R	ecipient Committee				COVER PAGE
				Date Stamp	100
	ampaign Statement				400
(Go	over Page vernment Code Sections 84200-84216.5)		-	RECEIVED	
		Statement covers period	Date of election if applicable: (Month, Day, Year)	SEP 2 7 2018	Page1 of12
		from07/01/2018	. (	SEP Z 1 ZOIO	For Official Use Only
SEE	INSTRUCTIONS ON REVERSE	through09/22/2018	11/06/2018	City Clerk's Office City of Laguna Beach.	
1.	Type of Recipient Committee: All Committees -	Complete Parts 1, 2, 3, and 4.	2. Type of Statement:		
	☐ Officeholder, Candidate Controlled Committee ☐ State Candidate Election Committee ☐ Recall (Also Contplete Part 5)  ☑ General Purpose Committee ☑ Sponsored ☐ Small Contributor Committee ☐ Political Party/Central 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 Ter     □ Amendment (Explain bel)	Spectors Support State	terly Statement ial Odd-Year Report blemental Preelection ment - Attach Form 495
3.	Committee Information	I.D. NUMBER 1405838	Treasurer(s)		
	COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTE	EE)	NAME OF TREASURER		
	Liberate Laguna PAC		Stacy Owens		
			MAILING ADDRESS		
			5940 College Ave, Suit	e F	
	STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CO	ODE AREA CODE/PHONE
	410 Broadway, Suite 200		Oakland	CA 946	18 (510)423-4300
		CODE AREA CODE/PHONE	NAME OF ASSISTANT TREASURE	R, IF ANY	
		2651 (949)416-0847	Peter Sullivan		
	MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.C	D. BOX	MAILING ADDRESS 5940 College Ave, Suit	e F	
	CITY STATE ZIP	CODE AREA CODE/PHONE	CITY	STATE ZIP CO	ODE AREA CODE/PHONE
			Oakland	CA 946	18 (510)423-4300
	OPTIONAL: FAX / E-MAIL ADDRESS sowens&seowenscompany.com		OPTIONAL: FAX / E-MAIL ADDRE	SS	
4.	Verification				
	have used all reasonable diligence in preparing and review under penalty of perjury under the laws of the State of Califo	ving this statement and to the best of my kn rnia that the foregoing is true and correct.	owle	attached schedu	les is true and complete. I certify
	Executed on09/27/2018Date	Ву	Orginative of Headures of Passacian His	Saout Ci	
	Executed onDate	BySignature of Co	ontrolling Officeholder, Candidate, State Measure Propo	nent or Responsible Officer of Sponsor	and the state of t
	Executed on	Ву	Signature of Controlling Officeholder, Candidate, State	e Measure Proponent	
	Executed onDate	Ву	Signature of Controlling Officeholder, Candidate, State	a Measure Proponent	FPPC Form 460 (Jan/2016)

Officeholder or Candidate Controlled Com	mittee	6.	Primarily Formed Ballo	ot Measure	Committee	
NAME OF OFFICEHOLDER OR CANDIDATE			NAME OF BALLOT MEASURE			
OFFICE SOUGHT OR HELD (INCLUDE LOCATION AND DISTI	RICT NUMBER IF APPLICABLE)		BALLOT NO. OR LETTER	JURISDICTIO	N	SUPPORT OPPOSE
RESIDENTIAL/BUSINESS ADDRESS (NO. AND STREET)	CITY STATE ZIP		Identify the controlling off	iceholder, car	ndidate, or state measu	re proponent, if any.
			NAME OF OFFICEHOLDER, CAN	IDIDATE, OR PR	OPONENT	
Related Committees Not Included in this S not included in this statement that are controlled by yo contributions or make expenditures on behalf of your of	u or are primarily formed to receive		OFFICE SOUGHT OR HELD		DISTRICT N	NO. IF ANY
COMMITTEE NAME	I.D. NUMBER					
NAME OF TREASURER	CONTROLLED COMMITTEE?	7.	Primarily Formed Cand	) for which this	s committee is primarily f	formed.
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	BOX)		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HEI	SUPPORT OPPOSE
CITY STATE ZIP  COMMITTEE NAME	CODE AREA CODE/PHONE		NAME OF OFFICEHOLDER OR C	ANDIDATE	OFFICE SOUGHT OR HE	SUPPORT OPPOSE
	I.D. NUMBER		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HEI	D SUPPORT OPPOSE
NAME OF TREASURER  COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	CONTROLLED COMMITTEE?		NAME OF OFFICEHOLDER OR C	CANDIDATE	OFFICE SOUGHT OR HEI	D SUPPORT OPPOSE
COMMITTEE ADDRESS STREET ADDRESS (NO P.O.	ROX)				<u> </u>	
CITY STATE ZIP	CODE AREA CODE/PHONE		Attac	ch continuatio	on sheets if necessary	

