Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5)	Type or print in	n ink.	Date Stamp		CALIFORNIA FORM 460		
	Statement covers period from 1010112006	Date of election if applicable; (Month, Day, Year)	31 AM 8:2	7 Page	For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through <u>10/21/2006</u>	[+-]	FFICE OF				
1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4. Officeholder, Candidate Controlled Committee State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee Political Party/Central Committee 1.D. NUMBER 1.243243 Committee Information I.D. NUMBER 1.243243 COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC		Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Ter Amendment (Explain be <u>SCHEXULE A - ST</u> Treasurer(s) NAME OF TREASURER PHILIP PUHEK MAILING ADDRESS	low)	Gupplementa Statement - /	atement -Year Report al Preelection Attach Form 495		
STREET ADDRESS (NO P.O. BOX) c/o Miller, Kaplan, Arase & Co., LLP 4123 Lank	ODE AREA CODE/PHONE	P.O. BOX 1695 CITY NEWPORT BEACH NAME OF ASSISTANT TREASURE	STATE CA ER, IF ANY	zip code 92659	area code/phone (949) 472-6154		
North Hollywood CA 9160 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. T P.O. BOX 1695		MAILING ADDRESS					
CITY STATE ZIP CONTROL STATE ZIPAC STATE ZIP CONTROL STATE ZIP CONTROL STATE ZIPAC STATE Z		CITY	STATE	ZIP CODE	AREA CODE/PHONE		
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDRE	SS				

4. Verification

1

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	By	
Executed on	By	
Executed on	BySignature of Controlling Officeholder, Candidate, State Measure Proponent	
Executed on	BySignature of Controlling Officeholder, Candidate, State Measure Proponent	FPPC Form 460 (January

FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772) State of California

Recipient Committee Campaign Statement Cover Page – Part 2

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COVER PAGE - PART 2



5. Officeholder or Candidate Controlled Committee

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD	(INCLUDE LOCATION AND I	DISTRIC	T NUMBER II	F APPLICABLE)
RESIDENTIAL/BUSINESS AD	DDRESS (NO. AND STREET)) CI	ΤY	STATE	ZIP
Related Committees not included in this stateme contributions or to make ex	nt that are controlled by you	u or are	primarily for	List any comr med to receive	nittees
COMMITTEE NAME			I.D.NUMBE	R	-
NAME OF TREASURER					EE?
COMMITTEE ADDRESS	STREET ADDRESS (NC) P.O.BO	X)		
CITY	STATE	ZIP Ç	ODE	AREA CODE	/PHONE
COMMITTEE NAME		<u>.</u>	I.D.NUMBEI	२	
NAME OF TREASURER					E?
COMMITTEE ADDRESS	STREET ADDRESS (NO	P.O.BO	X)		
CITY	STATE	ZIP C	DDE	AREA CODE	PHONE

6. Ballot Measure Committee

NAME OF BALLOT MEASURE

				n an an Arran ann an Arran an Arran an Arrainn an Arrainn an Arrainn an Arrainn an Arrainn an Arrainn an Arrai Arrainn an Arrainn an Ar	
BALLOT NO. OR LETTER	JURISDICTI	NC] SUPPORT] OPPOSE	
Identify the controlling of	ficeholder, can	didate, or state	e measure pro	ponent, if any.	
NAME OF OFFICEHOLDER, C.	ANDIDATE, OR P	ROPONENT			
OFFICE SOUGHT OR HELD			DISTRICT NO, I	FANY	
Primarily Formed which this committee is prima	Committe	C List names	of officeholder(s) or candidate(s) for	
NAME OF OFFICEHOLDER OR CANDIDATE		OFFICE SOU	OFFICE SOUGHT OR HELD		
		OFFICE SOUC			
NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUC	GHT OR HELD		
NAME OF OFFICEHOLDER OF	R CANDIDATE	OFFICE SOUC	GHT OR HELD		
		· · · · · · · · · · · · · · · · · · ·			

Attach continuation sheets if necessary

Campaign Disclosure Statement Summary Page	Type or print in ink. Amounts may be rounde to whole dollars.		atement covers period	CALIFORNIA 460		
			10/01/2006	FORM TOU		
SEE INSTRUCTIONS ON REVERSE		throug	h 10/21/2006	3 / 32		
NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC			······································	I.D. NUMBER		
Contributions Received	Column A Total this period (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE	Running in Bo	1243243 Summary for Candidates oth the State Primary and		
1. Monetary Contributions Schedule A, Line 3	\$518.65	\$10824	.95 General Electi	ons		
2. Loans Received Schedule B, Line 7	0.00	-		1/1 through 6/30 7/1 to Date		
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ <u>518,65</u>		20 Contribution	0.00 \$ 0.00		
4. Nonmonetary Contributions Schedule C, Line 3	0.00	0	.00	0.00 \$ 0.00		
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	518.65	\$10824	.95 21. Expenditures Made \$	0.00 \$0.00		
Expenditures Made			Expenditure I	imit Summary for State		
6. Payments Made Schedule E, Line 4	\$3649.00	\$25332				
7. Loans Made Schedule H, Line 7	0.00	0	<u>.00</u> 22. Cum	ulative Expenditures Made*		
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$3649.00	\$ <u>25332</u>	/// 0	ct to Voluntary Expenditure Limit)		
9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3	-381.01	4533	.08 Date of Electi	on Total to Date		
10. Nonmonetary Adjustment Schedule C, Line 3	0.00	0	,00 (mm/dd/yy)			
11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10	\$3267.99	\$29865	.26			
Current Cash Statement				\$		
12. Beginning Cash Balance Previous Summary Page, Line 16	\$21185.45	To calculate Column B, a				
3. Cash Receipts Column A, Line 3 above	518.65	amounts in Column A to corresponding amounts		\$ is a set of the set		
14. Miscellaneous Increases to CashSchedule I, Line 4	0.00	from Column B of your la report. Some amounts in		¢		
Cash Payments Column A, Line 8 above	3649.00	Column A may be negative		Ψ		
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$18055.10	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	\$0.00	for this calendar year, onl carry over the amounts	у	\$		
Cash Equivalents and Outstanding Debts		from Lines 2, 7, and 9 (if	*Since Innue d			
18. Cash Equivalents See instructions on reverse	\$0.00	any).	different from amou	2001. Amounts in this section may be unts reported in Column B.		
19. Outstanding Debts Add Line 2 + Line 9 in Column B above						
		l				

