 241.90 |
| 3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) | TOTAL \$ | 3053.80 |

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 5 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Bill Boullianne [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jeff Boyles [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Chris Brown [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Erin Brown [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Justin Carr [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 6 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Bryan Carter [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Dan Chapman [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Steve Chidley [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Brent Conklin [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Charles Dall [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 7 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Charles Duncan [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 21.90 | 122.85 | |
| Rcpt Dt: 12/31/2006 | James Edgar [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Dennis Edwards [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Chris Fanti [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jason Fernandez [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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Schedule A Monetary Contributions Received

Type or print in ink.
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SCHEDULE A

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|---|----------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
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SEE INSTRUCTIONS ON REVERSE

| | |
|---|------------------------|
| NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC | I.D. Number 1243243 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Brian Frasz [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ronald Gamble [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Pete Garcia [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Clifford Geddis [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Kelly Gorman [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 9 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Tim Guckes [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Gary Gunderson [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ron Gutierrez [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Pete Hadley [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Joe Harrison [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

**Schedule A
Monetary Contributions Received**

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 10 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Keith Hendenberg [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Terry Hoiland [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Andres Hopper [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Cameron Hutzler [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Andrew Janis [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 11 / 32 | |

SEE INSTRUCTIONS ON REVERSE

| | |
|---|------------------------|
| NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC | I.D. Number 1243243 |
|---|------------------------|

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | James Jeziorski [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Craig Johnson [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ray Kang [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Charles Keen [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Justin Kime [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|--|----------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 12 / 32 |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Todd Knipp [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ron Larson [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jerry Lazar [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jason Leftige [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Kim Lerch [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
 IND - Individual
 COM - Recipient Committee
 (other than PTY or SCC)
 OTH - Other
 PTY - Political Party
 SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 13 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Michael Liberto [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Thomas Lloy [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Nic Lucas [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ty Lunde [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Brian Mahnken [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|--|----------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 14 / 32 |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Dave Mais [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 108.00 | |
| Rcpt Dt: 12/31/2006 | Steve Martin [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Robert Masonis [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Brett McAllister [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Mathew McClarey [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|----------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 15 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Brian McDonough [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Steve McNichols [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Carlos Medina [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Ernest Miller [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Nadine Morris [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|--|----------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 16 / 32 |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Craig Morrison [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Mike Mullen [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Joel Nessa [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Adam Novak [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jude Olivas [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 17 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Armando Oseguera [REDACTED] ID. | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Grant Parsons [REDACTED] ID. | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | James Philbin [REDACTED] ID. | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Robert Pingle [REDACTED] ID. | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Chad Ponegalek [REDACTED] ID. | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 18 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Ryan Popovich [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Kevin Pryor [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Timothy Richards [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Richard Ruffini [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Bobby Salerno [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 19 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Travis Shook [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Brad Smith [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Chad Spiker [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Nick Stocks [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Jerry Strom [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|---|----------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 20 / 32 | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Brett Sutherland [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 117.45 | |
| Rcpt Dt: 12/31/2006 | Ronald Sutherland [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 125.55 | |
| Rcpt Dt: 12/31/2006 | Roman Taiieron [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Terry Teale [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | John Testa [REDACTED] ID: | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

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

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|--|--------------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 21 / 32 |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Kevin Tiscareno [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Dennis Watts [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Robert Webber [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Glenn White [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Edward Wick [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule A Monetary Contributions Received

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

SCHEDULE A

| | |
|--|----------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 22 / 32 |
| NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC | |
| I.D. Number 1243243 | |

SEE INSTRUCTIONS ON REVERSE

| DATE RECEIVED | FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CONTRIBUTOR CODE * | IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) | AMOUNT RECEIVED THIS PERIOD | CUMULATIVE TO DATE CALENDAR YEAR (JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------------------|---|---|--|-----------------------------|---|------------------------------------|
| Rcpt Dt: 12/31/2006 | Keith Winokur [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Nick Yaroma [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Mike Ybarra [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |
| Rcpt Dt: 12/31/2006 | Rick Zaccaro [REDACTED] ID: [REDACTED] | <input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC | FIRE FIGHTER Newport Beach Fire Dept | 30.00 | 135.00 | |