<b>Campaign Disclosure</b>	Statement
Summary Page	

Amounts may be rounded to whole dollars.

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Liberate Laguna PAC

through 09/22/2018 Page 3 of 12

I.D. NUMBER

1405838

1. Monetary Contributions	Liberate Laguna PAC			1405838
1. Monetary Contributions	Contributions Received	TOTAL THIS PERIOD	CALENDAR YEAR	· · · · · · · · · · · · · · · · · · ·
2. Loans Received			\$ 42,403.00	
Received \$ \$  Add Lines 3 + 4 \$ \$ 30,000.00  5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ 37,225.00  Expenditures Made 6. Payments Made 8. Schedule E, Line 4 \$ 10,794.06 8. SUBTOTAL CASH PAYMENTS Add Lines 6 + 7 \$ 10,794.06 9. Accrued Expenses (Unpaid Bills) Schedule E, Line 3 30,000.00 10. Nonmonetary Adjustment Schedule C, Line 3 30,000.00 11 TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ 42,187.32  Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 18 \$ 13,231.15 13. Cash Received \$ \$ 21. Expenditures Made \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	2. Loans Received Schedule B, Line 3	0.00	0.00	1/1 through 6/30 //1 to Date
4. Nonmonetary Contributions Schedule C, Line 3 30,000.00 30,000.00 20 21. Expenditures Made \$ 5. TOTAL CONTRIBUTIONS RECEIVED Add Lines 3 + 4 \$ 37,225.00 \$ 72,403.00 \$ 21. Expenditures Made \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	3. SUBTOTAL CASH CONTRIBUTIONS Add Lines 1 + 2	\$ 7,225.00	\$ 42,403.00	
Expenditures Made 6. Payments Made 7. Loans Made 8. Substotal Cash Payments 9. Accrued Expenses (Unpaid Bills) 10. Nonmonetary Adjustment 10. Nonmonetary Adjustment 11. TOTAL EXPENDITURES MADE 12. Beginning Cash Balance 13. Cash Receipts 14. Miscellaneous Increases to Cash 15. Cash Payments 16. ENDING CASH BALANCE 17. Loans Gulard Statement 18. Cash Equivalents and Outstanding Debts 18. Cash Equivalents 19. (20.00  10. (20.00	4. Nonmonetary Contributions Schedule C, Line 3	30,000.00	30,000.00	21. Expenditures
6. Payments Made Schedule E, Line 4 \$ 10,784.06 \$ 32,730.91 Candidates  7. Loans Made Schedule H, Line 3 0.00 0.00  8. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ 10,784.06 \$ 32,730.91 (if subjection voluntary Expenditures Made* (if subject to Voluntary Expenditure Limit)  9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 1,403.26 2.361.16 10. Nonmonetary Adjustment Schedule F, Line 3 30,000.00 30,000.00 11 TOTAL EXPENDITURES MADE Add Lines 8+9+10 \$ 42,187.32 \$ 65,092.07	5. TOTAL CONTRIBUTIONS RECEIVED	\$37,225.00	\$ 72,403.00	Made \$ \$
7 Loans Made Schedule H, Line 3 0.00 0.00 8. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ 10,784.06 \$ 32,730.91 9. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 1,403.26 2.361.16 10. Nonmonetary Adjustment Schedule C, Line 3 30,000.00 11. TOTAL EXPENDITURES MADE Add Lines 8+9+10 \$ 42,187.32 \$ 65,092.07  Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 18 13,231.15 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 50,600 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 fligures 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 Cilines 2, 7, and 9 (if any).	•		4-9-4	Expenditure Limit Summary for State
3. SUBTOTAL CASH PAYMENTS Add Lines 6+7 \$ 10,784.06 \$ 32,730.91 3. Accrued Expenses (Unpaid Bills) Schedule F, Line 3 1,403.26 2,361.16 3. Oxformed Expenses (Unpaid Bills) Schedule F, Line 3 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 30,000.00 42,187.32 \$ 65,092.07  Current Cash Statement 12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 13,231.15 13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 9,672.09 If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00 Cash Equivalents Add United The Institutions on reverse \$ 0.00 Cash Equivalents See instructions on reverse \$ 0.00 Cash Equivalents S			\$ 32,730.91	Candidates
3. SUBTOTAL CASH PAYMENTS. 3. Add Lines 6+7 \$ 10,784.06 \$ 32,730.91 (if subject to Voluntary Expenditure Limit) 3. Accrued Expenses (Unpaid Bills) 3. Accrued Expenses (Unpaid Bills) 3. Schedule F, Line 3 3. 0,000.00 3. 0,0			0.00	22 Cumulativa Evnandituras Mada*
