Recipient Committee		1	Date Stamp	CALIFORNIA A C	RPAGE
Campaign Statement Cover Page			RECEIVE	CALIFORNIA 46	<b>5</b> U
(Government Code Sections 84200-84216.5)	Statement covers period	Date of election if applicable:	NEGETVE	18	1
		(Month, Day, Year)	007.00	Page1 of11	
	from09/25/2022		OCT <b>28</b> 20	For Official Use Only	
SEE INSTRUCTIONS ON REVERSE	through10/22/2022	11/08/2022	City Clerk's Of		
Type of Recipient Committee: All Committees - Co	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:	Oity of Laguilla Bear	Sh, CA	
☐ Officeholder, Candidate Controlled Committee ☐ State Candidate Election Committee ☐ Recall ☐ (Also Complete Part 5) ☐ General Purpose Committee ☐ Sponsored ☐ Small Contributor Committee	Primarily Formed Ballot Measure Committee Controlled Sponsored Also Complete Part 6) Primarily Formed Candidate/ Officeholder Committee Also Complete Part 7)	□ Preelection Statement     □ Semi-annual Statement     □ Termination Statement     (Also file a Form 410 Te     □ Amendment (Explain b)	ermination)	Quarterly Statement Special Odd-Year Report Supplemental Preelection Statement - Attach Form 495	_
3 Committee Information	D. NUMBER 1450051	Treasurer(s)			
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)	1450051	NAME OF TREASURER			
PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURE	S R & S, SPONSORED BY	CARY DAVIDSON			
REGENCY PROPERTIES, L.P. AND AFFILIATED ENTI	TIES AND DIRS MLB, LLC	MAILING ADDRESS			
		515 S. FIGUEROA ST.,			
STREET ADDRESS (NO P.O. BOX)		CITY		IP CODE AREA CODE/F	
1278 GLENNEYRE ST., #459		LOS ANGELES		90071 (213)624	4-6200
CITY STATE ZIP CO		NAME OF ASSISTANT TREASU	RER, IF ANY		
LAGUNA BEACH CA 9265		MICHAEL FARR			
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. E	BOX	MAILING ADDRESS 515 S. FIGUEROA ST.,	STE. 1110		
515 S. FIGUEROA ST., STE. 1110  CITY STATE ZIP CO	DDE AREA CODE/PHONE	CITY	STATE Z	IP CODE AREA CODE/	PHONE
LOS ANGELES CA 9007		LOS ANGELES	CA	90071 (213)624	4-6200
OPTIONAL: FAX / E-MAIL ADDRESS		OPTIONAL: FAX / E-MAIL ADDI	RESS		
(213)623-1692 / sosfilings@politicallaw.com					
4. Verification  I have used all reasonable diligence in preparing and reviewing under penalty of perjury under the laws of the State of California  Executed on 10/26/2022	g this statement and to the best of my kr ia that the foregoing is true and correct.	nowledge the information contained he	ein and in the attached sc	nedules is true and complete. I co	ertify
Date	Ву	Signature of Treasurer or Assistant			
Executed onDate	BySignature of C	ontrolling Officeholder, Candidate, State Measure Pr	oponent or Responsible Officer of Spo	insor	
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, S	State Measure Proponent		
Executed onDate	Ву	Signature of Controlling Officeholder, Candidate,	State Measure Proponent	FPPC Form 460 (J	Jan/2016)

