C	decipient Committee sampaign Statement sover Page overnment Code Sections 84200-84216.5)					Date Stamp		LIFORNIA 460
	E INSTRUCTIONS ON REVERSE		from	10/23/2016 10/23/2016 1gh12/31/2016	Date of election if applicable: (Month, Day, Year)	297 Juli 31	/ / Page	of 16 Official Use Only
1.	Type of Recipient Committee: Al Officeholder, Candidate Controlled Com State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee		Primarily Committe Contr Spon (Also Compl	Formed Ballot Measure ee colled ssored ete Part 6) Formed Candidate/ der Committee	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	·	Quarterly Sta Special Odd- Supplementa Statement - A	Year Report
3.	COMMITTEE NAME (OR CANDIDATE'S NAME IF Newport Beach Police Employees A STREET ADDRESS (NO P.O. BOX) 1121 L Street Suite 200			6	Treasurer(s) NAME OF TREASURER Wayne Ordos MAILING ADDRESS 1121 L Street, Suite 2	STATE	ZIP CODE	AREA CODE/PHONE
	Sacramento MAILING ADDRESS (IF DIFFERENT) NO. AND S	CA STREET OR F	P CODE 95814 P.O. BOX	AREA CODE/PHONE (916) 556-1776 AREA CODE/PHONE	NAME OF ASSISTANT TREASUR MAILING ADDRESS CITY		95814 ZIP CODE	(916)556-1776 AREA CODE/PHONE
	OPTIONAL: FAX / E-MAIL ADDRESS (916)556-1233 / ordoslaw@jps.net				OPTIONAL: FAX / E-MAIL ADDRE			THE TOP ET TOP
	Verification I have used all reasonable diligence in prepar under penalty of perjury under the laws of the Executed on	ing and revie	ewing this stat fornia that the	By	an Ol	reasurer onent or Responsible Officer of St te Measure Proponent		and complete. I certify
					organica e di community officerioliger, carididate. Sta	le ivieasure Proponent		

Recipient Committee Campaign Statement Cover Page — Part 2

COVER PAGE - PART 2								
	ORNIA ORM	4	60					
Page _	2 (of _	16					

5. Officeholder or Candidate Controlled C	ommittee	6.	Primarily Formed Ballo	ot Measure	Committee		
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE				
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND	DISTRICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICT	ION	,] SUPPORT] OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP		Identify the controlling offi	ceholder, ca	ındidate, or state	measure	proponent, if any.
			NAME OF OFFICEHOLDER, CAN	DIDATE, OR PI	ROPONENT		
Related Committees Not Included in the not included in this statement that are controlled be contributions or make expenditures on behalf of you	V VOU or are primarily formed to receive		OFFICE SOUGHT OR HELD		DIS	STRICT NO. I	IF ANY
COMMITTEE NAME	I.D. NUMBER						
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO	CONTROLLED COMMITTEE?	7.	Primarily Formed Cance officeholder(s) or candidate(s)	for which the	ceholder Comr is committee is prid	marily form	st names of ed.
	P.O. BOX)		MANUE OF OFFICEROLDER OR C	ANDIDATE	OFFICE SOUGHT	OK HELD	SUPPORT OPPOSE
CITY STATE	ZIP CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C.	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
NAME OF TREASURER COMMITTEE ADDRESS STREET ADDRESS (NO	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	ANDIDATE	OFFICE SOUGHT	OR HELD	SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO	P.O. BOX)						
CITY STATE	ZIP CODE AREA CODE/PHONE		Attac	h continuatio	on sheets if nece	essary	

Campaign Disclosure Statement Summary Page

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Amounts may be rounded to whole dollars.

SUMMARY PAGE

Newport Beach Police Employees Association Political Action 1319106 Column A **Contributions Received** Column B **Calendar Year Summary for Candidates** TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE General Elections 21,690.00 2. Loans Received Schedule B. Line 3 1/1 through 6/30 7/1 to Date 0.00 0.00 SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ 4,125.00 20. Contributions 21,690.00 Received Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3+4 \$ ______ 4,125.00 \$ ______ 21,690.00 Made **Expenditures Made Expenditure Limit Summary for State** Candidates 7. Loans Made Schedule H, Line 3 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ ______3,000.00 22. Cumulative Expenditures Made* 76,399.98 (If Subject to Voluntary Expenditure Limit) 0.00 0.00 Date of Election Total to Date 10. Nonmonetary Adjustment Schedule C, Line 3 (mm/dd/yy) 0.00 0.00 **Current Cash Statement** 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ _____5,809.21 To calculate Column B, add 13. Cash Receipts Column A, Line 3 above 4,125.00 amounts in Column A to the corresponding amounts 14. Miscellaneous Increases to Cash Schedule I, Line 4 *Amounts in this section may be different from amounts from Column B of your last reported in Column B. 15. Cash Payments Column A, Line 8 above report. Some amounts in 3,000.00 Column A may be negative 16. **ENDING CASH BALANCE** Add Lines 12 + 13 + 14, then subtract Line 15 \$ ______ 6, 934.21 figures that should be subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ _____ for this calendar year, only carry over the amounts Cash Equivalents and Outstanding Debts from Lines 2, 7, and 9 (if any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$

