

# Recipient Committee Campaign Statement Cover Page

(Government Code Sections 84200-84216.5)

**Statement covers period**  
 from 07/01/2019  
 through 12/31/2019

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



Page 1 of 9  
 For Official Use Only

SEE INSTRUCTIONS ON REVERSE

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

- |   |  |
|---|--|
| <input type="checkbox"/> Officeholder, Candidate Controlled Committee<br><input type="radio"/> State Candidate Election Committee<br><input type="radio"/> Recall<br><small>(Also Complete Part 5)</small>                  | <input type="checkbox"/> Primarily Formed Ballot Measure Committee<br><input type="radio"/> Controlled<br><input type="radio"/> Sponsored<br><small>(Also Complete Part 6)</small> |
| <input checked="" type="checkbox"/> General Purpose Committee<br><input checked="" type="radio"/> Sponsored<br><input type="radio"/> Small Contributor Committee<br><input type="radio"/> Political Party/Central Committee | <input type="checkbox"/> Primarily Formed Candidate/ Officeholder Committee<br><small>(Also Complete Part 7)</small>   |

**2. Type of Statement:**

- |   |   |
|---|---|
| <input type="checkbox"/> Preelection Statement  | <input type="checkbox"/> Quarterly Statement                                  |
| <input checked="" type="checkbox"/> Semi-annual Statement   | <input type="checkbox"/> Special Odd-Year Report                              |
| <input type="checkbox"/> Termination Statement<br><small>(Also file a Form 410 Termination)</small> | <input type="checkbox"/> Supplemental Preelection Statement - Attach Form 495 |
| <input type="checkbox"/> Amendment (Explain below)  |   |

**3. Committee Information**

I.D. NUMBER  
 1346972

COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE)  
 Laguna Beach Police Employees Association PAC

STREET ADDRESS (NO P.O. BOX)  
 1121 L Street, Ste. 200

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sacramento	CA	95814	(916) 556-1776

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

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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OPTIONAL: FAX / E-MAIL ADDRESS  
 (916) 556-1233 / ordoslaw@jps.net

**Treasurer(s)**

NAME OF TREASURER  
 Wayne Ordos

MAILING ADDRESS  
 1121 L Street, Ste. 200

CITY	STATE	ZIP CODE	AREA CODE/PHONE
Sacramento	CA	95814	(916) 556-1776

NAME OF ASSISTANT TREASURER, IF ANY

MAILING ADDRESS

CITY	STATE	ZIP CODE	AREA CODE/PHONE
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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 1/5/2020  
 Date

By Wayne Ordos  
 Signature of Treasurer or Assistant Treasurer

Executed on \_\_\_\_\_  
 Date

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

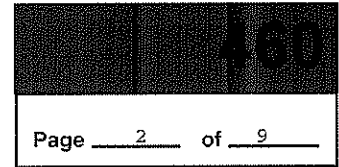
Executed on \_\_\_\_\_  
 Date

By \_\_\_\_\_  
 Signature of Controlling Officeholder, Candidate, State Measure Proponent

Executed on \_\_\_\_\_  
 Date

By \_\_\_\_\_  
 Signature of Controlling Officeholder, Candidate, State Measure Proponent

**Recipient Committee  
Campaign Statement  
Cover Page — Part 2**



**5. Officeholder or Candidate Controlled Committee**

NAME OF OFFICEHOLDER OR CANDIDATE

OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTRICT NUMBER IF APPLICABLE)

RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET) CITY STATE ZIP

**Related Committees Not Included in this Statement:** *List any committees not included in this statement that are controlled by you or are primarily formed to receive contributions or make expenditures on behalf of your candidacy.*

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?  
 YES  NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

COMMITTEE NAME I.D. NUMBER

NAME OF TREASURER CONTROLLED COMMITTEE?  
 YES  NO

COMMITTEE ADDRESS STREET ADDRESS (NO P.O. BOX)

CITY STATE ZIP CODE AREA CODE/PHONE

**6. Primarily Formed Ballot Measure Committee**

NAME OF BALLOT MEASURE

BALLOT NO. OR LETTER	JURISDICTION	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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Identify the controlling officeholder, candidate, or state measure proponent, if any.

NAME OF OFFICEHOLDER, CANDIDATE, OR PROPONENT

OFFICE SOUGHT OR HELD	DISTRICT NO. IF ANY
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**7. Primarily Formed Candidate/Officeholder Committee** *List names of officeholder(s) or candidate(s) for which this committee is primarily formed.*

NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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NAME OF OFFICEHOLDER OR CANDIDATE	OFFICE SOUGHT OR HELD	<input type="checkbox"/> SUPPORT <input type="checkbox"/> OPPOSE
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*Attach continuation sheets if necessary*

**Campaign Disclosure Statement  
Summary Page**

Amounts may be rounded  
to whole dollars.