10. Nonmonetary Adjustment Schedule C, Line 3 30,000.00 30,000.00 (mm/ddlyy)  11. TOTAL EXPENDITURES MADE Add Lines 8 + 9 + 10 \$ 42,187.32 \$ 65,092.07 \$    Current Cash Statement   12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 13,231.15   13. Cash Receipts Column A, Line 3 above   7,225.00   14. Miscellaneous Increases to Cash Schedule I, Line 4   0.00   10. To calculate Column B of your last reported in Column A to the corresponding amounts from Column B of your last report. Some amounts in Column B of your			\$ 32,730.91	
11. TOTAL EXPENDITURES MADE	9. Accrued Expenses (Unpaid Bills)	1,403.26	2,361.16	
Current Cash Statement  12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 13,231.15  13. Cash Receipts Column A, Line 3 above 7,225.00  14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00  15. Cash Payments Column A, Line 8 above 10,784.06  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 9,672.09  If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00  Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse \$ 0.00  Cash Equivalents See instructions on reverse \$ 0.00  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 filled for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).				(mm/dd/yy)
12. Beginning Cash Balance Previous Summary Page, Line 16 \$ 13,231.15  13. Cash Receipts Column A, Line 3 above 7,225.00  14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00  15. Cash Payments Column A, Line 8 above 10,784.06  16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 \$ 9,672.09  If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00  Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse \$ 0.00	11. TOTAL EXPENDITURES MADE	\$ 42,187.32	\$ 65,092.07	\$
13. Cash Receipts	Current Cash Statement			\$
13. Cash Receipts Column A, Line 3 above 14. Miscellaneous Increases to Cash Schedule I, Line 4 0.00 15. Cash Payments Column A, Line 8 above 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 9,672.09 If this is a termination statement, Line 16 must be zero.  15. Cash Equivalents and Outstanding Debts 18. Cash Equivalents and Outstanding Debts 19. Cash Equivalents See instructions on reverse \$ 0.00 15. Cash Equivalents See instructions on reverse \$ 0.00	12. Beginning Cash Balance Previous Summary Page, Line 16	\$13,231.15	To calculate Column B. add	
14. Miscellaneous Increases to Cash Schedule I, Line 4 15. Cash Payments Column A, Line 8 above 10,784.06 16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15 9,672.09  If this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00  Cash Equivalents and Outstanding Debts  18. Cash Equivalents See instructions on reverse \$ 0.00  The form 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).	13. Cash Receipts	7,225.00	amounts in Column A to the	
15. Cash Payments	14. Miscellaneous Increases to Cash Schedule I, Line 4	0.00	from Column B of your last	
If this is a termination statement, Line 16 must be zero.  If this is a termination statement, Line 16 must be zero.  If LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00  Cash Equivalents and Outstanding Debts  See instructions on reverse \$ 0.00  Igures 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).	15. Cash Payments	10,784.06		
th this is a termination statement, Line 16 must be zero.  17. LOAN GUARANTEES RECEIVED	16. ENDING CASH BALANCE Add Lines 12 + 13 + 14, then subtract Line 15	\$9,672.09	figures that should be	
17. LOAN GUARANTEES RECEIVED Schedule B, Part 2 \$ 0.00 for this calendar year, only carry over the amounts from Lines 2, 7, and 9 (if any).	If this is a termination statement, Line 16 must be zero.		period amounts. If this is	
Cash Equivalents and Outstanding Debts  18. Cash Equivalents	17 LOAN GUARANTEES RECEIVED Schedule B, Part 2	\$0.00	for this calendar year, only	
	·		from Lines 2, 7, and 9 (if	
19. Outstanding Debts				·
	19. Outstanding Debts Add Line 2 + Line 9 in Column B above	\$ 2,361.16		

