

Recipient Committee Campaign Statement Cover Page

Date Stamp RECEIVED JUL 27 2023 City Clerk's Office City of Laguna Beach, CA CALIFORNIA FORM 460 Page 1 of 15 For Official Use Only

Statement covers period from 1/1/2023 through 6/30/2023

Date of election if applicable: (Month, Day, Year)

SEE INSTRUCTIONS ON REVERSE

1. Type of Recipient Committee: All Committees - Complete Parts 1, 2, 3, and 4.

- Officeholder, Candidate Controlled Committee
State Candidate Election Committee
Recall
General Purpose Committee
Sponsored
Small Contributor Committee
Political Party/Central Committee
Primarily Formed Ballot Measure Committee
Controlled
Sponsored
Primarily Formed Candidate/Officeholder Committee

2. Type of Statement:

- Preelection Statement
Semi-annual Statement
Termination Statement
Amendment
Quarterly Statement
Special Odd-Year Report

3. Committee Information

I.D. NUMBER 990381

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)

Village Laguna, Inc.

STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE
Laguna Beach CA 92651

MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. BOX

CITY STATE ZIP CODE AREA CODE/PHONE
Laguna Beach, CA 92651

OPTIONAL: FAX / E-MAIL ADDRESS

Treasurer(s)

NAME OF TREASURER

Mary Ives

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE
Laguna Beach CA 92651

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY STATE ZIP CODE AREA CODE/PHONE

OPTIONAL: FAX / E-MAIL ADDRESS

4. Verification

I have used all reasonable diligence in preparing and reviewing this statement and to the best of my knowledge the information contained herein and in the attached schedules is true and complete. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on July 27, 2023

Executed on Date

Executed on Date

Executed on Date

By Signature of Treasurer or Assistant Treasurer

By Signature of Controlling Officeholder, Candidate, State Measure Proponent or Responsible Officer of Sponsor

By Signature of Controlling Officeholder, Candidate, State Measure Proponent

By Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

SUMMARY PAGE

Statement covers period from <u>1/1/2023</u>	<b>CALIFORNIA FORM 460</b>
through <u>6/30/2023</u>	
Page <u>2</u> of <u>15</u>	
I.D. NUMBER 990381	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Village Laguna, Inc.

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Monetary Contributions..... Schedule A, Line 3	\$ <u>102,523</u>	\$ _____
Loans Received..... Schedule B, Line 3	\$ <u>0</u>	\$ _____
SUBTOTAL CASH CONTRIBUTIONS..... Add Lines 1 + 2	\$ <u>102,523</u>	\$ _____
Nonmonetary Contributions..... Schedule C, Line 3	\$ <u>0</u>	\$ _____
TOTAL CONTRIBUTIONS RECEIVED..... Add Lines 3 + 4	\$ <u>102,523</u>	\$ _____

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

	1/1 through 6/30	7/1 to Date
20. Contributions Received	\$ _____	\$ _____
21. Expenditures Made	\$ _____	\$ _____

**Expenditures Made**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
Payments Made..... Schedule E, Line 4	\$ <u>26,219</u>	\$ _____
Loans Made..... Schedule H, Line 3	\$ <u>0</u>	\$ _____
SUBTOTAL CASH PAYMENTS..... Add Lines 6 + 7	\$ <u>26,219</u>	\$ _____
Accrued Expenses (Unpaid Bills)..... Schedule F, Line 3	\$ <u>0</u>	\$ _____
0. Nonmonetary Adjustment..... Schedule C, Line 3	\$ <u>0</u>	\$ _____
1. TOTAL EXPENDITURES MADE..... Add Lines 8 + 9 + 10	\$ <u>26,219</u>	\$ _____

**Expenditure Limit Summary for State  
Candidates**

22. Cumulative Expenditures Made\*  
(If Subject to Voluntary Expenditure Limit)

Date of Election (mm/dd/yy)	Total to Date
____/____/____	\$ _____
____/____/____	\$ _____

**Current Cash Statement**

2. Beginning Cash Balance..... Previous Summary Page, Line 16	\$ <u>27,520</u>
3. Cash Receipts..... Column A, Line 3 above	\$ <u>102,523</u>
4. Miscellaneous Increases to Cash..... Schedule I, Line 4	\$ <u>0</u>
5. Cash Payments..... Column A, Line 8 above	\$ <u>26,219</u>
6. ENDING CASH BALANCE..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>103,824</u>

If this is a termination statement, Line 16 must be zero.

To calculate Column B, add amounts in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column A may be negative figures that should be subtracted from previous period amounts. If this is the first report being filed for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).

\*Amounts in this section may be different from amounts reported in Column B.

7. LOAN GUARANTEES RECEIVED..... Schedule B, Part 2	\$ <u>0</u>
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**Cash Equivalents and Outstanding Debts**

8. Cash Equivalents..... See instructions on reverse	\$ <u>0</u>
9. Outstanding Debts..... Add Line 2 + Line 9 in Column B above	\$ <u>0</u>

**chedule A  
onetary Contributions Received**

Amounts may be rounded  
to whole dollars.