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FPPC Form 460 (June/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

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Schedule A Monetary Contributions Received				Statement covers period from		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through_16/21.	12006		4/32
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Nu 1243	
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 T CALENDAR Y (JAN. 1 - DEC	O DATE EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Alex Amat		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Rob Beuch		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Jeff Boain		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	James Boland	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Bill Boullianne טו:	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL S	\$			
(Include all S	eived this period - contributions of \$100 or more. Schedule A subtotals.)			468.65	INC		
3. Total moneta	eived this period - unitemized contributions of less ary contributions received this period. I and 2. Enter here and on the Summary Page, C				PT	H- Other Y - Politica C- Small (

Schedule A Monetary Contributions Received		Amou	pe or print in ink. nts may be rounded o whole dollars.	Statement co	ent covers period CALIFO		
				from 10/01/		Concerning and the second states	ORNIA 460
SEE INSTRUCTIO	DNS ON REVERSE			through_10/21	12006		5 / 32
NAME OF FILER NEWPORT BI	EACH FIREFIGHTERS ASSOCIATION PAC			L		I.D. Nu	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Jeff Bovles		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Chris Brown		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Erin Brown		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Justin Carr		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Bryan Carter		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL	\$			
 Amount rec (Include all Amount rec Total monet 	A Summary reived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less tary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	s than \$100	\$		INE CO OT PT	(other H- Other Y - Politica	ual ient Committee r than PTY or SCC) r
,						FPPC	Form 460 (JUNE/01)

	Schedule A Monetary Contributions Received		be or print in ink. nts may be rounded o whole dollars.	Statement covers period from		CALIFORNIA FORM 460	
SEE INSTRUCTIO	NS ON REVERSE			through 16/2/	12006	-	6 / 32
NAME OF FILER NEWPORT BE	EACH FIREFIGHTERS ASSOCIATION PAC			-		I.D. Ni 1243	umber 3243
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 T CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Dan Chapman		FIRE FIGHTER Newport Beach Fire Dept	5.00	1(05.00	
Rcpt Dt: 10/21/2006	Steve Chidlev		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Brent Conklin		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Charles Dall		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	05.00	
Rcpt Dt: 10/21/2006	Charles Duncan	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	3.65	10	00.95	
			SUBTOTAL	\$			
1. Amount rece (Include all 2. Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.)						dual pient Committee er than PTY or SCC)
3. Total monet (Add Lines	ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	olumn A, Line 1.)	TOTAL \$				Contributor Committee

Schedule Monetary	A Contributions Received	Amou	be or print in ink. nts may be rounded o whole dollars.	Statement co	12004	A CONTRACTOR OF	SCHEDULE FORNIA 460
SEE INSTRUCTIO	NS ON REVERSE			through	1/2006	•	7/32
NAME OF FILER NEWPORT BE	EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Nu 12432	
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 T CALENDAR (JAN. 1 - DEC	YEAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Oscar Dykesten		FIRE FIGHTER Newport Beach Fire Dept	5.00	1	05.00	
Rcpt Dt: 10/21/2006	James Edgar	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Dennis Edwards		FIRE FIGHTER Newport Beach Fire Dept	5.00	1(05.00	9
Rcpt Dt: 10/21/2006	Chris Fanti		FIRE FIGHTER Newport Beach Fire Dept	5.00	1(05.00	
Rcpt Dt: 10/21/2006	Jason Fernandez ID:	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	1(05.00	
			SUBTOTAL S	\$			an a
I. Amount rece (Include all 3 2. Amount rece 3. Total moneta	A Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	s than \$100	\$		IN CC O PT	(othe ſH- Other ſY - Politica	lual bient Committee r than PTY or SCC)
				· · · · · · · · · · · · · · · · · · ·		FPPC	Eorm 460 (ILINE/01)

Schedule A Monetary Contributions Received		Amou	e or print in ink. nts may be rounded o whole dollars.		12006	CALIFOR FORM	
SEE INSTRUCTIO	NS ON REVERSE			through 10/2	1/2006	8/	32
NAME OF FILER NEWPORT BE	EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Numbe 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 CALENDAR YE (JAN. 1 - DEC. (AR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Brian Frasz טו:		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Ronald Gamble	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Pete Garcia	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	James Garvev		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	.00	
Rcpt Dt: 10/21/2006	Clifford Geddis		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	.00	
			SUBTOTAL	\$			
1. Amount rec (Include all 2. Amount rec	A Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less tary contributions received this period.					I- Other ′ - Political Pa	t Committee an PTY or SCC)
(Add Lines	1 and 2. Enter here and on the Summary Page, 0	Column A, Line 1.)	TOTAL \$				orm 460 (.IUNF/01)