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

Schedule		Amoun	ts may be rounded				SCHEDULE A
wonetary	Contributions Received		whole dollars.	Statement cove	•		ORNIA JRM
	DNS ON REVERSE			through _09/22/26	018	Page .	4 of12
NAME OF FILER						I.D. NU	MBER
Liberate La	guna PAC	1				14058	38
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	PER ELECTION TO DATE (IF REQUIRED)
09/04/2018	Douglas Cortez	⊠IND □COM □OTH □PTY □SCC	Energy Consultant Hensley Energy Consulting	1,000.00	1,0	000.00	
08/13/2018	Leslie Ray	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Independent Investor Self Employed	5,000.00	5,(	000.00	
09/16/2018	Phil Shalala -	⊠IND ☐COM ☐OTH ☐PTY ☐SCC	Private Equity Self-Employed	200.00	2	200.00	
08/28/2018	Cindy Shopoff	⊠IND □COM □OTH □PTY □SCC	Principal Shopoff Realty Investments	1,000.00	8,5	500.00	
		□IND □COM □OTH □PTY □SCC					
			SUBTOTAL\$	7,200.00	7		
1. Amount re (Include al	A Summary ceived this period – itemized monetary contributions.  Schedule A subtotals.)  ceived this period – unitemized monetary contributions				IND- COM	(other t	
3. Total mone	etary contributions received this period.  I and 2. Enter here and on the Summary Page, Colur		·	7,225.00	PTY-	-Political	Party ontributor Committee

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

Schedu			Amounts may be rounded	<del> </del>	Shahara a			SCHEDULE
IVIIIIVI	netary Contributions Received		to whole dollars.		Statement covers p			
SEE INSTRUC	TIONS ON REVERSE				through 09/22/20	18	Page	5 of <u>12</u>
							I.D. NUMBI	ER
Liberate 1	Laguna PAC			· · · · · · · · · · · · · · · · · · ·			1405838	
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)	DESCRIPTION OF GOODS OR SERVIC		DA CALEND	ATIVE TO ATE AR YEAR DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
09/19/2018	Shopoff Enterprises, Inc.	□IND □COM ☑OTH □PTY □SCC		General Consult Services	ing 30,000.00	3	0,000.00	
		□IND □COM □OTH □PTY □SCC				,		
		□IND □COM □OTH □PTY □SCC	·					
		□IND □COM □OTH □PTY □SCC						
Attach ad	ditional information on appropriately labe	led continuati	ion sheets.	SUBTOT	AL\$ 30,000.00			
1. Amount	e C Summary received this period – itemized nonmonetar all Schedule C subtotals.)				\$\$	IND	ntributor Cod - Individual I – Recipient	Committee
	received this period – unitemized nonmonet		ns of less than \$100	***************************************	.\$			an PTY or SCC) g., business entity) arty
	nmonetary contributions received this period es 1 and 2. Enter here and on the Summary		n A. Lines 4 and 10.)	ΤΟΤΑΙ	\$ 30,000.0	i i	- Small Con	tributor Committee