Statement covers period  
from 1/1/2023  
through 6/30/2023

**CALIFORNIA FORM 460**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER  
Village Laguna, Inc.

I.D. NUMBER  
990381

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/24/2023	John Thomas ██████████ Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	250		
1/21/2023	Darrylin Girvin ██████████ Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	160		
5/19/2023	Korey Jorgensen ██████████ Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Physician	210		
5/19/2023	Jacob Cherub ██████████ Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	280		
4/16/2023	Scott Borthwick ██████████ Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	attorney, Law Offices of Villalobos & Borthwick	250		

**SUBTOTAL \$** 1,150

**chedule A Summary**

Amount received this period – itemized monetary contributions.  
(Include all Schedule A subtotals.) ..... \$ 84,865

Amount received this period – unitemized monetary contributions of less than \$100 ..... \$ 19,638

Total monetary contributions received this period.  
(Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.)..... **TOTAL \$** 104,503

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Village Laguna, Inc.	I.D. NUMBER 990381
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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/19/2023	Roger Owens [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	140		
1/3/2023	Roger Owens [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	60		
5/18/2023	Dee Perry [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	143		
5/3/2023	David Raber [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	143		
5/19/2023	John Trautman [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect, HNTB Corp.	143		

**SUBTOTAL \$** 629

\*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

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Village Laguna, Inc.	I.D. NUMBER 990381
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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/6/2023	Terry Mudge, LLC [REDACTED] Newport Beach, CA 92660	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		150		
2/17/2023	Barbara Metzger [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	250		
2/28/2023	Toni Iseman [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	150		
3/20/2023	Neil & Virginia Fitzpatrick [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	500		
4/11/2023	Glenn & Chris Etow [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	500		

**SUBTOTAL \$ 1550**

\*Contributor Codes  
IND – Individual  
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(other than PTY or SCC)  
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PTY – Political Party  
SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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I.D. NUMBER 990381	

NAME OF FILER  
Village Laguna, Inc.

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/11/2023	Karen Dennis [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	ESL coordinator, Santa Ana college	150		
4/11/2023	Ed Merrilees [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	150		
4/11/2023	Clark & Greg Collins [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Collins Design & Development	250		
4/11/2023	Ruth Stafford [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self-employed psychologist	150		
1/10/2023	Kurt Wiese [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	250		
<b>SUBTOTAL \$</b>				<u>950</u>		

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**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Village Laguna, Inc.

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/10/2023	Michael Pinto [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	entrepreneur & investor	250		
1/10/2023	Carolyn Burris [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Broker, Nevada Regional Economic Center	150		
1/10/2023	Sue Garber [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	200		
1/10/2023	Ann Christoph [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	self-employed landscape architect	100		
1/17/2023	Angelique Hoskins [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	300		
<b>SUBTOTAL \$</b>				<u>1,000</u>		

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 (other than PTY or SCC)  
 OTH – Other (e.g., business entity)  
 PTY – Political Party  
 SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Village Laguna, Inc.	I.D. NUMBER 990381
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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/4/2023	Katherine Clark [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	143		
4/17/2023	Anne Earhart [REDACTED] Corona del Mar, CA 92625	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	unemployed	143		
4/12/2023	Anne Earhart [REDACTED] Corona del Mar, CA 92625	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	unemployed	60		
4/28/2023	Pamela Hagen [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	72		
2/6/2023	Pamela Hagen [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	60		

**SUBTOTAL \$** 478

\*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



**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER Village Laguna, Inc.	I.D. NUMBER 990381
---------------------------------------	-----------------------

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
5/5/2023	Barbara & Greg MacGillivray [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Chairman/director Macgillivray Freeman Films	280		
4/28/2023	Pamela Horowitz [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Independent medical practice	70		
1/3/2023	Pamela Horowitz [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Independent medical practice	40		
5/21/2023	Carol Nilson [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	140		
5/16/2023	Meg Monahan [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	143		

**SUBTOTAL \$** 673

\*Contributor Codes  
IND – Individual  
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(other than PTY or SCC)  
OTH – Other (e.g., business entity)  
PTY – Political Party  
SCC – Small Contributor Committee

**Schedule A (Continuation Sheet)  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE A (CONT.)

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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NAME OF FILER  
Village Laguna, Inc.

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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
1/17/2023	John Trautman [REDACTED] Laguna Beach, CA 92651	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Architect, HNTB Corp.	250		
1/17/2023	Bonnie McFarland [REDACTED] Laguna Beach, CA	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	150		
5/14/2023	Armando Baez	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	retired	143		
3/21/2023	Hano Family Trust [REDACTED] Piermont, NY 10968	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		77,892		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC				

**SUBTOTAL \$ 78,435**

\*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

**Schedule E  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
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	I.D. NUMBER 990381

SEE INSTRUCTIONS ON REVERSE  
NAME OF FILER

Village Laguna, Inc.