Statement covers period from <u>07/01/2019</u> through <u>12/31/2019</u>	<b>460</b>
Page <u>3</u> of <u>9</u>	
	I.D. NUMBER <u>1346972</u>

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Laguna Beach Police Employees Association PAC

**Contributions Received**

	Column A TOTAL THIS PERIOD (FROM ATTACHED SCHEDULES)	Column B CALENDAR YEAR TOTAL TO DATE
1. Monetary Contributions ..... Schedule A, Line 3	\$ <u>4,207.92</u>	\$ <u>8,966.89</u>
2. Loans Received ..... Schedule B, Line 3	<u>0.00</u>	<u>0.00</u>
3. SUBTOTAL CASH CONTRIBUTIONS ..... Add Lines 1 + 2	\$ <u>4,207.92</u>	\$ <u>8,966.89</u>
4. Nonmonetary Contributions ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
5. TOTAL CONTRIBUTIONS RECEIVED ..... Add Lines 3 + 4	\$ <u>4,207.92</u>	\$ <u>8,966.89</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
6. Payments Made ..... Schedule E, Line 4	\$ <u>0.00</u>	\$ <u>50.00</u>
7. Loans Made ..... Schedule H, Line 3	<u>0.00</u>	<u>0.00</u>
8. SUBTOTAL CASH PAYMENTS ..... Add Lines 6 + 7	\$ <u>0.00</u>	\$ <u>50.00</u>
9. Accrued Expenses (Unpaid Bills) ..... Schedule F, Line 3	<u>0.00</u>	<u>0.00</u>
10. Nonmonetary Adjustment ..... Schedule C, Line 3	<u>0.00</u>	<u>0.00</u>
11. TOTAL EXPENDITURES MADE ..... Add Lines 8 + 9 + 10	\$ <u>0.00</u>	\$ <u>50.00</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**

12. Beginning Cash Balance ..... Previous Summary Page, Line 16	\$ <u>24,832.84</u>
13. Cash Receipts ..... Column A, Line 3 above	<u>4,207.92</u>
14. Miscellaneous Increases to Cash ..... Schedule I, Line 4	<u>0.00</u>
15. Cash Payments ..... Column A, Line 8 above	<u>0.00</u>
16. ENDING CASH BALANCE ..... Add Lines 12 + 13 + 14, then subtract Line 15	\$ <u>29,040.76</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.

17. LOAN GUARANTEES RECEIVED ..... Schedule B, Part 2	\$ <u>0.00</u>
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**Cash Equivalents and Outstanding Debts**

18. Cash Equivalents ..... See instructions on reverse	\$ <u>0.00</u>
19. Outstanding Debts ..... Add Line 2 + Line 9 in Column B above	\$ <u>0.00</u>

**Schedule A  
Monetary Contributions Received**

Amounts may be rounded  
to whole dollars.

Statement covers period		
from	07/01/2019	
through	12/31/2019	Page 4 of 9

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER Laguna Beach Police Employees Association PAC	I.D. NUMBER 1346972
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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)
07/22/2019 12/30/2019	Lawrence Bammer 505 Forest Ave 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	Police Officer City of Laguna Beach	350.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	725.00	
07/22/2019 12/30/2019	Aureliano Becerra 505 Forest Ave 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	Jailer City of Laguna Beach	70.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	145.00	
07/22/2019 12/30/2019	Kristen Berry 505 Forest Ave 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	Civilian Supervisor City of Laguna Beach	210.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	435.00	
07/22/2019 12/30/2019	Joy Butterfield 505 Forest Ave 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	Police Officer City of Laguna Beach	70.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	145.00	
07/22/2019 12/30/2019	Angela Cleveland 505 Forest Ave 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	Dispatcher City of Laguna Beach	171.50  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	355.25	

**SUBTOTAL \$ 871.50**

**Schedule A Summary**

1. Amount received this period – itemized monetary contributions. (Include all Schedule A subtotals.) .....	\$	3,883.50
2. Amount received this period – unitemized monetary contributions of less than \$100 .....	\$	324.42
3. Total monetary contributions received this period. (Add Lines 1 and 2. Enter here and on the Summary Page, Column A, Line 1.) .....	<b>TOTAL \$</b>	<b>4,207.92</b>

\*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**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2019	
through	12/31/2019	Page <u>5</u> of <u>9</u>

NAME OF FILER Laguna Beach Police Employees Association PAC	I.D. NUMBER 1346972
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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)
07/22/2019 12/30/2019	Jason Farris 505 Forest Ave 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	Police Officer City of Laguna Beach	280.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	580.00	
07/22/2019 12/30/2019	Darin Germaine 505 Forest Ave 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	Police Officer City of Laguna Beach	350.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	725.00	
07/22/2019 12/30/2019	Brian Griep 505 Forest Ave 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	Police Officer City of Laguna Beach	140.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	290.00	
07/22/2019 12/30/2019	Alicia Gutierrez 505 Forest Ave 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	Dispatcher City of Laguna Beach	70.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	145.00	
07/22/2019 12/30/2019	Ryan Hotchkiss 505 Forest Ave 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	Police Officer City of Laguna Beach	171.50  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	355.25	
<b>SUBTOTAL \$</b>				1,011.50		