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

	COVE	R PAGI	E-PAF	RT 2
CALIF	ORNI	A	A	7
FO	RM		77	
Page	2	of_	11	

	NAME OF BALLOT MEASURE				
NAME OF OFFICEHOLDER OR CANDIDATE		See continuation for F	Part 6a		
			JURISDICTI	ON	
OFFICE SOUGHT OR HELD (INCLUDE LOCATION	AND DISTRICT NUMBER IF APPLICABLE)	BALLOT NO. OR LETTER	JONISDICTI	· ·	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND S	TREET) CITY STATE ZIP	Identify the controlling off	ficeholder, ca	indidate, or state measure	proponent, if an
		NAME OF OFFICEHOLDER, CAN	NDIDATE, OR PI	ROPONENT	
Related Committees Not Included in not included in this statement that are control contributions or make expenditures on behalf	lied by you or are primarily formed to receive	OFFICE SOUGHT OR HELD		DISTRICT NO	. IF ANY
COMMITTEE NAME	I.D. NUMBER				
NAME OF TOTAL UPER	CONTROLLED COMMITTEE?	7. Primarily Formed Can	didate/Offi	ceholder Committee	List names of
NAME OF TREASURER	CONTROLLED COMMITTEE?	7. Primarily Formed Can officeholder(s) or candidate(s	ididate/Offi s) for which th	is committee is primarily for	med.
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRES	YES NO	7. Primarily Formed Can officeholder(s) or candidate(s	s) for which th	ceholder Committee is committee is primarily for OFFICE SOUGHT OR HELL	med.
	YES NO	officeholder(s) or candidate(s	s) for which th	is committee is primarily fo	support Oppose
COMMITTEE ADDRESS STREET ADDRES	YES NO	officeholder(s) or candidate(s	s) for which the	OFFICE SOUGHT OR HELL	SUPPORT UPPOSE SUPPOSE OPPOSE
COMMITTEE ADDRESS STREET ADDRES	YES NO SS (NO P.O. BOX)  E ZIP CODE AREA CODE/PHONE	NAME OF OFFICEHOLDER OR	candidate  Candidate  Candidate  Candidate	OFFICE SOUGHT OR HELD OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE OPPOSE
COMMITTEE ADDRESS STREET ADDRESS  CITY STAT  COMMITTEE NAME	I.D. NUMBER    CONTROLLED COMMITTEE?   YES   NO	NAME OF OFFICEHOLDER OR ON NAME OF OTHER OR OTHER OR ON NAME OF OTHER OR OTHER OR OTHER OTHER OR OTHER OTHER OR OTHER OTHE	candidate  Candidate  Candidate  Candidate	OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD  OFFICE SOUGHT OR HELD	SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT OPPOSE SUPPORT

## Recipient Committee Campaign Statement Part 6a. Primarily Formed Ballot Measure Committee (continued)

CALIFORNIA 460

Page \_\_\_ 3 \_\_ of \_\_11

NAME OF BALLOT MEASURE

AN ORDINANCE AMENDING THE LAGUNA BEACH MUNICIPAL CODE TO CREATE A MINIMUM WAGE AND WORKPLACE STANDARDS AND PROTECTIONS FOR HOTEL

BALLOT NO. OR LETTER

JURISDICTION

CITY OF LAGUNA BEACH

SUPPORT/OPPOSE

Oppose

NAME OF BALLOT MEASURE

NAME OF BALLOT MEASURE
AN ORDINANCE CREATING A HOTEL DEVELOPMENT OVERLAY ZONING DISTRICT AND

BALLOT NO. OR LETTER

JURISDICTION

SUPPORT/OPPOSE

Oppose

CITY OF LAGUNA BEACH

REQUIRING VOTER APPROVAL OF HOTEL DEVELOPMENT PROJECTS

## Campaign Disclosure Statement Summary Page

Amounts may be rounded to whole dollars.

		SUMMARY PAGE
Statement covers period		CALIFORNIA 160
from	09/25/2022	FORM - O
through _	10/22/2022	_ Page4 of11
TITAMON ON	TITLES AND	I.D. NUMBER 1450051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER
PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES AND

