Recipient Committee Campaign Statement Cover Page (Government Code Sections 84200-84216.5) Type or print in ink.			Date Stamp RECEIVED	CALIFORNIA 460
	Statement covers period 9/25/2022 from	Date of election if applicable: (Month, Day, Year)	OCT 2 6 2022	Page1 of l_6
SEE INSTRUCTIONS ON REVERSE	through10/22/2022	11/8/2022	City Clerk's Office City of Laguna Beach, C	A
 State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee 	implete Parts 1, 2, 3, and 4. imarily Formed Ballot Measure committee Controlled Sponsored Complete Part 6) imarily Formed Candidate/ ficeholder Committee Complete Part 7)	2. Type of Statement: Preelection Statement Semi-annual Statement Termination Statement (Also file a Form 410 Te	Spermination)	uarterly Statement pecial Odd-Year Report upplemental Preelection atement - Attach Form 495
	NUMBER 121491	Treasurer(s) NAME OF TREASURER Eugene H. Felder Jr. MAILING ADDRESS CITY		CODE AREA CODE/PHONE
CITY STATE ZIP COD Laguna Beach CA 92651 MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX CITY STATE ZIP CODE OPTIONAL: FAX / E-MAIL ADDRESS	x	Laguna Beach NAME OF ASSISTANT TREASUR Merrill Anderson MAILING ADDRESS CITY Laguna Beach OPTIONAL: FAX / E-MAIL ADDRI	STATE ZIP CA 926	CODE AREA CODE/PHONE
Verification I have used all reasonable diligence in preparing and reviewing the under penalty of perjury under the laws of the State of California to the Executed on	BySignature of Contra	viedge the information contained here Signature of Treasurer of Assistant To olling Officeholder, Candidate, State Measure Prop	reasurer onent or Responsible Officer of Sponso	
Executed on	By	ignature of Controlling Officeholder, Candidate, Sta		

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	FORN	IA /	A	a
F	DRM		7.4	₩.
Page _	2	_ of _	ماا	

. Officeholder or Candidate Controlled Committee			Primarily Formed Ballo	t Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE	·····		
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTR	ICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTION	NC	SUPPORT
						OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling offic	ceholder, car	ndidate, or state measu	re proponent, if any.
			NAME OF OFFICEHOLDER, CAND	DIDATE, OR PR	OPONENT	
Related Committees Not Included in this St not included in this statement that are controlled by you contributions or make expenditures on behalf of your ca	Or are primarily formed to receive		OFFICE SOUGHT OR HELD	····	DISTRICT N	IO. IF ANY
COMMITTEE NAME	I.D. NUMBER		P4444			
			•			
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Candi	idate/Offic	eholder Committee	List names of
2.23	YES NO		officeholder(s) or candidate(s)	for which this	s committee is primarily for	ormed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	•		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
CITY STATE ZIP	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HEL	
	100 M. C.					SUPPORT OPPOSE
COMMITTEE NAME	I.D. NUMBER		NAME OF OFFICE VOLUME			
NAME OF TREADURE			NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HEL	D SUPPORT OPPOSE
NAME OF TREASURER	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR CA	NDIDATE	OFFICE SOUGHT OR HEL	D CURROR
COMMITTEE ADDRESS STREET ADDRESS (NO P.O. E	OX)					SUPPORT OPPOSE
CITY STATE ZIP (CODE AREA CODE/PHONE		Attach	continuatio	n sheets if necessary	

Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE NAME OF FILER Laguna Residents First 1421491 Column A **Calendar Year Summary for Candidates** Column B Contributions Received TOTAL THIS PERIOD CALENDAR YEAR Running in Both the State Primary and (FROMATTACHED SCHEDULES) TOTAL TO DATE **General Elections** 56.535.73 15,834.11 1. Monetary Contributions Schedule A, Line 3 \$ 1/1 through 6/30 7/1 to Date 15,834,11 56.535.73 20. Contributions 3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2 \$ Received 4,357,41 1,106.64 4. Nonmonetary Contributions Schedule C, Line 3 21. Expenditures 16.940.75 60,893.14 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made Schedule E, Line 4 \$ 58.931.93 21,326.00 Candidates 7. Loans Made Schedule H. Line 3 22. Cumulative Expenditures Made* 21,326,00 58.931.93 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Date of Election Total to Date 4,357.41 1,106.64 (mm/dd/yy) 22.432.64 63.289.34 **Current Cash Statement** 10.382.91 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ ___ To calculate Column B, add 15,834.11 amounts in Column A to the 13. Cash Receipts Column A. Line 3 above corresponding amounts *Amounts in this section may be different from amounts 14. Miscellaneous Increases to Cash Schedule I. Line 4 from Column B of your last reported in Column B. 21,326.00 report. Some amounts in 15. Cash Payments Column A, Line 8 above Column A may be negative 4.891.02 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 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 for this calendar year, only 17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ carry over the amounts from Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts any). 19. Outstanding Debts Add Line 2 + Line 9 in Column B above \$ FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule A **Monetary Contributions Received**