Schedule A		Type or print in ink.					SCHEDULE A		
Monetary Contributions Received		from		Statement cov	1/2006	CALIFORNIA FORM 460			
SEE INSTRUCTIO	NS ON REVERSE			through_10/2	1/2006	5	9 / 32		
NAME OF FILER NEWPORT BE	EACH FIREFIGHTERS ASSOCIATION PAC			. L		I.D. Nur 12432			
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 T CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
Rcpt Dt: 10/21/2006	Kelly Gorman	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	105.00			
Rcpt Dt: 10/21/2006	Tim Guckes	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00				
Rcpt Dt: 10/21/2006	Garv Gunderson	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00				
Rcpt Dt: 10/21/2006	Ron Gutierrez		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00			
Rcpt Dt: 10/21/2006	Pete Hadlev	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00			
			SUBTOTAL	\$					
1. Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.)		\$		IN				
3. Total monet	eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C			r.	PT	H- Other Y - Politica			
						FPPC	Form 460 (JUNE/01)		

Schedule A Monetary Contributions Received		Amou	pe or print in ink. nts may be rounded o whole dollars.	Statement covers period from /0/0//2005		CALIFORNIA 460	
	DNS ON REVERSE			through_10/2	1/2004		10 / 32 (1 statistic)
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Nu 12432	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Joe Harrison		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Keith Hendenbera	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Terry Hoiland		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Andres Hopper		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Cameron Hutzler		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL	\$			
(Include all 2. Amount rece 3. Total monet	A Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	s than \$100	\$		INE CO OT PT	(othei H- Other Y - Politica	ual ient Committee r than PTY or SCC)
						FPPC	Form 460 (JUNE/01)

Schedule Monetary	chedule A Ionetary Contributions Received		be or print in ink. nts may be rounded o whole dollars.	Statement covers period from <u>10/01/2004</u> through <u>10/21/2006</u>		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through	112006		11/32
NAME OF FILER	ACH FIREFIGHTERS ASSOCIATION PAC					1.D. Nur 12432	
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 T CALENDAR Y (JAN. 1 - DEC	O DATE 'EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Andrew Janis		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	James Jeziorski		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Craig Johnson		FIRE FIGHTER	5.00	105.00		
Rcpt Dt: 10/21/2006	Ray Kang		FIRE FIGHTER	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Charles Keen	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL	\$			
Include all (2. Amount rece 3. Total moneta	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	s than \$100	\$		*Cd INI CC OT PT	ontributor C D - Individu DM - Recipi (other H- Other Y - Political	Codes ual ent Committee than PTY or SCC)

	chedule A onetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		2006	CALIFORNIA 460		
	NS ON REVERSE			through 10/21	12006	12 / 32		
IAME OF FILER	ACH 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 D CALENDAR YEAR (JAN. 1 - DEC. 31	R I TO DATE		
Rcpt Dt: 10/21/2006	Justin Kime		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Todd Knipp	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Ron Larson		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Jerry Lazar		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Jason Leftice	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
			SUBTOTAL	\$				
Amount rece (Include all : Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period.				IND - COM OTH-	ributor Codes Individual - Recipient Committee (other than PTY or SCC) Other Political Party		

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Schedule / /lonetary /	Contributions Received	Amou	be or print in ink. nts may be rounded b whole dollars.	Statement covers period from <u>10/01/2004</u>		CALIFORNIA 460
	NS ON REVERSE			through16/21	12004	13 / 32
IAME OF FILER	ACH FIREFIGHTERS ASSOCIATION PAC	1974 - Commence and Anna and A				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 D. CALENDAR YEAR (JAN. 1 - DEC, 31	R TO DATE
Rcpt Dt: 10/21/2006	Kim Lerch	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00
Rcpt Dt: 10/21/2006	Michael Liberto		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00
Rcpt Dt: 10/21/2006	Thomas Llov		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00
Rcpt Dt: 10/21/2006	Nic Lucas	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00
Rcpt Dt: 10/21/2006	Ty Lunde		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	0
			SUBTOTAL	5		
Amount rece (Include all S Amount rece Total moneta	Summary vived this period - contributions of \$100 or more. Schedule A subtotals.) vived this period - unitemized contributions of less ary contributions received this period. and 2. Enter here and on the Summary Page, C	s than \$100	\$		IND - COM - OTH- PTY -	ibutor Codes Individual Recipient Committee (other than PTY or SCC) Other Political Party Small Contributor Committee