Schedule D SCHEDULE D Summary of Expenditures Statement covers period CALIFORNIA Amounts may be rounded Supporting/Opposing Other to whole dollars. FORM 07/01/2018 Candidates, Measures and Committees from through 09/22/2018 SEE INSTRUCTIONS ON REVERSE Page 6 NAME OF FILER I.D. NUMBER Liberate Laguna PAC 1405838 CUMULATIVE TO DATE PER ELECTION NAME OF CANDIDATE, OFFICE, AND DISTRICT, OR DATE DESCRIPTION TYPE OF PAYMENT AMOUNT THIS CALENDAR YEAR TO DATE MEASURE NUMBER OR LETTER AND JURISDICTION. (IF REQUIRED) PERIOD (JAN. 1 - DEC. 31) (IF REQUIRED) OR COMMITTEE 09/21/2018 Peter Blake Newspaper Ad 880.00 880.00 Monetary City Council Member City of Laguna Beach Contribution Nonmonetary Contribution Independent X Support Expenditure ☐ Oppose 09/21/2018 Sue Kempf Newspaper Ad 880.00 880.00 Monetary City Council Member Contribution City of Laguna Beach Nonmonetary Contribution X Independent Expenditure X Support Oppose Monetary Contribution Nonmonetary Contribution Independent Expenditure □ Support Oppose SUBTOTAL \$ 1,760.00 Schedule D Summary 1. Contributions and independent expenditures made this period of \$100 or more. (Include all Schedule D subtotals.)......\$ 1,760.00 2. Unitemized contributions and independent expenditures made this period of under \$100 .......\$

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

مسرو و الرحم								SCHEDULE
Schedule E	Amounts may b	Amounts may be rounded			Statement covers period			
Payments Wade	to whole dollars.			fro	m	07/01/2018	FOF	''' <b>46</b> 0
SEE INSTRUCTIONS ON REVERSE				thr	ough _	09/22/2018	Page7	of <u>12</u>
NAME OF FILER			<del> </del>				I.D. NUM	
Liberate Laguna PAC							140583	8
CODES: If one of the following codes accurately describes	s the payment, yo	ou may en	ter the code. C	Otherwise,	descri	be the payment.		
campaign paraphernalia/misc.  CNS campaign consultants  CTB contribution (explain nonmonetary)*  civic donations  FIL candidate filing/ballot fees  fundraising events  Independent expenditure supporting/opposing others (explain)*  LEG legal defense  LIT campaign literature and mailings	MBR member com MTG meetings and OFC office expen PET petition circu PHO phone banks POL polling and s POS postage, deli	munications d appearance ises lating survey resea	ces	RAE RFD SAL TEL TRC TRS TSF VOT	radio returi camp t.v. oi candi staff/s trans voter	airtime and production ned contributions valence contributions valence cable airtime and product travel, lodging, an apouse travel, lodging, for between committee registration nation technology costs	duction costs and meals and meals of the sam	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE	OR	DESCRIPTION	ON OF PA	YMENT		AMOUNT PAID
2S Publishing, LLC 568 N. Coast Hwy., #1125 Laguna Beach, CA 92651		MEB						2,025.00
Bagatelos Law Firm 380 West Portal Avenue, Suite F San Francisco, CA 94127		PRO			<del></del>			720.0
Bagatelos Law Firm 880 West Portal Avenue, Suite F Ban Francisco, CA 94127		PRO						560.0
Payments that are contributions or independent expenditures n	nust also be summ	arized on \$	Schedule D.			SL	JBTOTAL\$	3,305.0
Schedule E Summary								
1 Itemized payments made this period. (Include all Schedule	E subtotals.)		*****************	**************		***********************	\$	10,763.06
2. Unitemized payments made this period of under \$100	***************************************	********	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		******	\$	21.00
3. Total interest paid this period on loans. (Enter amount from								0.00

Amounts may be rounded to whole dollars.