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

Schedule A Monetary Contributions Received			nts may be rounded whole dollars.	Statement cov	•	CALIFORNIA 460		
SEE INSTRUCTION	ONS ON REVERSE			through	2016	Page4_	of16	
	ch 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 I CALENDAR YE (JAN. 1 - DEC.	DATE PE	ER ELECTION TO DATE F REQUIRED)	
11/07/2016 12/30/2016	Vladimir Anderson	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	90.00		
11/07/2016 12/30/2016	Brandy Banks	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police O 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	90.00		
11/07/2016 12/30/2016	Jason Blakely	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police O 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	90.00		
11/07/2016 12/30/2016	David Darling	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police O 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	0.00		
11/07/2016 12/30/2016	Marie Depweg	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police O 870 Santa Barbara Dr Newport Beach, CA 925	mediary: fficers Association	0.00		
<u> </u>			SUBTOTAL	375.00				
1. Amount red (Include all 2. Amount red	A Summary ceived this period – itemized monetary contributions. Schedule A subtotals.) ceived this period – unitemized monetary contributions tary contributions received this period.			4,125.00	IND – In COM – I OTH – PTY – F	outor Codes adividual Recipient Comi (other than PT Other (e.g., bu Political Party	Y or SCC) usiness entity)	
(Add Lines	1 and 2. Enter here and on the Summary Page, Colur	nn A, Line 1.)	TOTAL \$	4,125.00	500-8	Small Contribut	or Committee	

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

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from10/23	/2016	FOR	IM -	tOU
NAME OF FILER				through 12/31	/2016	Page	5 of	16
	h Police Employees Association Political Action					I.D. NUMBI	ER	-
	- Political Action	T		1		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 I CALENDAR YE (JAN. 1 - DEC.	AR	PER ELEC TO DA' (IF REQU	TE
11/07/2016 12/30/2016	Thu Do	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 920	mediary: officers Associatio	0.00		
11/07/2016 12/30/2016	Anne Donnelly	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	rmediary: officers Associatio	0.00		
11/07/2016 12/30/2016	Shawn Duqan	☑IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	mediary: officers Association	0.00	1.4 h	
11/07/2016 12/30/2016	Jeremy Dutton		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: Officers Association	0.00		
11/07/2016 12/30/2016	Thomas Encheff	⊠IND ☐COM ☐OTH ☐PTY ☐SCC		75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	0.00		
			SUBTOTAL\$	375.00				

Amounts may be rounded

to whole dollars.

*Contributor Codes

IND - Individual

COM – Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

FORM

Statement covers period

from.

10/23/2016

				through12/31	/2016	Page	6 of <u>16</u>
NAME OF FILER						I.D. NUME	3ER
Newport Beacl	h Police Employees Association Political Action					1319106	ŝ
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 I CALENDAR YE (JAN. 1 - DEC.	AR	PER ELECTION TO DATE (IF REQUIRED)
11/07/2016 12/30/2016	David Fattal	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 920	mediary: officers Associatio	0.00	
11/07/2016 12/30/2016	Devon Fitzgerald		Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 920	mediary: officers Associatio	0.00	
11/07/2016 12/30/2016	Garrett Fitzgerald		Police Officer City of Newport Beach	75.00 Received through intensity Newport Beach Police (870 Santa Barbara Dr. Newport Beach, CA 926	mediary: Officers Association	0.00	
11/07/2016 12/30/2016	Michael Fletcher	□COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: nfficers Association	D.00	
11/07/2016 12/30/2016	Matthew Graham		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	n	
			SUBTOTAL\$	375.00			

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Amounts may be rounded to whole dollars.