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

SCHEDULE A Statement covers period CALIFORNIA / CO

				from9/25	5/2022	FORM HOU
	DNS ON REVERSE			through10/	22/2022	Page 4 of 16
NAME OF FILER Laguna R	esidents First				1	.b. NUMBER 421491
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 (F SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DA CALENDAR YEAR (JAN. 1 - DEC. 31	R TO DATE
9/27/2022	Jacob Cherub Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 200.00	\$ 1,600.00	
9/28/2022	Fabrice Paracuellos Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Psychotherapist Self Employed	\$ 100.00	\$ 100.00	
9/28/2022	Bluebird Canyon Farms 1085 Bluebird Canyon Drive Laguna Beach CA 92651	☐IND ☐COM ØOTH ☐PTY ☐SCC		\$ 1,000.00	\$ 1,000.00	
9/29/2022	Steve Leonard Laguna Beach, CA 92651	ØIND □COM □OTH □PTY □SCC	Retired	\$ 500.00	\$ 1,000.00	
9/29/2022	John Trautmann Laguna Beach CA 92651	IZIND ☐COM ☐OTH ☐PTY ☐SCC	Architect HNTB Corp	\$ 425.00	\$ 425.00	
			SUBTOTAL\$	2,225.00		
Schedule A 1. Amount red (Include all	A Summary eived this period – itemized monetary contributions. Schedule A subtotals.)	*******************************	\$	15,559.11	IND - Indi COM - Re	ecipient Committee
2. Amount red	eived this period – unitemized monetary contributions			275.00	OTH	ther than PTY or SCC) ther (e.g., business entity)
Total monet (Add Lines	ary contributions received this period. 1 and 2. Enter here and on the Summary Page, Colun	nn A, Line 1.)	TOTAL \$	15,834.11		litical Party nall Contributor Committee

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

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

		SCHEDULE A (CONT.)
Statement covers period from 9/25/2022		CALIFORNIA 460
through_	10/22/2022	Page 5 of 16
		I.D. NUMBER

Laguna Residents First						14214	91
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IFCOMMITTEE, ALSO ENTERLD, 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)
9/30/2022	Mark Razin Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Owner Silverfish, LLC	\$ 1,000.00	\$ 1,000.00		
9/29/2022	Glendale, CA 91208	☑IND □COM □OTH □PTY □SCC	Professor California Institute of Technology	\$ 500.00	\$ 750.00		
9/29/2022	David Raber Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 515.38	\$ 916.38		
9/30/2022	Johanna & Eugene H Felder Jr Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Owners South Coast Financial Company	\$ 2,000.00	\$8,002.00		
9/30/2022	Alex & Charlotte Masarik Laguna Beach CA 92651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	\$ 1,000.00	\$ 4,600.00		1917
SUBTOTAL\$ 5,015.38							

*Contributor Codes

IND - Individual

NAME OF FILER

COM-Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

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

SCHEDULE A	(CONT.)
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Statement covers period

monotary contributions Received		to whole		Statement covers period 9/25/2022 10/22/2022			orm 460
NAME OF FILER				through		Page	
	sidents First					1421	JMBER 401
						1421	491
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)
10/3/2022	Kent Seward Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Residential & Commercial Handyman Self Employed	\$ 1,500.00	\$ 1,500.00		
10/3/2022	Jahn & Hal Levitt Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 150.00	\$ 150.00		
10/3/2022	Ann Christoph Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	Self Employed Ann Christoph Landscape Architect	\$ 200.00	\$ 200.00		
10/3/2022	Dennis & Carol White Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 250.00	\$ 250.00		
10/4/2022	Eric George Weiss Laguna Beach, CA 92651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	\$ 200.00	\$ 1,900.6	00	
			SUBTOTAL\$	2,300.00			

*Contributor Codes

IND - Individual

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(other than PTY or SCC)

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PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A (CONT.)