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		12006	CALIFORNIA 460		
INS ON REVERSE			through_10/21	12006		14 / 32	
EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Nui 12432		
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	CALENDAR Y	EAR	PER ELECTION TO DATE (IF REQUIRED)	
Norman Maggard	X IND COM OTH PTY SCC	FIRE FIGHTER	5.00	105.00			
Brian Mahnken	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Steve Martin	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	• • • • • • • • • • • • • • • • • • •	
Robert Masonis	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		
Brett McAllister	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00		
		SUBTOTAL	\$				
eived this period - unitemized contributions of less				*Co IND CO OTH PTY	ntributor () - Individ M - Recip (other H- Other Y - Politica	Codes ual ient Committee r than PTY or SCC) Il Party	
	Contributions Received NS ON REVERSE EACH FIREFIGHTERS ASSOCIATION PAC FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) Norman Maggard D: Steve Martin D: Robert Masonis D: Brett McAllister Brett McAllister Event this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period.	Amount NS ON REVERSE EACH FIREFIGHTERS ASSOCIATION PAC FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CONTRIBUTOR CODE* Norman Maggard IND COM D: SCC Brian Mahnken IND COM U: SCC Brian Mahnken IND COM D: SCC Steve Martin IND COM D: SCC Robert Masonis COM COM OTH PTY D: SCC Brett McAillister IND COM OTH PTY D: SCC Steve d his period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less than \$100	Amounts may be rounded to whole dollars. NS ON REVERSE EACH FIREFIGHTERS ASSOCIATION PAC FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF SELF SUM OF END	Amounts may be rounded to whole dollars. Statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of the statement control Image: Solution of t	Amounts may be rounded to whole dollars. Statement covers period from///////////////////////////////	Amounts may be rounded to whole dollars. Statement covers period from	

Schedule Monetary	A Contributions Received	Amour	e or print in ink. nts may be rounded whole dollars.	Statement cov from0/01	L CA	CALIFORNIA 460		
SEE INSTRUCTIO	INS ON REVERSE			through 10/2	1/2006	15 / 32		
NAME OF FILER NEWPORT BE	EACH FIREFIGHTERS ASSOCIATION PAC	**************************************				Number 13243		
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: 10/21/2006	Mathew McClarey	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Brian McDonough		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Steve McNichols	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Carlos Medina	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Ernest Miller	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
			SUBTOTAL	\$				
I. Amount rec (Include all 2. Amount rec 3. Total monet	A Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less tary contributions received this period.	s than \$100	\$		*Contribut IND - Ind COM - Re (o' OTH- Oth PTY - Poli	or Codes Ividual scipient Committee ther than PTY or SCC) er		
(Add Lines	1 and 2. Enter here and on the Summary Page, C	Column A, Line 1.)	TOTAL \$			PC Form 460 (JUNE/01)		

Schedule / /lonetary (Contributions Received	Amou	e or print in ink. nts may be rounded o whole dollars.	Statement covers period from		CALIFORNIA 460		
	NS ON REVERSE			through	1/2006	16 / 32		
NAME OF FILER NEWPORT BE	ACH FIREFIGHTERS ASSOCIATION PAC					.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 DA CALENDAR YEAF (JAN. 1 - DEC. 31)	R TO DATE		
Rcpt Dt: 10/21/2006	Nadine Morris		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Craig Morrison		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Mike Mullen		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Joel Nessa		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
Rcpt Dt: 10/21/2006	Adam Novak ID:		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.0	00		
			SUBTOTAL	\$				
Amount rece (Include all : Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period.				IND - COM - OTH-	ibutor Codes Individual - Recipient Committee (other than PTY or SCC) Other Political Party		

Schedule Monetary	A Contributions Received	Amou	be or print in ink. nts may be rounded b whole dollars.	Statement covers period from		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through	1/2006		17 / 32
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC			••••••••••••••••••••••••••••••••••••••		I.D. Nu 12432	
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 CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF'REQUIRED)
Rcpt Dt: 10/21/2006	Jude Olivas		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Ropt Dt: 10/21/2006	Armando Oseguera	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Grant Parsons		FIRE FIGHTER	5.00	10	5.00	
Rcpt Dt: 10/21/2006	James Philbin ID:		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Robert Pingle ID:		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL S	\$			
. Amount rece (Include all . Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period.				INE CO OT PT	(other H- Other Y - Politica	ual ient Committee r than PTY or SCC) al Party
(Add Lines	1 and 2. Enter here and on the Summary Page, C	Column A, Line 1.)	TOTAL \$				Contributor Committee

Schedule Monetary	Schedule A Monetary Contributions Received		pe or print in ink. nts may be rounded o whole dollars.	Statement covers period from		CALIFORNIA FORM 460		
SEE INSTRUCTIO	INS ON REVERSE			through	1/2006	18 / 32		
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC					1.D. Nu 1243		
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 CALENDAR Y (JAN. 1 - DEC	D DATE EAR	PER ELECTION TO DATE (IF REQUIRED)	
Rcpt Dt: 10/21/2006	Chad Ponegalek		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Rvan Popovich	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00				
Rcpt Dt: 10/21/2006	Kevin Pryor	IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		
Rcpt Dt: 10/21/2006	Timothy Richards		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		
Rcpt Dt: 10/21/2006	Richard Ruffini		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		
			SUBTOTAL	5				
1. Amount rece (Include all 2. Amount rece 3. Total monet	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	s than \$100	\$		INE CO OT PT	(othe H - Other Y - Politica	lual pient Committee r than PTY or SCC)	
			Ψ	· · · · ·		FPPC	Form 460 (JUNE/01)	