Statement covers period from 10/23/2016

CALIFORNIA FORM
FORM

Page 7 of 16

Page _____7 of ____16 NAME OF FILER I.D. NUMBER Newport Beach Police Employees Association Political Action 1319106 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER AMOUNT **CUMULATIVE TO DATE** DATE PER ELECTION CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) OCCUPATION AND EMPLOYER RECEIVED THIS RECEIVED CALENDAR YEAR TO DATE CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 11/07/2016 William Hanson Police Officer XIND 75.00 390.00 12/30/2016 City of Newport Beach ПСОМ Received through intermediary: Newport Beach Police officers Association □OTH **□** PTY 870 Santa Barbara Dr Newport Beach, CA 92660-SCC 11/07/2016 Brice Hardy Police Officer XIND 75.00 390.00 12/30/2016 City of Newport Beach □СОМ ПОТН Received through intermediary: Newport Beach Police Officers Association □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□ SCC 11/07/2016 Richard Henry Police Officer X IND 75.00 390.00 12/30/2016 City of Newport Beach □ COM Received through intermediary: Newport Beach Police Officers Association ПОТН □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□ SCC 11/07/2016 Joseph Horton Police Officer 75.00 XIND 390.00 12/30/2016 City of Newport Beach ПСОМ Received through intermediary: Newport Beach Police Officers Association □ OTH □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□scc 11/07/2016 Robert Hufford Police Officer XIND 75.00 390.00 12/30/2016 City of Newport Beach ПСОМ Received through intermediary: □ OTH Newport Beach Police Officers Association PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□scc

SUBTOTAL \$

375.00

*Contributor Codes

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OTH – Other (e.g., business entity)

PTY - Political Party

NAME OF FILER						. uge	01
						I.D. NUN	MBER
Newport Beach	h Police Employees Association Political Action						
		T			,	131910	16
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
11/07/2016	William Hume	XIND	Police Officer	75.00	3'	90.00	
12/30/2016		□COM □OTH □PTY □SCC	City of Newport Beach	Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 92	rmediary: Officers Associati		
11/07/2016 12/30/2016	Jason Hurd-Servin	XIND	Police Officer	75.00	39	90.00	
11/07/2016		□COM □OTH □PTY □SCC	City of Newport Beach	Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 92	rmediary: Officers Associati		
12/30/2016	Christopher Kimble	[25] 10	Police Officer	75.00	39	0.00	
		□COM □OTH □PTY □SCC	City of Newport Beach	Received through inte Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 924	fficers Associati	on	
11/07/2016 12/30/2016	Richard Knight	MIND	Police Officer City of Newport Beach	75.00	39	0.00	
11/07/2016	Wendy Koudelka	OTH PTY		Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	fficers Association	on	
12/30/2016	menay Rougerka	E IND	Police Officer City of Newport Beach	75.00	39	0.00	
		□COM □OTH □PTY □SCC		Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926		on	
			SUBTOTAL \$	375.00			

*Contributor Codes

IND - Individual

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PTY - Political Party

Amounts may be rounded to whole dollars.

Statement covers period from 10/23/2016

through 12/31/2016

CALIFORNIA 460

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I.D. NUMBER

NAME OF FILER						
						I.D. NUMBER
Newport Beac	h 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 I CALENDAR YE. (JAN. 1 - DEC. :	EAR TO DATE
12/30/2016	David Kresqe	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Associatio	90.00 on
11/07/2016 12/30/2016	Jennifer Kresge	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police © 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Associatio	00.00 on
11/07/2016 12/30/2016	Scott Laruffa		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	0.00 on
11/07/2016 12/30/2016 11/07/2016	Troy Long Brian Mack	□OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through intern Newport Beach Police of 870 Santa Barbara Dr Newport Beach, CA 9266	mediary: fficers Association	0.00 on
12/30/2016	BIIAN MACK		Police Officer City of Newport Beach	75.00 Received through interm Newport Beach Police of 870 Santa Barbara Dr Newport Beach, CA 9266	mediary: fficers Association	0.00 on

SUBTOTAL\$

375.00

*Contributor Codes

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SCHEDULE A (CONT.) Amounts may be rounded Statement covers period to whole dollars.