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

- |  |   |   |
|--|---|---|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| ND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| ID independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| EG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| T campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Ralph's Market 700 S. Coast Highway, Laguna Beach, CA 92651	FND		426
Costco 33961 Doheny Park Road, San Juan Capistrano, CA 92675	FND		134
Square Space 8 Clarkson St., New York, NY, 10014	WEB		174

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

**SUBTOTAL \$ 734**

**Schedule E Summary**

. Itemized payments made this period. (Include all Schedule E subtotals.).....	\$ <u>25,859</u>
. Unitemized payments made this period of under \$100.....	\$ <u>360</u>
. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).).....	\$ _____
. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.).....	<b>TOTAL \$ <u>26,219</u></b>

**Schedule E  
Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>12</u> of <u>15</u>
	I.D. NUMBER 990381

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Village Laguna, Inc.

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

- |  |   |   |
|--|---|---|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
| ND fundraising events  | POL polling and survey research               | TRS staff/spouse travel, lodging, and meals                   |
| ID independent expenditure supporting/opposing others (explain)* | POS postage, delivery and messenger services  | TSF transfer between committees of the same candidate/sponsor |
| EG legal defense   | PRO professional services (legal, accounting) | VOT voter registration  |
| T campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Charles Michael Murray 1375 Laguna Canyon Road, Laguna Beach, CA 92651	WEB			4,697
			electronic ads	1,175
Firebrand Media, Inc. 580 Broadway St., Suite 301, Laguna Beach, CA 92651	PRT			1,380
Best Chauffered World Wide Limousine 1701 S. Birch Street, Santa Ana, CA 92652	FND			4,169
Unitarian Church 129 Cypress, Laguna Beach, CA 92651	MTG			350

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

**SUBTOTAL \$** 11,771

FPPC Form 460 (Jan/2016)

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

www.fppc.ca.gov

**Schedule E  
Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b> Page <u>13</u> of <u>15</u>
I.D. NUMBER 990381	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Village Laguna, Inc.

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- |  |   |   |
|--|---|---|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
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| T campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
Tix, Inc. 400 W. Broadway, Suite 3000, Long Beach, CA 90802	FND		243
Daniel Dubois 6B Liberty, Suite 130, Aliso Viejo, CA, 92656	PRO		400
U. S. Postal Service	POS		1,466
Laguna Beach Digital 1705 South Coast Hwy., Laguna Beach, CA 92651	MBR		929
Laguna Beach High School Scholarship Fund 525 Park Ave., Laguna Beach, CA 92651	CTB		1,000

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

**SUBTOTAL \$ 4,038**

FPPC Form 460 (Jan/2016))

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**Schedule E  
Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>1/1/2023</u> through <u>6/30/2023</u>	<b>CALIFORNIA FORM 460</b>
	Page <u>14</u> of <u>15</u>
	I.D. NUMBER 990381

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Village Laguna, Inc.

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

- |  |   |   |
|--|---|---|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
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| T campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE	OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Laguna Beach Recreation 380 3rd Street, Laguna Beach, CA 92651	FND		meter bags	240
Copy & Print 240 Beach, Laguna Beach, C 92651	FND			614
Nova Casualty Company 440 Lincoln Street, Worcester, MA, 01653			insurance	974
Laguna Beach Digital 1705 South Coast Hwy., Laguna Beach, CA 92651	MBR			929
Crispimaging 3180 Pullman Street, Costa Mesa, CA 92626	FND			134

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

**SUBTOTAL \$** 1,962

FPPC Form 460 (Jan/2016)

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www.fppc.ca.gov

**Schedule E  
Continuation Sheet)  
Payments Made**

Amounts may be rounded  
to whole dollars.

SCHEDULE E (CONT.)

Statement covers period  
from 1/1/2023  
through 6/30/2023

**CALIFORNIA 460  
FORM**

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SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Village Laguna, Inc.

I.D. NUMBER

990381

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

- |  |   |   |
|--|---|---|
| MP campaign paraphernalia/misc.                                  | MBR member communications                     | RAD radio airtime and production costs                        |
| NS campaign consultants  | MTG meetings and appearances                  | RFD returned contributions                                    |
| TB contribution (explain nonmonetary)*                           | OFC office expenses                           | SAL campaign workers' salaries                                |
| VC civic donations   | PET petition circulating                      | TEL t.v. or cable airtime and production costs                |
| IL candidate filing/ballot fees                                  | PHO phone banks                               | TRC candidate travel, lodging, and meals                      |
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| T campaign literature and mailings                               | PRT print ads                                 | WEB information technology costs (internet, e-mail)           |

NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR	DESCRIPTION OF PAYMENT	AMOUNT PAID
City of Laguna Beach 105 Forest Ave., Laguna Beach, CA 92651 +		filing fee for appeal	2,000
Rivanna Designs 3009 Lincoln Ave., Richmond, VA 23228		plagues for Charm House Tour homes	354
Strumwasser & Wooster 1250 6th Street, Santa Monica, CA 90401 +	LEG		5,000

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

**SUBTOTAL \$ 7,354**