DTRS MLB, LLC

Through 10/22/2022 Page 4 of 11

LD. NUMBER 1450051

Contributions Received	(	Column A TOTAL THIS PERIOD FROM ATTACHED SCHEDULES)		Column B CALENDAR YEAR TOTAL TODATE	Calendar Year Summary for Candidates Running in Both the State Primary and General Elections
1. Monetary Contributions Schedule A, Line 3	\$	0.00	\$	0.00	1/1 through 6/30 7/1 to Date
2. Loans Received Schedule B, Line 3		0.00		1,370,000.00	, in the second
3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$	0.00	\$	1,370,000.00	20. Contributions Received \$ \$
4. Nonmonetary Contributions Schedule C, Line 3		0.00		0.00	21. Expenditures
5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4	\$	0.00	\$	1,370,000.00	Made \$ \$
Expenditures Made					Expenditure Limit Summary for State
6. Payments Made Schedule E, Line 4	\$	289,806.73	\$	1,175,881.02	Candidates
7. Loans Made Schedule H, Line 3		0.00		0.00	22. Cumulative Expenditures Made*
8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7	\$	289,806.73	\$	1,175,881.02	(if Subject to Voluntary Expenditure Limit)
9. Accrued Expenses (Unpaid Bills)Schedule F, Line 3		0.00		0.00	Date of Election Total to Date
10. Nonmonetary Adjustment		0.00		0.00	(mm/dd/yy)
11. TOTAL EXPENDITURES MADE	\$	289,806.73	\$	1,175,881.02	\$
Current Cash Statement					\$
12. Beginning Cash Balance Previous Summary Page, Line 16	\$	483,925.71		calculate Column B, add	
13. Cash Receipts Column A, Line 3 above		0.00		mounts in Column A to the presponding amounts	*Amounts in this section may be different from amounts
14. Miscellaneous Increases to Cash Schedule I, Line 4		0.00	fro	om Column B of your last	reported in Column B.
15. Cash Payments Column A, Line 8 above		289,806.73		port. Some amounts in olumn A may be negative	
16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$	194,118.98		jures that should be obtracted from previous	
If this is a termination statement, Line 16 must be zero.			p€	eriod amounts. If this is e first report being filed	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$	0.00	fo ca	r this calendar year, only arry over the amounts	
Cash Equivalents and Outstanding Debts			1	om Lines 2, 7, and 9 (if ny).	
18. Cash Equivalents See instructions on reverse	\$				
19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$	1,370,000.00			5000 F 400 ( lead
			E		FPPC Form 460 (Jan FPPC Advice: advice@fppc.ca.gov (866/275

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

Schedule B – Part 1 Loans Received	Amo		Statement co	vers period	CALIFORN FORM	<sup>4</sup> 460		
SEE INSTRUCTIONS ON REVERSE					through10/	22/2022	Page5	of11
NAME OF FILER							I.D. NUMBER	
PROTECT AND KEEP LAGUNA LOCAL, NO ON MI	1450051							
DTRS MLB, LLC  FULL NAME, STREET ADDRESS AND ZIP CODE  OF LENDER  (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(¢) AMOUNT PA OR FORGIV THIS PERIC	EN CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
DTRS MLB, LLC(MARY ROGERS) 30801 S. COAST HIGHWAY LAGUNA BEACH, CA 92651		s 87.500.00	s0.00	PAID  \$0_  FORGIVEN	00 \$ 87,500.00		\$ <u>87.500.00</u>	CALENDAR YEAR  \$ 685.000.00  PER ELECTION**
†□ IND □ COM ☒ OTH □ PTY □ SCC		\$_87.300.00	3	*	DATE DUE		DATE INCURRED	
DTRS MLB, LLC(MARY ROGERS) 30801 S. COAST HIGHWAY LAGUNA BEACH, CA 92651				PAID  \$		<u>0.00</u> % RATE	\$125,,000.00	\$_685_000_00 PER ELECTION**
†□IND □ COM ☑ OTH □ PTY □ SCC		\$ 125,000,00	\$0.00	sn_	06/30/2023 DATE DUE	s <u>n n</u>	DATE INCURRED	\$
DTRS MLB, LLC(MARY ROGERS) 30801 S. COAST HIGHWAY LAGUNA BEACH, CA 92651				\$0_    FORGIVEN		Q QQ% RATE	\$472.500.00	s 685,000.00 PER ELECTION*
†□ IND □ COM ☒ OTH □ PTY □ SCC		s_472.500.00	s0.00	so.	06/30/2023 DATE DUE	\$0.0	DATE INCURRED	s
		SUBTOTALS	\$ 0.00	\$ 0	0.00 <b>\$</b> 685,000.	0.0	0	
Schedule B Summary						(Enter (e) on Schedule E, Line 3)		
Loans received this period  (Total Column (b) plus unitemized loans)	s of less than \$100.)			\$_	0.1		Contributor Code	s
2. Loans paid or forgiven this period								PTY or SCC) , business entity)
3. Net change this period. (Subtract Line Enter the net here and on the Summar	e 2 from Line 1.) y Page, Column A, Line 2.		·········	. NET \$ _	(May be a negative number	)U (	occ - Gridi Colli	abator Committee
*Amounts forgiven or paid by another party also	must be reported on Schedule A.							

\*\* If required.