from 10/23/2016	FORM 460
through12/31/2016	Page10of16
	I.D. NUMBER

Newport Beach Police Employees Association Political Action

1319106 FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR IF AN INDIVIDUAL, ENTER AMOUNT DATE CUMULATIVE TO DATE PER ELECTION CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) RECEIVED OCCUPATION AND EMPLOYER RECEIVED THIS CALENDAR YEAR TO DATE CODE * (IF SELF-EMPLOYED, ENTER NAME PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OF BUSINESS) 11/07/2016 Dennis Maisano Police Officer X IND 75.00 390.00 12/30/2016 City of Newport Beach □ COM Received through intermediary: Newport Beach Police Officers Association OTH □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-SCC 11/07/2016 Jennifer Manzella Police Officer XIND 75.00 390.00 12/30/2016 City of Newport Beach □ COM Received through intermediary: Newport Beach Police Officers Association Потн □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□scc 11/07/2016 Kyle Markwald Police Officer X IND 75.00 390.00 12/30/2016 City of Newport Beach ПСОМ Received through intermediary: Newport Beach Police officers Association ∏отн □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-SCC 11/07/2016 Kjersti Martini Police Officer X IND 75.00 390.00 12/30/2016 City of Newport Beach ☐COM Received through intermediary: □OTH Newport Beach Police Officers Association □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□scc 11/07/2016 Brian McDowell Police Officer 75.00 X IND 390.00 12/30/2016 City of Newport Beach COM Received through intermediary: OTH Newport Beach Police Officers Association □ PTY 870 Santa Barbara Dr Newport Beach, CA 92660-□scc

SUBTOTAL \$

375.00

*Contributor Codes

IND - Individual

NAME OF FILER

COM - Recipient Committee (other than PTY or SCC)

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SCHEDULE A (CONT.) Amounts may be rounded Statement covers period CALIFORNIA to whole dollars. **FORM** 10/23/2016 from.

through	12/31/2016	Page	11	_ of	16

I.D. NUMBER

Newport Beac	Police Employees Association Political Action				=	1319106	6
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO D CALENDAR YEA (JAN. 1 - DEC. 3	R.	PER ELECTION TO DATE (IF REQUIRED)
11/07/2016 12/30/2016	Siavash Mesri	XIND COM OTH PTY	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	mediary: officers Association	0.00	
11/07/2016 12/30/2016	John Miller	⊠IND ☐ COM ☐ OTH ☐ PTY ☐ SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	mediary: Officers Association	.00	
11/07/2016	Thomas Monarch	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926			
12/30/2016	Jorge Negrete	COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	fficers Association		
12/30/2016	Anthony Olivas		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926			

SUBTOTAL\$

375.00

□ PTY SCC

*Contributor Codes	

IND - Individual

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Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA

Statement covers period

				from10/23	/2016	FORM	400
				through 12/31	/2016	Page12	of <u>16</u>
NAME OF FILER						I.D. NUMBER	
Newport Beac	h 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 D CALENDAR YEA (JAN. 1 - DEC. 3	AR	R ELECTION TO DATE REQUIRED)
11/07/2016 12/30/2016	Jeffrey Perkins	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 920	mediary: Officers Association	0.00	
11/07/2016 12/30/2016	Christopher Pulliam	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through intensemble Beach Police (870 Santa Barbara Dr. Newport Beach, CA 920	mediary: Officers Association	0.00	
11/07/2016	Chris Rieff		Police Officer City of Newport Beach	75.00 Received through intense Newport Beach Police (870 Santa Barbara Dr. Newport Beach, CA 926	mediary: fficers Association	0.00	
12/30/2016	Bernadette Rosselit		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	.00	
11/07/2016 12/30/2016	Sam Sa		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 0 870 Santa Barbara Dr Newport Beach, CA 926	mediary: fficers Association	.00	
			SUBTOTALS	375.00			

*Contributor Codes

IND - Individual

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OTH – Other (e.g., business entity)

PTY - Political Party

Amounts may be rounded to whole dollars.	Statement covers period	CALIFORNIA AGO			
	from10/23/2016	FORM 460			
	through12/31/2016	Page 13 of 16			
		I.D. NUMBER			

						.D. NUMBER
Newport Beac	h 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 DA CALENDAR YEA (JAN. 1 - DEC. 3	R TO DATE
11/07/2016 12/30/2016	Paul Sarris	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 92	rmediary: officers Association	.00
11/07/2016 12/30/2016	Brian Schlottach	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 92	mediary: officers Association	
11/07/2016 12/30/2016	David Spenser	☑IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 920	mediary: officers Association	
11/07/2016 12/30/2016	Roland Stucken	COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	fficers Association	.00
11/07/2016	John Veale		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police of 870 Santa Barbara Dr Newport Beach, CA 926	mediary: Officers Association	.00
			SUBTOTALS	375.00		