CALIFORNIA ACO

Statement covers period

				from 9/25	/2022	FC	RM 400				
				through10/2	22/2022	Page	7 of 16				
NAME OF FILER						I.D. NUM					
Laguna Res	sidents First					142149	91				
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER CCCUPATION 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)				
10/7/2022	Myron Wacholder Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 500.00	\$ 1,000.00		\$ 1,000.00		\$ 1,000.00		
10/9/2022	Thomas & Ginger Osborne Laguna Beach CA 92651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	\$ 100.00	\$ 500.00						
10/11/2022	Pamela Adams Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 103.48	\$ 206.	96					
10/12/2022	James & Christal Daehnert Laguna Beach CA 92551	☑IND □COM □OTH □PTY □SCC	Phychologist Self Employed	\$ 440.00	\$ 440.00						
10/12/2022	Richard Swintek Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 250.00	\$ 250.	50.00					
			SUBTOTAL \$	1,393.48							

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IND -- Individual

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(other than PTY or SCC)

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PTY - Political Party

SCC - Small Contributor Committee

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

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

SCHEDULE A (CONT.)

Statement covers period

wionetary Contributions Received		to whole dollars.		Statement covers period 9/25/2022 from		FORM 460			
				through10/2	22/2022	Page	8 of 16		
NAME OF FILER Laguna Res	sidents First					1.D. NI 1421	имвек 491		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER CCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTERNAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)		
10/12/2022	Christine Bas Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 350.00				
10/12/2022	James J. Kelly Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Consultant Self Employed	\$ 500.00	\$ 500	.00			
10/14/2022	Nancy Bushnell Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 200.00	\$ 425.00				
10/14/2022	Stewart R Suchman Laguna Beach, CA 92651	IND COM OTH PTY SCC	Attorney Suchman Law	\$ 200.00	\$ 400.	.00			
10/14/2022	Susan Skinner Newport Beach CA 92660	☑IND □COM □OTH □PTY □SCC	Physician So Calif Permanente Medical Group	\$ 250.00	\$ 500.	00			
	SUBTOTAL\$ 1,250.00								

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(other than PTY or SCC)

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

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

SCHEDULE A	(CONT.)
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CALIFORNIA 460

Statement covers period

9/25/2022

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				through10/2	22/2022	Page _	9	of 16				
NAME OF FILER						I.D. NU	MBER					
Laguna Re	sidents First					14214	191					
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 Y (JAN. 1 - DEC	EAR	Т	ELECTION DIDATE EQUIRED)				
10/14/2022	Barbara Metzger Laguna Beach CA 92651	IND COM OTH PTY SCC	Retired	\$ 150.00	\$ 150.00		\$ 150.00		\$ 150.00			
10/14/2022	Theresa O'Hare Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 100.00							
10/15/2022	Norvald Ulvestad Laguna Beach CA 92651 Ind	☑IND □COM □OTH □PTY □SCC	Self Employed Oak Grove Holdings	\$ 1,000.00	\$ 1,500.	00						
10/17/2022	Paul Holmes and Kiku Terasaki Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 200.00	\$ 500.	00	The second second					
10/17/2022	Valerie Thom Laguna Beach CA 92651	ØIND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 100.	100.00						
			SUBTOTAL\$	1,550.00								

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(other than PTY or SCC)

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

PTY - Political Party

Type or print in ink.

Amounts may be rounded to whole dollars.

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 Stater	ment covers period	CALIFORNIA ACO
from	9/25/2022	FORM 45U
through	10/22/2022	Page 10 of 16
		I.D. NUMBER
		1421491

Laguna Re	sidents First					14214	91	
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 YE (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)	
10/20/2022	Norman Powell Laguna Beach CA 92651	DIND COM OTH PTY SCC	Retired	\$ 250.00	\$ 1,500.	00		
10/20/2022	Michael Hoag Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 299.00	\$ 398.	00		
10/20/2022	Linda & Carl Brown Laguna Beach CA 92651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	\$ 200.00	\$ 200.	00		
10/20/2022	Robert and Vicki Borthwick Laguna Beach, CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 200.00	\$ 450.	00		
10/20/2022	Anne Caenn Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 26.25	\$ 145.	25		
	SUBTOTAL\$ 975.25							

*Contributor Codes

IND-Individual

NAME OF FILER

COM - Recipient Committee

(other than PTY or SCC)