SCHEDULE B - PART 1 (CONT.)

Schedule B – Part 1 (Continuation Sheet)  Loans Received  Amounts may be rounded to whole dollars.			Statement co	vers period	CALIFORNI FORM	^ 460		
SEE INSTRUCTIONS ON REVERSE					through10/2	2/2022	Page6	of11
NAME OF FILER		*****					I.D. NUMBER	
PROTECT AND KEEP LAGUNA LOCAL, NO ON ME	ASURES R & S, SPONSORED	BY REGENCY PRO	OPERTIES, L.P	. AND AFFI	LIATED ENTITIES	AND	1450051	
TTRS MLB, LLC  FULL NAME, STREET ADDRESS AND ZIP CODE  OF LENDER  (IF COMMITTEE, ALSO ENTER LD. NUMBER)	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	(a) OUTSTANDING BALANCE BEGINNING THIS PERIOD	(b) AMOUNT RECEIVED THIS PERIOD	(c) AMOUNT PA OR FORGIVI THIS PERIC	EN   CLOSE OF THIS	(e) INTEREST PAID THIS PERIOD	(f) ORIGINAL AMOUNT OF LOAN	(g) CUMULATIVE CONTRIBUTIONS TO DATE
REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES 1555 S. COAST HIGHWAY LAGUNA BEACH, CA 92651 CONTRIBUTION RECEIVED FROM REGENCY PROPERTIES, L.P.		TEMOS		PAID  \$0_0  FORGIVEN	****	<u>0.00</u> % RATE	\$_87.500.00	\$ 685,000,00 PER ELECTION**
<sup>†</sup> □ IND □ COM ☑ OTH □ PTY □ SCC		s 87,500.00	\$0.00	\$	06/30/2023 DATE DUE	\$0.00	07/07/2022 DATE INCURRED	\$
REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES 1555 S. COAST HIGHWAY LAGUNA BEACH, CA 92651 CONTRIBUTION RECEIVED FROM REGENCY PROPERTIES, L.P.				PAID  \$ FORGIVEN	_	0_00% RATE	\$125,000.00	\$ _685,000,00 PER ELECTION **
†□IND □COM STOTH □PTY □SCC		\$ <u>125,000.00</u>	s <u>0.00</u>	s	06/30/2023 DATE DUE	\$0_00	07/22/2022 DATE INCURRED	\$
REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES 1555 S. COAST HIGHWAY LAGUNA BEACH, CA 92651 CONTRIBUTION RECEIVED FROM REGENCY PROPERTIES, L.P.				PAID  \$ FORGIVEN	06/30/2023		\$472,500.00 08/05/2022	CALENDAR YEAR \$ 685,000.00 PER ELECTION**
†□ IND □ COM 図 OTH □ PTY □ SCC		\$ 472.500.00	\$0.00	\$0.	DATE DUE	. 8	DATE INCURRED	
				S FORGIVEN	s	RATE	s	\$PER ELECTION **
†□IND □COM □OTH □PTY □SCC		\$	\$	s	DATE DUE	s	DATE INCURRED	s
		SUBTOTALS	\$ 0.00	<b>\$</b> 0	.00\$ 685,000.	0.0	0	

†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

\*Amounts forgiven or paid by another party also must be reported on Schedule A. \*\* If required.

FPPC Form 460 (Jan/2016)

Schedule E	
Payments Made	

## Amounts may be rounded to whole dollars.

			SCHEDULE I
Schedule E	Amounts may be rounded	Statement covers period	CALIFORNIA 460
Payments Made	to whole dollars.	from <u>09/25/2022</u>	FORM TOO
OFF INOTOLIOTIONS ON DEVEROE		through	Page of11
SEE INSTRUCTIONS ON REVERSE	A STATE OF THE STA		I.D. NUMBER
NAME OF FILER	TO AND	AUDITATION EMPTETTE AND	1450051
PROTECT AND KEEP LAGUNA LOCAL, NO ON MEAS	SURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND	APPIDIATED ENTITIES AND	2.130002