\*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**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period	
from <u>07/01/2019</u>	
through <u>12/31/2019</u>	
Page <u>6</u> of <u>9</u>	

NAME OF FILER Laguna Beach Police Employees Association PAC	I.D. NUMBER 1346972
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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)
07/22/2019 12/30/2019	Wade Kraus 505 Forest Ave 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	Police Employee City of Laguna Beach	70.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	145.00	
07/22/2019 12/30/2019	Lana Laser 505 Forest Ave 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	Dispatcher City of Laguna Beach	73.50  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	152.25	
07/22/2019 12/30/2019	Steven McDowell 505 Forest Ave 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	Dispatcher City of Laguna Beach	140.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	290.00	
07/22/2019 12/30/2019	David McGill 505 Forest Ave 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	Police Officer City of Laguna Beach	280.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	580.00	
07/22/2019 12/30/2019	Tom McGuire 505 Forest Ave 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	Police Officer City of Laguna Beach	140.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	290.00	

**SUBTOTAL \$ 703.50**

\*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**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		<b>CALIFORNIA FORM 460</b>
from	07/01/2019	
through	12/31/2019	Page <u>7</u> of <u>9</u>

NAME OF FILER  Laguna Beach Police Employees Association PAC	I.D. NUMBER  1346972
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DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR <small>(IF COMMITTEE, ALSO ENTER I.D. NUMBER)</small>	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER <small>(IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)</small>	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO DATE CALENDAR YEAR <small>(JAN. 1 - DEC. 31)</small>	PER ELECTION TO DATE <small>(IF REQUIRED)</small>
07/22/2019 12/30/2019	Kyle Milot 505 Forest Ave 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	Police Officer City of Laguna Beach	70.00  <small>Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-</small>	145.00	
07/22/2019 12/30/2019	Linda Ochaita 505 Forest Ave 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	Jailer City of Laguna Beach	72.00  <small>Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-</small>	154.50	
07/22/2019 12/30/2019	Andrew Peck 505 Forest Ave 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	Police Officer City of Laguna Beach	140.00  <small>Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-</small>	290.00	
07/22/2019 12/30/2019	Jennifer Querry 505 Forest Ave 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	Dispatcher City of Laguna Beach	70.00  <small>Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-</small>	145.00	
07/22/2019 12/30/2019	Ryan Radel 505 Forest Ave 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	Police Officer City of Laguna Beach	73.50  <small>Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-</small>	152.25	

**SUBTOTAL \$**      425.50

\*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**

SCHEDULE A (CONT.)

Amounts may be rounded  
to whole dollars.

Statement covers period		
from	07/01/2019	
through	12/31/2019	Page <u>8</u> of <u>9</u>

NAME OF FILER Laguna Beach Police Employees Association PAC	I.D. NUMBER 1346972
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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)
07/22/2019 12/30/2019	Darrel Short 505 Forest Ave 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	Police Officer City of Laguna Beach	280.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	580.00	
07/22/2019 12/30/2019	Michael Short 505 Forest Ave 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	Police Officer City of Laguna Beach	140.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	290.00	
07/22/2019 12/30/2019	Mary Spease 505 Forest Ave 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	Parking Services Officer City of Laguna Beach	0.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	120.00	
07/22/2019 12/30/2019	Thomas Spratt 505 Forest Ave 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	Police Officer City of Laguna Beach	381.50  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	790.25	
07/22/2019 12/30/2019	Jordan Villwock 505 Forest Ave 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	Emergency Coordinator City of Laguna Beach	70.00  Received through intermediary: Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	145.00	
<b>SUBTOTAL \$</b>				871.50		

\*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 C  
Nonmonetary Contributions Received**

Amounts may be rounded  
to whole dollars.

SCHEDULE C

Statement covers period		
from	07/01/2019	
through	12/31/2019	
Page 9 of 9		
NAME OF FILER		I.D. NUMBER
Laguna Beach Police Employees Association PAC		1346972

SEE INSTRUCTIONS ON REVERSE

Laguna Beach Police Employees Association PAC

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)	DESCRIPTION OF GOODS OR SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
07/17/2019	Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Administrative Services	1,300.00 Memo	5,800.00	
10/04/2019	Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Administrative Services	1,000.00 Memo	5,800.00	
11/04/2019	Laguna Beach Police Employees Association 505 Forest Ave. Laguna Beach, CA 92651-	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		Administrative Services	500.00 Memo	5,800.00	
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC					
Attach additional information on appropriately labeled continuation sheets.					<b>SUBTOTAL \$</b>	0.00	

**Schedule C Summary**

- Amount received this period – itemized nonmonetary contributions.  
(Include all Schedule C subtotals.) ..... \$ 0.00
- Amount received this period – unitemized nonmonetary contributions of less than \$100 ..... \$ 0.00
- 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 \$** 0.00

\*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

10/10/10