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

PTY-Political Party

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

SCHEDULE A (CONT.) CALIFORNIA 🖊

FORM

Statement covers period

650.00

SUBTOTAL\$

9/25/2022

				from		FUR	W J.C.
				through 10/2	2/2022	Page1	
NAME OF FILER						I.D. NUMBE	R
Laguna Res	sidents First					1421491	
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 Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)
10/21/2022	Cheryl Czyz Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 250.00	\$ 1,250	.00	
10/21/2022	John & Rosemary Boyd Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 200	.00	
10/21/2022	Darrylin Girvin Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 100	.00	
10/22/2022	Jinger Wallace & Mike Beanan Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Retired	\$ 100.00	\$ 185	.00	
10/22/2022	Coastal Eddy a Gallery Laguna Beach CA 92651	□IND □COM ☑OTH □PTY □SCC		\$ 100.00	\$ 100	.00	

*Contributor Codes

IND - Individual

COM - Recipient Committee

(other than PTY or SCC) OTH - Other (e.g., business entity)

PTY - Political Party

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

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		SCHEDULE A (CONT.)
State	ment covers period	CALIFORNIA 160
from	9/25/2022	FORM TOU
through _	10/22/2022	_ Page12 of16
		I.D. NUMBER

1421491

IAME	OF F	ILER

DATE

Laguna Residents First

CUMULATIVE TO DATE PER ELECTION AMOUNT IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR RECEIVED THIS CALENDAR YEAR TO DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE * RECEIVED PERIOD (IF REQUIRED) (JAN. 1 - DEC. 31) (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) **MIND** Karen Lagrew Retired ПСОМ \$ 100.00 \$ 100.00 10/16/2022 OTH Laguna Beach CA 92651 PTY SCC **IND** Anita & James Dobbs Retired COM \$ 100.00 \$ 100.00 10/20/2022 □ OTH Laguna Beach CA 92651 PTY SCC СОМ

*Contributor Codes IND - Individual COM -- Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

SUBTOTAL \$ 200.00

Schedule C **Nonmonetary Contributions Received**

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

Statement covers period 9/25/2022	california 460
through 10/22/2022	Page 13 of 16
	I.D. NUMBER
	1404404

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

DATE RECEIVED PATE 10/4/2022 PURPLY AMME. STREET ADDRESS AND ZIP CODE of CONTRIBUTOR (F COMMITTEE, ALSO ENTER I.D. MIAMSER) CONTRIBUTOR (CODE * CONTRIBUTOR (CODE * CONTRIBUTOR (CODE * CONTRIBUTOR (CODE * CODE * CONTRIBUTOR (CODE * CODE * CODE * CODE * CONTRIBUTOR (CODE * CODE * COD	Laguna R	residents first					142149	!
10/4/2022 Laguna Beach CA 92651 Eric George Weiss Laguna Beach, CA 92651 Eric George Weiss Er		ZIP CODE OF CONTRIBUTOR		OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER		FAIR MARKET	DATE CALENDAR YEAR	TO DATE
COM	10/4/2022		□COM □OTH □PTY	South Coast Financial		\$ 833.16	\$ 1,999.36	
COM	10/22/2022		□COM □OTH □PTY	Retired		\$ 273.48	\$ 2,273.48	
□COM □OTH □PTY □SCC			□COM □OTH □PTY					
Attach additional information on appropriately labeled continuation sheets. SUBTOTAL \$ 1,106.64			□COM □OTH □PTY					
	Attach add	ditional information on appropriately label	ed continuati	on sheets.	SUBTOTAL \$	1,106.64		

Schedule C Summary

Amount received this period – itemized nonmonetary contributions. (Include all Schedule C subtotals.)	\$	1,106.64
Amount received this period – unitemized nonmonetary contributions of less than \$100		Λ
3. Total nonmonetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Lines 4 and 10.)	TOTAL \$	1,106.64

*Contributor Codes

IND - Individual

COM - Recipient Committee (other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

FPPC Form 460 (January/05)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Schedule E Payments Made	Type or print in ink. Amounts may be rounded to whole dollars.	Statement covers period 9/25/2022	CALIFORNIA 46
SEE INSTRUCTIONS ON REVERSE		through10/22/2022	Page 14 of 16
NAME OF FILER Laguna Residents First			I.D. NUMBER 1421491
CODES: If one of the following codes accurate CMP campaign paraphemalia/misc. CNS campaign consultants	rely describes the payment, you may enter the code MBR member communications MTG meetings and appearances	. Otherwise, describe the payment. RAD radio airtime and product RFD returned contributions	

office expenses

phone banks

print ads

petition circulating

polling and survey research

postage, delivery and messenger services

professional services (legal, accounting)