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

	2 mo. 11 olio ol 110 lenerali 3				
<b>C</b> MP	campaign paraphernalia/misc.	MBR	member communications		radio airtime and production costs
	campaign consultants	MTG	meetings and appearances		returned contributions
			•	SAL	campaign workers' salaries
	contribution (explain nonmonetary)*		,	TEL	t.v. or cable airtime and production costs
	civic donations		petition circulating		candidate travel, lodging, and meals
FIL	candidate filing/ballot fees		phone banks		
FND				IRS	staff/spouse travel, lodging, and meals
	independent expenditure supporting/opposing others (explain)*	POS	postage, delivery and messenger services		transfer between committees of the same candidate/sponsor
		PRO	professional services (legal, accounting)		voter registration
LEG	legal defense		print ads	WER	information technology costs (internet, e-mail)
LIT	campaign literature and mailings	PRT	huu aas		, , , , , , , , , , , , , , , , , , ,

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
REED & DAVIDSON, LLP 515 S. FIGUEROA ST., STE. 1110 LOS ANGELES, CA 90071	PRO	CARY DAVIDSON, DAVIDSON, LLP	, TREASURER, IS A PARTNER OF REED &	6,677.46
VICTORY CAMPAIGN CONSULTING 1278 S. GLENNEYRE ST., #95 LAGUNA BEACH, CA 92651	CNS			149,743.65
VICTORY CAMPAIGN CONSULTING 1278 S. GLENNEYRE ST., #95 LAGUNA BEACH, CA 92651	LIT			133,385.62

\* Payments that are contributions or independent expenditures must also be summarized on Schedule D. Schedule E Summary 1. Itemized payments made this period. (Include all Schedule E subtotals.) 289,806.73 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).)......\$ 0.00 289,806.73 

SUBTOTAL\$

289,806.73

Schedule G	
Payments Made by an Agent or Independen	t
Contractor (on Behalf of This Committee)	

Amounts may be rounded to whole dollars.

	SCHEDULE G
Statement covers perio	CALIFORNIA A CO
from 09/25/2022	FORM 400
through 10/22/2022	Page8 of11
LIATED ENTITIES AND	I.D. NUMBER 1450051

COLLEGIA

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFI DTRS MLB, LLC

NAME OF AGENT OR INDEPENDENT CONTRACTOR

VICTORY CAMPAIGN CONSULTING

CODES: If one of the following codes accurately describ	es the payment, you may enter the code.	Otherwise, describe the payment.
CMP campaign paraphernalia/misc.	MBR member communications	RAD radio airtime and production costs
CNS campaign consultants	MTG meetings and appearances	RFD returned contributions
CTB contribution (explain nonmonetary)*	OFC office expenses	SAL campaign workers' salaries
CVC civic donations	PET petition circulating	TEL t.v. or cable airtime and production costs
FIL candidate filing/ballot fees	PHO phone banks	TRC candidate travel, lodging, and meals
FND fundraising events	POL polling and survey research	TRS staff/spouse travel, lodging, and meals

independent expenditure supporting/opposing others (explain)\* legal defense LEG

campaign literature and mailings

POS postage, delivery and messenger services PRO professional services (legal, accounting)

print ads

TSF transfer between committees of the same candidate/sponsor

VOT voter registration

WEB information technology costs (internet, e-mail)

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
CANDID RESEARCH SOLUTIONS 268 BOULDER POINT LANE OHATCHEE, AL 36271	POL		18,000.00
LAGUNA BEACH PROPERTIES 32921-A CALLE PERFECTO SAN JUAN CAPISTRANO, CA 92675	СМР		953.60
META 1 HACKER WAY MENLO PARK, CA 94025	WEB		500.00
POLITICAL DATA, INC. 12501 IMPERIAL HIGHWAY, STE. 200 NORWALK, CA 90650	VOTE	R FILE	814.92
and the state of a continuation of			TOTAL* \$ 20,268.52

Attach additional information on appropriately labeled continuation sheets.