Schedule A Ionetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from 10/01/206L		CALIFORNIA 460	
	NS ON REVERSE			through 10/2	1/2006	19 / 32	
IAME OF FILER NEWPORT BE	ACH FIREFIGHTERS ASSOCIATION PAC	***		J		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 CALENDAR YE (JAN. 1 - DEC.)	DATE PER ELECTION	
Rcpt Dt: 10/21/2006	Bobby Salerno		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Travis Shook ID:	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Brad Smith		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Ropt Dt: 10/21/2006	Chad Spiker		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Nick Stocks		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
			SUBTOTAL	5			
Amount rece (Include all \$ Amount rece	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period.					ntributor Codes - Individual M - Recipient Committee (other than PTY or SCC) I- Other - Political Party C- Small Contributor Committe	

lonetary	Contributions Received	Amounts may be rounded to whole dollars.		Statement covers period from/0/01/2004		CALIFORNIA 46	
EE INSTRUCTIO	NS ON REVERSE			through 161	121/2006	20	0 / 32
NAME OF FILER	ACH FIREFIGHTERS ASSOCIATION PAC		· ·	•		I.D. Num 124324	•
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 CALENDAR YE (JAN. 1 - DEC. (AR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Jerry Strom		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Roman Taileron		FIRE FIGHTER Newport Beach Fire Dept	5.00	105	5.00	
Rcpt Dt: 10/21/2006	Terry Teale	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	.00	
Rcpt Dt: 10/21/2006	John Testa	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	.00	
Rcpt Dt: 10/21/2006	Richard Thomas	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	105	.00	
			SUBTOTAL S	5			
Amount rece (Include all :	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less				IND		

Schedule A Monetary Contributions Received		Type or print in ink. Amounts may be rounded to whole dollars.		Statement covers period from/0/01/2 006		CALIFORNIA 460	
SEE INSTRUCTIO	NS ON REVERSE			through_10/21/.	2006		21 / 32
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC					I.D. Nur 12432	
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 CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
Rcpt Dt: 10/21/2006	Kevin Tiscareno		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00		
Rcpt Dt: 10/21/2006	Dennis Watts	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00			
Rcpt Dt: 10/21/2006	Robert Webber		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Glenn White	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
Rcpt Dt: 10/21/2006	Edward Wick	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00	
			SUBTOTAL S	5			
Include all (2. Amount rece 3. Total moneta	Summary eived this period - contributions of \$100 or more. Schedule A subtotals.) eived this period - unitemized contributions of less ary contributions received this period. 1 and 2. Enter here and on the Summary Page, C	than \$100	\$		*Co IND CO OTH PTY	ontributor C) - Individu M - Recipi (other H- Other Y - Political C- Small C	odes ¹ al ent Committee than PTY or SCC)

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FPPC Form 460 (JUNE/01) FPPC Toll-Free Helpline: 866/ASK-FPPC

Monetary SEE INSTRUCTION	Schedule A Monetary Contributions Received		etary Contributions Received Amounts may be rounded to whole dollars.		Statement cov from_/0/0//20 through16/21	vers period 605 1/2006	CALIFORNIA 460 FORM 22 / 32	
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC		1	,	· · · · · · · · · · · · · · · · · · ·	I.D. Nu 1243		
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 CALENDAR Y (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
Rcpt Dt: 10/21/2006	Keith Winokur		FIRE FIGHTER Newport Beach Fire Dept	5.00	105.00			
Rcpt Dt: 10/21/2006	Nick Yaroma		FIRE FIGHTER Newport Beach Fire Dept	5.00				
Rcpt Dt: 10/21/2006	Mike Ybarra	X IND COM OTH PTY SCC	FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		
Rcpt Dt: 10/21/2006	Rick Zaccaro		FIRE FIGHTER Newport Beach Fire Dept	5.00	10	5.00		

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	SUBTOTAL \$	468.65	
Schedule A Summary 1. Amount received this period - contributions of \$100 or more. (Include all Schedule A subtotals.)	\$		*Contributor Codes IND - Individual COM - Recipient Committee
 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.) 	\$		(other than PTY or SCC) OTH- Other PTY - Political Party SCC- Small Contributor Committee