CTB contribution (explain nonmonetary)*

campaign literature and mailings

independent expenditure supporting/opposing others (explain)*

candidate filing/ballot fees

fundraising events

legal defense

CVC civic donations

FIL

FND

LEG

LIT

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNTPAID
Charles Michael Murray Laguna Beach CA 92651	WEB	Website, Video Editing	\$ 2,800.00
Creative Juice Design 5473 N Stanley Creek Ave. Meridian, ID 83646	LIT	Graphic Design	\$ 570.00
EveryAction, Inc 1445 New York Avenue Northwest Suite 200 Washington, DC 20005	РНО	Phone Communications	\$ 492.00

Schedule E Summary 20.939.81 1. Itemized payments made this period. (Include all Schedule E subtotals.) 386.19 2. Unitemized payments made this period of under \$100 0 3. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....\$ 21,326

SAL campaign workers' salaries

VOT voter registration

t.v. or cable airtime and production costs

staff/spouse travel, lodging, and meals

WEB information technology costs (internet, e-mail)

transfer between committees of the same candidate/sponsor

candidate travel, lodging, and meals

Schedule E (Continuation Sheet) Payments Made

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Amounts may be rounded to whole dollars.

			Various de la company de la co				SOUTH L
	Statem	ent covers period	CALIF	ORNI	\mathbf{A}_{I}	A	7
	from	9/25/2022		RM	- 2	10)	
	through_	10/22/2022	Page_	15	_ of_	16	High states
_			I.D. NUM				
			142149	1			

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Laguna Residents First

CODES: If one of the following codes accurately describes the payment, you may enter the code. Otherwise, describe the payment. RAD radio airtime and production costs campaign paraphernalia/misc. MBR member communications returned contributions campaign consultants MTG meetings and appearances SAL campaign workers' salaries contribution (explain nonmonetary)* office expenses OFC t.v. or cable airtime and production costs CVC civic donations PET petition circulating candidate travel, lodging, and meals candidate filing/ballot fees phone banks staff/spouse travel, lodging, and meals fundraising events polling and survey research transfer between committees of the same candidate/sponsor independent expenditure supporting/opposing others (explain)* postage, delivery and messenger services TSF ND voter registration LEG legal defense professional services (legal, accounting) VOT WEB information technology costs (internet, e-mail) campaign literature and mailings PRT print ads

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
Firebrand Media LLC 900 Glenneyre Street Suite B Laguna Beach CA 92651	PRT	Newspaper advertising	\$ 3,980.00
Greer's OC 476 Broadway Costa Mesa CA 92627	CMP	Social media	\$ 375.00
Printfirm.com 21352 Nordhoff St, Unit 104 Chatsworth, CA 91311	LIT	Printing & Postage	\$ 5,172.82
Smart Levels 16 Hammond Irvine CA 92618	CMP	Banners, printing	\$ 1,872.49
Strumwasser & Woocher LLP 10940 Wilshire Boulevard Suite 2000 Los Angeles CA 90024	PRO	Legal Services	\$ 4,882.50

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

SUBTOTAL \$

16,282.81

Schedule E (Continuation Shoot)

Type or print in ink.

SCH	EDU	LEE	(CON	(.T/
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Payments Made	Amounts may be rounded to whole dollars.	from 9/25/2022	FORM 460
SEE INSTRUCTIONS ON REVERSE		through 10/22/2022	Page 16 of 16
Laguna Residents First			I.D. NUMBER 1421491
CODES: If one of the following codes accura	atoly described the newment you want at all 100		

CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events ND independent expenditure supporting/opposing others (explain)* MTG meeting office e petition phone to polling a postage	communications and appearanc xpenses circulating panks and survey resea , delivery and me onal services (legonal s	RAD radio airtime and production costs returned contributions SAL campaign workers' salaries TEL t.v. or cable airtime and production cost TRC candidate travel, lodging, and meals rch TRS staff/spouse travel, lodging, and meals ressenger services TSF transfer between committees of the sal	me candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR DESCRIPTION OF PAYMENT	AMOUNT PAID
The Inter Connect Network 22431 Antonio Parkway B160-104 Rancho Santa Margarita CA 92688	СМР	Social Media	\$ 500.00
Topcor / Clipa 19 Hammond, #502 Irvine, CA 93618	PRT	Graphic Design	\$ 195.00
Unitarian Universalist Fellowship of Laguna Beach 429 Cypress Drive Laguna Beach, CA 92651	MTG	Room Rental	\$ 100.00

Irvine, CA 93618		The state of the s	Ф 195.00
Unitarian Universalist Fellowship of Laguna Beach 429 Cypress Drive Laguna Beach, CA 92651	MTG	Room Rental	\$ 100.00

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

SUBTOTAL \$

795.00