SUBTOTAL \$ 2811.90

Schedule A Summary

- Amount received this period - contributions of \$100 or more.
(Include all Schedule A subtotals.) \$ _____
- Amount received this period - unitemized contributions of less than \$100 \$ _____
- Total monetary contributions received this period.
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) **TOTAL \$** _____

*Contributor Codes
IND - Individual
COM - Recipient Committee
(other than PTY or SCC)
OTH - Other
PTY - Political Party
SCC - Small Contributor Committee

Schedule D

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

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

SCHEDULE D

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 23 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE | CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMMULATIVE TO DATE CALENDAR YEAR JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|--|--|------------------------------|-----------------------|---|--|
| 10/22/2006 | Michael Henn City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |
| 10/22/2006 | Leslie Daigle City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |
| 10/22/2006 | Don Webb City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |

SUBTOTAL \$

Schedule D Summary

| | |
|--|-------------------------------|
| 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.) | \$ <u>861.91</u> |
| 2. Unitemized contributions and independent expenditures made this period of under \$100 | \$ <u>0.00</u> |
| 3. Total contributions and independent expenditures made this period. (Add Lines 1 and 2. Do not enter on the Summary Page.) | TOTAL \$ <u>861.91</u> |

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

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

SCHEDULE D

| | |
|---|---|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 24 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
 NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

| DATE | CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMMULATIVE TO DATE CALENDAR YEAR JAN.1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|--|--|------------------------------|-----------------------|--|--|
| 10/22/2006 | Ed Selich City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |
| 10/22/2006 | Keith Curry City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |
| 10/22/2006 | Barbara Venezia City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 2539.47 | |

SUBTOTAL \$

Schedule D Summary

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

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

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

SCHEDULE D

| | |
|---|-------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 25 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

| | |
|---|----------------------------|
| NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC | I.D. NUMBER 1243243 |
|---|----------------------------|

| DATE | CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE | TYPE OF PAYMENT | DESCRIPTION (IF REQUIRED) | AMOUNT THIS PERIOD | CUMMULATIVE TO DATE CALENDAR YEAR JAN. 1 - DEC. 31) | PER ELECTION TO DATE (IF REQUIRED) |
|------------|--|--|------------------------------|-----------------------|---|--|
| 10/22/2006 | Nancy Gardner City Council Member City Newport Beach District No: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | <input type="checkbox"/> Monetary Contribution <input type="checkbox"/> Non-Monetary Contribution <input checked="" type="checkbox"/> Independent Expenditure | Doorhangers | 123.13 | 3381.03 | |

| | |
|--------------------|--------|
| SUBTOTAL \$ | 861.91 |
|--------------------|--------|

Schedule D Summary

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

**Schedule E
Payments Made**

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

| | |
|--|--------------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 26 / 32 |
| | I.D. NUMBER 1243243 |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

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, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|----|-----------------------------|-------------|
| Firefighters Print & Design 1780 Creekside Oaks Drive Sacramento CA 95833 ID: Ref: C1140 | IND | | | 733.00 |
| Firefighters Print & Design 1780 Creekside Oaks Drive Sacramento CA 95833 ID: Ref: C1141 | IND | | | 128.91 |
| Firefighters Print & Design 1780 Creekside Oaks Sacramento CA 95833 ID: | | | Payment On Accrued Expenses | 1122.18 |

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

SUBTOTAL \$

Schedule E Summary

| | | |
|--|-----------------|----------------|
| 1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) | \$ | <u>7329.99</u> |
| 2. Unitemized payments made this period of under \$100. | \$ | <u>0.00</u> |
| 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) | \$ | <u>0.00</u> |
| 4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) | TOTAL \$ | <u>7329.99</u> |

**Schedule E
Payments Made**

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

Statement covers period
from 10/22/2006
through 12/31/2006

SCHEDULE E

| | |
|----------------------------|------------|
| CALIFORNIA FORM | 460 |
| 27 / 32 | |
| I.D. NUMBER | |
| 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

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, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small> | CODE | OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|------|-----|-----------------------------|-------------|
| Firefighters Print & Design 1780 Creekside Oaks Sacramento, CA 95833 | ID: | | Payment On Accrued Expenses | 1382.20 |
| Firefighters Print & Design 1780 Creekside Oaks Sacramento, CA 95833 | ID: | | Payment On Accrued Expenses | 1399.71 |
| Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd. North Hollywood, CA 91602 | ID: | PRO | | 630.00 |