Supporting/Opposing Other Candidates, Measures and Committees Amount may be rounded to whole dollars. Imom	Supporti	y of Expenditures ng/Opposing Other æs, Measures and Committees	Type or print in Amounts may be r to whole dolla	Statement co		CALIFORNIA FORM 460		
NEWPORT BEACH FIREFIgHTERS ASSOCIATION PAC 1242243 DATE MEASURE AND OFFICE. MEASURE AND JURISDICTION. OR COMMITTEE TYPE OF PAYMENT DESCRIPTION (IF REQUIRED) AMOUNT THIS PERIOD CUMULUT YOR TO DATE JURISDICTION. OR COMMITTEE PER ELECTION TO DATE UP REQUIRED) AMOUNT THIS CUMULUT TO DATE JURISDICTION. OR COMMITTEE PER ELECTION TO DATE UP REQUIRED) AMOUNT THIS CUMULUT TO DATE JURISDICTION. OR COMMITTEE TYPE OF PAYMENT DESCRIPTION (IF REQUIRED) AMOUNT THIS CUMULUT TO DATE JURISDICTION. OR COMMITTEE TO DATE UP REQUIRED) COMMIT HIS JURISDICTION. OR COMMITTEE CUMULUT TO DATE JURISDICTION. OR COMMITTEE TO DATE JURISDICTION. OR COMMITTEE PER LECTION TO DATE JURISDICTION. OR COMMITTEE TO DATE JURISDICTION. OR COMMITTEE PER LECTION TO DATE JURISDICTION. OR COMMITTEE SOULDON SOULDON SOULDON SOULDON SOULDON SOULDON SOULDON S					through 16/2	21/2004		23 / 32
MALE MEASURE AND JURISDICTION, OR COMMITTEE IPPE OF PAYMENT (IF REQUIRED) Mercion CALENDAR YEAR IT OD DATE 10/06/2006 Keith Curry City Council Member City Newport Beach Impendent District No: Impendent Expenditure 500.00 500.00 500.00 10/06/2006 Michael Henn City Council Member City Newport Beach District No: Impendent Expenditure 500.00 500.00 10/06/2006 Michael Henn City Council Member City Newport Beach Impendent Expenditure S00.00 500.00 10/06/2006 Michael Henn City Council Member City Newport Beach Impendent Expenditure S00.00 500.00 10/06/2006 Michael Henn City Council Member City Newport Beach Impendent Expenditure S00.00 500.00 10/06/2006 Michael Henn City Council Member City Newport Beach Impendent Expenditure S00.00 500.00 10/06/2006 Nan, Support Oppose Impendent Expenditure S00.00 S00.00 10/06/2006 Support Oppose Support Oppose Support So0.00 10/06/2006 Support Oppose Support Oppose Support Support 10/06/2006 City Council Member City Council Member Impendent Expenditure Support Suport Support								•
City Council Member City Council Member S00.00 S00.00 City Newport Beach District No: Independent S00.00 S00.00 10/06/2006 Michael Henn Oppose Contribution S00.00 S00.00 10/06/2006 Michael Henn District No: Independent Expenditure S00.00 10/06/2006 Support Oppose Contribution S00.00 S00.00 10/06/2006 Marcy Gardner Mon-Monetary S00.00 S00.00 S00.00 10/06/2006 Support Oppose Mon-Monetary S00.00 S00.00 S00.00 10/06/2006 Support Oppose Monetary S00.00 S00.00 S00.00 City Council Member District No: Monetary S00.00 S00.00 S00.00 City Council Member	DATE		TYPE OF PAYMENT			CALENDAR	/EAR	TO DATE
10/06/2006 Michael Henn City Council Member City Newport Beach Image: Monetary Contribution 500.00 500.00 10/06/2006 District No: Independent Expenditure Image: Monetary Contribution 500.00 500.00 10/06/2006 Nancy Gardner City Council Member City Newport Beach Image: Monetary Contribution 500.00 500.00 10/06/2006 Nancy Gardner City Council Member City Newport Beach Image: Monetary Contribution 500.00 500.00 Image: District No: Image: Monetary Contribution Image: Monetary Contribution 500.00 500.00 Image: District No: Image: Monetary Contribution Image: Monetary Contribution 500.00 500.00 Image: District No: Image: Monetary Contribution Image: Monetary Contribution 500.00 500.00 Image: District No: Image: Monetary Contribution Image: Monetary Contribution Support Oppose Image: District No: Image: District No: Image: District No: Image: District No: Image: District No: Image: District No: Image: District No: Image: Dis	10/06/2006	City Council Member City Newport Beach District No:	Non-Monetary Contribution		500.00		500.00	
City Council Member City Newport Beach Image: Contribution District No: Image: Support Su	10/06/2006	Michael Henn City Council Member City Newport Beach District No:	Non-Monetary Contribution		500.00		500.00	
Schedule D Summary 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)	10/06/2006	City Council Member City Newport Beach District No:	Non-Monetary Contribution		500.00		500.00	
 Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)				SUBTOTAL	\$	e a sur a		
2. Unitemized contributions and independent expenditures made this period of under \$100		•						
								0.00

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Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees			Amounts may be to whole do	in ink. e rounded illars.	Statement co		CALIFORNIA FORM 460	
					from	12006		
	EACH FIREFIGHTERS ASSOCI			*****		· · · ·	I.D. NUN	MBER
			·				12432	243
DATE	CANDIDATE A MEASURE AND JURISDIG		TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMMULATIVE CALENDAR Y JAN.1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
0/06/2006	Leslie Daigle City Council Member		Contribution		500.00	·	500.00	•
	City Newport Beach		Non-Monetary Contribution					
	 ⊠ Support	District No:	Expenditure					
0/09/2006	Don Webb City Council Member City		Monetary Contribution	Precinct Walking - Map	s 50.58	3	257,90	•
	Newport Beach		Non-Monetary Contribution					
	X Support	District No:	Independent Expenditure					
0/09/2006	Michael Henn City Council Member		Monetary Contribution	Precinct Walking - Map	s 50.57	3	257.90	
	City Newport Beach		□ Non-Monetary Contribution					
	🔀 Support	District No:	Expenditure					
				SUBTOTAL \$;			
a ha dula	D. S							
	D Summary ons and independent expendit	tures made this period o	f \$100 or more. (Inclu	ide all Schedule D subt	otals.)		\$	
	d contributions and independe							

Supporti	y of Expenditures ng/Opposing Other tes, Measures and Committees	Type or print Amounts may b to whole do	Statement co from 10/01 through 10/2			ornia RM 460	
	ONS ON REVERSE			through	1/2006		25 / 32
NAME OF FILER	EACH FIREFIGHTERS ASSOCIATION PAC					1.D. NUI	
DATE	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMMULATIVE CALENDAR Y JAN.1 - DEC.	'EAR	PER ELECTION TO DATE (IF REQUIRED)
10/09/2006	Nancy Gardner City Council Member City Newport Beach District No:	Monetary Contribution	Precinct Walking - Map	s 50.57	3	257.90	
10/09/2006	Ed Selich City Council Member City Newport Beach District No:	Monetary Contribution	Precinct Walking - Map	s 50.57	3	257.90	
10/09/2006	Barbara Venezia City Council Member City Newport Beach District No:	Monetary Contribution	Precinct Walking - Map	s 50.57	2	416.34	
			SUBTOTAL \$;		<u>_</u>	
1. Contributi	D Summary ons and independent expenditures made this period o						
	ed contributions and independent expenditures made t						
	ributions and independent expenditures made this pe						