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

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

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SCHEDULE A (CONT.)

monetary contributions Received		to whole		Statement confrom 10/23	vers period	CALIFORNIA 460		D
NAME OF FILER				through 12/31	/2016	Page	14 of 16	•
Newport Beach	h 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 CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
11/07/2016 12/30/2016	Todd Vinson	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 970 Santa Barbara Dr Newport Beach, CA 92	rmediary: Officers Associati	90.00 on		
11/07/2016 12/30/2016	Matthew Wood	⊠IND □COM □OTH □PTY □SCC	Police Officer City of Newport Beach	75.00 Received through inte Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 92	rmediary: Officers Associati	90.00		_
11/07/2016 12/30/2016	Anthony Yim	IND COM OTH PTY SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police 870 Santa Barbara Dr Newport Beach, CA 926	mediary: officers Association	00.00		
11/07/2016 12/30/2016	John Yim		Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police (870 Santa Barbara Dr Newport Beach, CA 926	mediary: Officers Associatio	0.00		
11/07/2016 12/30/2016	Troy Zeeman	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Police Officer City of Newport Beach	75.00 Received through inter Newport Beach Police C 870 Santa Barbara Dr Newport Beach, CA 926	mediary: Officers Associatio	0.00		
			SUBTOTAL \$	375.00				

Amounts may be rounded

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

Schedule E				Statement				SCHEDULE		
Payments Made Amo		Amounts may be rounded to whole dollars.			Statement covers period from10/23/2016				ORNIA 460	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER					through	12/31/2	016	Page	15 of 16	
					- 3	***		I.D. NUN	MBER	
Newport Beach Police Employees Association Political Ac	ction							131910	06	
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member coi MTG meetings ai OFC office expe PET petition circ PHO phone bank POL polling and POS postage, de	mmunication nd appearar nses ulating s s survey rese	s oces	e s	RAD rad RFD retu SAL can TEL t.v. TRC can TRS stai TSF tran VOT vote	io airtime and urned contribunpaign worke or cable airtin didate travel, f/spouse trave	production of tions s' salaries ne and produ lodging, and el, lodging, a committees	uction costs meals and meals of the san	ne candidate/sponso	
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCR	IPTION OF	PAYMENT			AMOUNT PAID	
Wayne Ordos, Attorney at Law 1121 L Street, Suite 200 Sacramento, CA 95814-		PRO		1,1					500.0	
P.M. Restaurants/Consulting Inc. 333 South Hope St. 8th Floor Los Angeles, CA 90071		CNS							1,000.00	
Wayne Ordos, Attorney at Law 1121 L Street, Suite 200 Sacramento, CA 95814-		PRO							500.00	
* Payments that are contributions or independent expenditures m	nust also be summ	arized on	Schedule D.				SUB	TOTAL\$	2,000.00	
Schedule E Summary										
Itemized payments made this period. (Include all Schedule I	E subtotals.)							Φ.	2 000 00	
2. Unitemized payments made this period of under \$100			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	••••••	••••••	•••••		\$	3,000.00	
3. Total interest paid this period on loans. (Enter amount from 9	Schedule P. Do-	1 Caluman			••••••			\$	0.00	
3. Total interest paid this period on loans. (Enter amount from	ochedule b, Part	i, Column	(e).)	• • • • • • • • • • • • • • • • • • • •	•••••••	• • • • • • • • • • • • • • • • • • • •		\$	0.00	

Schedule E

SCHEDULE E (CONT.)

(Continuation Sheet) Payments Made	Amounts may b to whole do				CALIF(
SEE INSTRUCTIONS ON REVERSE NAME OF FILER		····		thro	ough 12/31/2016	Page _	
						I.D. NUME	BER
Newport Beach Police Employees Association Political						131910	16
CODES: If one of the following codes accurately descent campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	imunication d appearar ises lating survey rese livery and r	s aces	RAD RFD SAL TEL TRC TRS TSF VOT	radio airtime and production returned contributions campaign workers' salarie t.v. or cable airtime and pro- candidate travel, lodging, a	on costs s oduction cost nd meals l, and meals es of the sar	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PAYMENT		AMOUNT PAID
P.M. Restaurants/Consulting Inc. 333 South Hope St. 8th Floor Los Angeles, CA 90071		CNS					1,000.00
Payments that are contributions or independent expenditures mus	f also he summarized on S	Schodula D					
		onedule D			SU	JBTOTAL \$	1,000.00