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

SUBTOTAL \$

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) \$ _____
2. Unitemized payments made this period of under \$100. \$ _____
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ _____
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** _____

**Schedule E
Payments Made**

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

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 28 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

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, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR | DESCRIPTION OF PAYMENT | AMOUNT PAID |
|--|-------------|-----------------------------|-------------|
| Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd. North Hollywood, CA 91602 | PRO | | 620.00 |
| Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd. North Hollywood, CA 91602 | PRO | | 685.00 |
| Statewide Information Systems 2300 K Street #200 Sacramento, CA 95816 | ID: 1264953 | Payment On Accrued Expenses | 628.99 |

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

SUBTOTAL \$ 7329.99

Schedule E Summary

1. Payments made this period of \$100 or more. (Include all Schedule E subtotals.) \$ _____
2. Unitemized payments made this period of under \$100. \$ _____
3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).) \$ _____
4. Total payments made this period. (Add lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.) **TOTAL \$** _____

SCHEDULE E**Notes**

| Form/Schedule | Reference No | TEXT |
|---------------|--------------|--|
| E | CI140 | Postcard - Michael Henn, Barbara Venezia, Leslie Daigle, Ed Selich, Don Webb, Keith Curry, Nancy Gardner |
| E | CI141 | Postcard - Michael Henn, Barbara Venezia, Leslie Daigle, Ed Selich, Don Webb, Keith Curry, Nancy Gardner |

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

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

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 30 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

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, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Firefighters Print & Design 1780 Creekside Oaks Drive ID: Sacramento CA 95833 | IND Postcard | 1122.18 | 0.00 | 1122.18 | 0.00 |
| Firefighters Print & Design 1780 Creekside Oaks Drive ID: Sacramento CA 95833 | IND Postcard | 1399.71 | 0.00 | 1399.71 | 0.00 |
| Statewide Informations Systems 2309 K St., Suite 200 ID: Sacramento CA 95816 | IND Walk List | 628.99 | 0.00 | 628.99 | 0.00 |

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

SUBTOTALS \$ _____ **\$** _____ **\$** _____ **\$** _____

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 \$** 0.00
- 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 \$** 4533.08
- Net change this period. (**Subtract** Line 2 from Line 1. Enter the difference here and on the Summary Page, Column A, Line 9.) **NET \$** -4533.08
May be a negative number.

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

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

| | |
|---|--------------------------------|
| Statement covers period from <u>10/22/2006</u> | CALIFORNIA FORM 460 |
| through <u>12/31/2006</u> | |
| 31 / 32 | |
| I.D. NUMBER 1243243 | |

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC

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, email) |

| NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) | CODE OR DESCRIPTION OF PAYMENT | (a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD | (b) AMOUNT INCURRED THIS PERIOD | (c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E) | (d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD |
|--|-----------------------------------|---|---------------------------------------|---|--|
| Firefighters Print & Design 1780 Creekside Oaks Drive Sacramento CA 95833 ID: | IND Postcard | 1382.20 | 0.00 | 1382.20 | 0.00 |

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

SUBTOTALS \$ 4533.08 \$ 0.00 \$ 4533.08 \$ 0.00

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

**Schedule I
Miscellaneous Increases to Cash**

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

SCHEDULE I

| | |
|--|--------------------------------|
| Statement covers period from <u>10/22/2006</u> through <u>12/31/2006</u> | CALIFORNIA FORM 460 |
| | 32 / 32 |

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 |
|------------------------|---|------------------------|----------------------------|
| Rcpt Dt: 12/31/2006 | Newport Beach City Employees F.C.U. 425 Old Newport Blvd., Suite A Newport Beach CA 92663 | Interest Income | 2.61 |

Attach additional information on appropriately labeled continuation sheets.

SUBTOTAL \$ 2.61

Schedule I Summary

| | |
|---|-----------------------------|
| 1. Increases to cash of \$100 or more this period..... | \$ <u>2.61</u> |
| 2. Unitemized increases to cash under \$100 this period. | \$ <u>0.00</u> |
| 3. Total of all interest received this period on loans made to others. (Schedule H, Column (e).)..... | \$ <u>0.00</u> |
| 4. Total miscellaneous increases to cash this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Line 14.) | TOTAL \$ <u>2.61</u> |