Summary of Expenditures Supporting/Opposing Other Candidates, Measures and Committees		Type or prin Amounts may b to whole do		12006	CALIFORNIA FORM 460		
	ONS ON REVERSE			through	1/2004	26 / 32	
	EACH FIREFIGHTERS ASSOCIATION PAC	·				I.D. NU 1243	· · · · · · · · · · · · · · · · · · ·
DATE	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	TYPE OF PAYMENT	DESCRIPTION (IF REQUIRED)	AMOUNT THIS PERIOD	CUMMULATIVE CALENDAR Y JAN.1 - DEC.	TO DATE 'EAR	PER ELECTION TO DATE (IF REQUIRED)
10/09/2006	Leslie Daigle City Council Member City	Contribution	Precinct Walking - Map	s 50.57	3	257.90	
	Newport Beach District No: Support District No:	Non-Monetary Contribution					
10/09/2006	Keith Curry City Council Member City Newport Beach District No:	Monetary Contribution	Precinct Walking - Map	s 50.57	3	257.90	
	· · · · · · · · · · · · · · · · · · ·						
			SUBTOTAL \$	2354.00			

2. Unitemized contributions and independent expenditures made this period of under \$100	\$

Schedule E Payments Made	Amoun	e or print in ink. Its may be rounded whole dollars. through <u>10/21/2008</u>			CALIFO FOR	
NAME OF FILER	······				I.D. NUMB	ER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC						
					1243243	3]
CODES: If one of the following codes accurately describes	the payment, you n	nay enter tl	ne code. Otherwise	, describe the payment.		
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	OFC office expen PET petition circu PHO phone bank POL polling and s POS postage, dei	id appearanc ises ulating s survey resear livery and me	es	RAD radio airtime and product RFD returned contributions SAL campaign workers' salari TEL t.v. or cable airtime and p TRC candidate travel, lodging TRS staff/spouse travel, lodgin TSF transfer between commit VOT voter registration WEB information technology ca	es production co , and meals ng, and meals tees of the sa	s ime candidate/sponsor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR DES	CRIPTION OF PAYMENT		AMOUNT PAID
Keith Curry For Newport Beach City Council 40 Vienna	ID: 1282508	СТВ				500.00
Newport Beach CA 92660						
Taylor Enterprises, Inc. 7305 Onate Ct., NE	ID: Ref: CI110	IND				354.00
Albuquerque NM 87109				·		
Firefighters Print & Design 1780 Creekside Oaks	ID:		Payment On Accrue	ed Expenses		1010.00
Sacramento, CA 95833						
* Payments that are contributions or independent expenditures must	also be summarized o	on Schedule	D.	SUE	BTOTAL \$	
Schedule E Summary						
1. Payments made this period of \$100 or more. (Include all \$	Schedule E subtotal	ls.)			\$	3649.00
2. Unitemized payments made this period of under \$100.		•				0.00
3. Total interest paid this period on loans. (Enter amount from						0.00
4. Total payments made this period. (Add lines 1, 2, and 3.						3649.00

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Schedule E Payments Made	Type or print in ink.Statement covers periodAmounts may be rounded to whole dollars.from/0/0//2008				008 F	SCHEDULE E FORNIA 460 ORM
SEE INSTRUCTIONS ON REVERSE				through	8008	28/32
					I.D. N	JMBER
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC					1243	243
CODES: If one of the following codes accurately describes t	he payment, you r	nay enter the cod	le. Otherwise	, describe the payment	•	
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	OFC office exper PET petition circ PHO phone bank POL polling and POS postage, de	nd appearances nses ulating	er services ounting)	RFD returned contri SAL campaign work TEL t.v. or cable air TRC candidate trave TRS staff/spouse trave	ters' salaries time and productior el, lodging, and mea avel, lodging, and m en committees of th on	lls eals e same candidate/sponsor
NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE OR	DES	CRIPTION OF PAYMENT		AMOUNT PAID
Leslie Daigle 2201 Vista Huerta	ID: 1277702	СТВ				500.00
Newport Beach, CA 92660						
Michael Henn 1004 W. Ocean Front	ID: 1284475	СТВ				500.00
Newport Beach, CA 92661	·····		-			
Miller, Kaplan, Arase & Co., LLP 4123 Lankershim Blvd.	ID:	PRO				285.00
North Hollywood. CA 91602			·····	· · · · · · · · · · · · · · · · · · ·		
* 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 S	chedule E subtota	lls.)			\$	
2. Unitemized payments made this period of under \$100.						
3. Total interest paid this period on loans. (Enter amount from						
4. Total payments made this period. (Add lines 1, 2, and 3. E						
		are continuary ray		, Line 0.)	IUIAL\$_	

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Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period from <u>/0/0//2008</u>	CALIFORNIA FORM 460
	through	29/32
		I.D. NUMBER
		1243243
	Amounts may be rounded	Amounts may be rounded to whole dollars. from <u>10/01/2008</u>