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

## Schedule G (Continuation Sheet) Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

		SCHEDULE G (CONT.
State	ement covers period	CALIFORNIA 160
from	09/25/2022	FORM 400
through	10/22/2022	Page 9 of 11
TATED EN	VTITIES AND	I.D. NUMBER 1450051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILE DTRS MLB, LLC

NAME OF AGENT OR INDEPENDENT CONTRACTOR

campaign literature and mailings

VICTORY CAMPAIGN CONSULTING

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

print ads

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OF	R DESCRIPTION OF PAYMENT	AMOUNT PAID
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	LIT		20,496.54
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	LIT		26,164.00
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	LIT		20,496.54
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	LIT		20,496.54
		TO.7	<b>`Al*\$</b> 87.653.62

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G (Continuation Sheet)			
Payments Made by an Agent or Independent	Amounts may be rounded	State	ment covers per
Contractor (on Behalf of This Committee)	to whole dollars.	from	09/25/2022

iod **CALIFORNIA** FORM 09/25/2022 from through  $\frac{10/22}{2022}$ 

SEE	INST	RUCT	CNOL	ON	REVERSE

NAME OF FILER

PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES AND DTRS MLB, LLC

I.D. NUMBER 1450051

Page 10 of 11

SCHEDULE G (CONT.)

NAME OF AGENT OR INDEPENDENT CONTRACTOR

VICTORY CAMPAIGN CONSULTING

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 MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances CNS campaign consultants SAL campaign workers' salaries OFC office expenses CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs PET petition circulating CVC civic donations

TRC candidate travel, lodging, and meals PHO phone banks candidate filing/ballot fees staff/spouse travel, lodging, and meals TRS POL polling and survey research FND fundraising events TSF transfer between committees of the same candidate/sponsor postage, delivery and messenger services

independent expenditure supporting/opposing others (explain)\* VOT voter registration professional services (legal, accounting) LEG legal defense

POS

WEB information technology costs (internet, e-mail) print ads campaign literature and mailings

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AN	MOUNT PAID
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	LIT				20,496.54
PRINTING GRAPHICS 21236 S. WESTERN AVE. TORRANCE, CA 90501	СМР				1,125.00
U.S. POSTMASTER 350 FOREST AVE. LAGUNA BEACH, CA 92652	POS				3,023.97
U.S. POSTMASTER 350 FOREST AVE. LAGUNA BEACH, CA 92652	POS	,			3,860.12
Attach additional information on appropriately labeled continuation sheets.			T	OTAL* \$	28,505.63

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.

Schedule G (Continuation Sheet) Payments Made by an Agent or Independent Contractor (on Behalf of This Committee)

Amounts may be rounded to whole dollars.

		SCHEDULE G (CONT.
	Statement covers period	CALIFORNIA 160
fre	om09/25/2022	FORM 400
th	rough <u>10/22/2022</u>	Page 11 of 11
	IED EMPTOTES AND	LD. NUMBER 1450051

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

PROTECT AND KEEP LAGUNA LOCAL, NO ON MEASURES R & S, SPONSORED BY REGENCY PROPERTIES, L.P. AND AFFILIATED ENTITIES AND DTRS MLB, LLC

NAME OF AGENT OR INDEPENDENT CONTRACTOR

VICTORY CAMPAIGN CONSULTING

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 MBR member communications CMP campaign paraphernalia/misc. RFD returned contributions MTG meetings and appearances campaign consultants CNS SAL campaign workers' salaries office expenses OFC CTB contribution (explain nonmonetary)\* TEL t.v. or cable airtime and production costs petition circulating PET CVC civic donations candidate travel, lodging, and meals TRC FIL.

PHO phone banks candidate filing/ballot fees staff/spouse travel, lodging, and meals TRS POL polling and survey research fundraising events

transfer between committees of the same candidate/sponsor postage, delivery and messenger services TSF independent expenditure supporting/opposing others (explain)\* VOT voter registration professional services (legal, accounting) PRO

LEG legal defense WEB information technology costs (internet, e-mail) PRT print ads campaign literature and mailings LIT

<sup>\*</sup> Payments that are contributions or independent expenditures must also be summarized on Schedule D.

NAME AND ADDRESS OF PAYEE OR CREDITOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
U.S. POSTMASTER 350 FOREST AVE. LAGUNA BEACH, CA 92652	POS		3,023.97
U.S. POSTMASTER 350 FOREST AVE. LAGUNA BEACH, CA 92652	POS		3,023.97
U.S. POSTMASTER 350 FOREST AVE. LAGUNA BEACH, CA 92652	POS		3,023.97

Attach additional information on appropriately labeled continuation sheets.

TOTAL\* \$

9,071.91

<sup>\*</sup> Do not transfer to any other schedule or to the Summary Page. This total may not equal the amount paid to the agent or independent contractor as reported on Schedule E.