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

CMP campaign paraphernalia/misc CNS campaign consultants CTB contribution (explain nonmone CVC civic donations FIL candidate filing/ballot fees FND fundraising events IND independent expenditure supp LEG legal defense LIT campaign literature and mailir	etary)* porting/opposing others (explain)*	OFC PET PHO POL POS	meetings ar office exper petition circl phone bank polling and postage, de professional	id appearai ises ulating s survey rese livery and r	nces	RFD return SAL campa TEL t.v. or TRC candid TRS staff/s TSF transfe VOT voter r	airtime and production costs ed contributions aign workers' salaries cable airtime and production costs date travel, lodging, and meals pouse travel, lodging, and meals er between committees of the sam registration lation technology costs (internet, e	ne candidate/sponsor
	ADDRESS OF PAYEE OR CREDITOR IMITTEE, ALSO ENTER I.D. NUMBER)			CODE	OR	DESCRIPTION OF PAYM		AMOUNT PAID
Nancy Gardner 323 Jasmine		ID:	1286413	СТВ				500.00
Corona del Mar. C	A 92625							

* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTAL \$	3649.00
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	ТЕХТ	
E	CI110	Precinct Walking - Maps - Michael Henn, Nancy Gardner, Ed Selich, Barb- ara Venezia, Leslie Daigle, Keith Curry and Don Webb	
			· · ·
	L	I	

	Type or print in ink. Amounts may be rounded to whole dollars,		SCHEDULE F				
Schedule F Accrued Expenses (Unpaid Bills)			Statement covers period from /0/01/2008		CALIFORNIA 460		
SEE INSTRUCTIONS ON REVERSE			through	12008	31 / 32	2	
NAME OF FILER	<u></u>	W [*]			I.D. NUMBER		
NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC						1243243	
CODES: If one of the following codes accurately describes	the payment, you may ent	er the code. Otherwi	ise, describe the payr		<u> </u>		
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 communicati MTG meetings and appears OFC office expenses PET petition circulating PHO phone banks POL polling and survey res POS postage, delivery and PRO professional services PRT print ads	 RAD radio airtime and production costs RFD returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production costs TRC candidate travel, lodging, and meals TRS staff/spouse travel, lodging, and meals TSF transfer between committees of the same candidate/sponse VOT voter registration 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	BALAN	(d) STANDING CE AT CLOSE HIS PERIOD	
ID: Firefighters Print & Design 1780 Creekside Oaks Drive	IND Postcard	1382.20	0.00	(0.00	1382.20	
Sacramento CA 95833 ID: Firefighters Print & Design 1780 Creekside Oaks Drive	IND Door Hangers	1010.00	0.00	. 1010).00	0.00	
Sacramento CA 95833							
ID: Firefighters Print & Design 1780 Creekside Oaks Drive	IND Postcard	1399.71	0.00	(0.00	1399.71	
Sacramento CA 95833							
* Payments that are contributions or independent expenditures must also summarized on Schedule D.	be SUBTOTALS	\$	\$\$		\$		
Schedule F Summary			an a an air an				
1. Total accrued expenses incurred this period. (Include all Se accrued expenses of \$100 or more, plus total unitemized a	ccrued expenses under \$1	00.)	INCUI		S \$	628.99	
 Total accrued expenses paid this period. (Include all Sched accrued expenses of \$100 or more, plus total unitemized p 	dule F, Column (c) subtotal ayments on accrued exper	s for payments on nses under \$100.)			S \$	1010.00	
3. Net change this period. (Subtract Line 2 from Line 1. Enter on the Summary Page, Column A, Line 9.)	er the difference here and						
				NE	May be a nega	<u>-381.01</u> ative number,	

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Schedule F	Tupo ex print in i	1-1-			SCHEDULE F		
Accrued Expenses (Unpaid Bills)	Type or print in ink. Amounts may be rounded to whole dollars.		Statement cove from		IFORNIA 460		
SEE INSTRUCTIONS ON REVERSE			through	1/2008	32 / 32		
NAME OF FILER NEWPORT BEACH FIREFIGHTERS ASSOCIATION PAC				I.D. N	UMBER		
	1243	1243243					
CODES: If one of the following codes accurately describes			ise, describe the pay	ment.			
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	MBRmember communicationsRADradio airtime and productMTGmeetings and appearancesRFDreturned contributionsOFCoffice expensesSALcampaign workers' salition circulatingTELt.v. or cable airtime andPHOphone banksTECcandidate travel, lodginPOLpolling and survey researchTRSstaff/spouse travel, lodPOSpostage, delivery and messenger servicesTSFtransfer between communicationPROprofessional services (legal, accounting)VOTvoter registrationPRTprint adsWEBinformation technology				ries production costs g, and meals jing, and meals ittees of the same candidate/sponsor		
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		
ID: Firefighters Print & Design 1780 Creekside Oaks Drive	IND Postcard	1122.18	0.00	0.00	1122.18		
Sacramento CA 95833							
ID: Statewide Informations Systems 2309 K St., Suite 200	IND Walk List	0.00	628.99	0.00	628.99		
Sacramento CA 95816							
* Payments that are contributions or independent expenditures must also b							
summarized on Schedule D.	e SUBTOTALS	\$ 4914.09 \$	628.99 \$	1010.00	\$ 4533.08		
 Schedule F Summary Total accrued expenses incurred this period. (Include all Scaccrued expenses of \$100 or more, plus total unitemized accrued expenses paid this period. (Include all Sched accrued expenses of \$100 or more, plus total unitemized parts). Net change this period. (Subtract Line 2 from Line 1. Entered parts) 	ccrued expenses under \$10 ule F, Column (c) subtotals ayments on accrued expen	00.) s for payments on ses under \$100.)					
on the Summary Page, Column A, Line 9.)				NET \$	fay be a negative number.		
					PC Form 460 (June/01)		

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FPPC Form 460 (June/U1) FPPC Toll-Free Heinline: 866/ASK-FPPC