SCH	EDI	11	F 5	: 10	, JV	ITA
OVE			C 5	= IL	/Ui	11.1

CALIFORNIA A C

Statement covers period

Payments Made	to whole ut	to whole dollars.			07/01/2018	r Ur	
SEE INSTRUCTIONS ON REVERSE				through	09/22/2018	Page	8 of <u>12</u>
NAME OF FILER					······································	I.D. NUMB	ER
Liberate Laguna PAC						140583	8
CODES: If one of the following codes accurately describe	es the payment. v	ou mav er	nter the code. Ot	herwise de	scribe the payment		
CMP campaign paraphernalia/misc. CNS campaign consultants CTB contribution (explain nonmonetary)* CVC civic donations FIL candidate filing/ballot fees FND fundraising events independent expenditure supporting/opposing others (explain)* LEG legal defense LIT campaign literature and mailings	MBR member com MTG meetings an OFC office exper PET petition circu PHO phone banks POL polling and separate postage, del	imunications d appearance ases llating s survey resear ivery and me	es	RAD rac RFD ret SAL ca TEL t.v. TRC ca TRS sta TSF tra VOT vo	dio airtime and production urned contributions mpaign workers' salaries or cable airtime and pro- ndidate travel, lodging, an lif/spouse travel, lodging, nsfer between committee ter registration ormation technology costs	duction costs d meals and meals s of the sar	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD NUMBER)		CODE	OR D	ESCRIPTION O	PAYMENT		AMOUNT PAID
Bagatelos Law Firm 380 West Portal Avenue, Suite F San Francisco, CA 94127		PRO		***************************************			1,440.00
Democracy Engine 2125 14th St NW Washington, DC 20009		FND					40.30
Democracy Engine 2125 14th St NW Washington, DC 20009		FND					250.00
Democracy Engine 2125 14th St NW Washington, DC 20009		FND					9.60
Donor Stack, LLC 5940 College Avenue, Suite F Oakland, CA 94618		WEB					184.98
* Payments that are contributions or independent expenditures must als	o be summarized on	l Schedule D.			SU	BTOTAL \$	1,924.88

SCHEDULE	Εı	(CON	T.)
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Continuation Sheet)	Amounts may be rounded	Statement covers period	CALIFORNIA: ACA	
ayments Made	to whole dollars.	from07/01/2018	FORM TVV	
E INSTRUCTIONS ON REVERSE		through 09/22/2018	Page 9 of 12	
ME OF FILER			I.D. NUMBER	
iberate Laguna PAC			1405838	

CODES: If one of the following codes accurately describes the	ne payment, y	ou may e	enter the code.	Otherwise	, describe the payment.	
CNS campaign consultants  CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  LEG legal defense  MM  PE  PF  PF  PF  PF  PF  LEG legal defense	HO phone banks DL polling and s DS postage, del	d appearand ses lating survey resea ivery and m	ces	RFD SAL TEL TRC TRS TSF VOT	campaign workers' salaries t.v. or cable airtime and production co- candidate travel, lodging, and meals staff/spouse travel, lodging, and meal transfer between committees of the s	s ame candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER LD. NUMBER)		CODE	OR	DESCRIPTION	ON OF PAYMENT	AMOUNT PAID
Donor Stack, LLC 5940 College Avenue, Suite F Oakland, CA 94618		WEB		•		49.00
Donor Stack, LLC 5940 College Avenue, Suite F Oakland, CA 94618		WEB				80.90
Laguna Beach Independent 580 Broadway, Suite 301 Laguna Beach, CA 92651		PRT				880.00
S.E. Owens & Company 5940 College Avenue Suite F Oakland, CA 94618		PRO		gan gantaman dan dan dan dan dan dan dan dan dan d		957.90
S.E. Owens & Company 5940 College Avenue Suite F Oakland, CA 94618		PRO	·			1,034.20

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

SUBTOTAL \$

3,002.00

Schedule		
(Continual	tion	Sheet)
<b>Payments</b>	Wac	le ·

SCHEDULE E (CONT.)
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(Continuation Sheet) Payments Made	Amounts may be to whole do			from07/01/2018	GALIFO FOR	
SEE INSTRUCTIONS ON REVERSE NAME OF FILER				through09/22/2018	Page	10 of 12
Liberate Laguna PAC					1405838	
CODES: If one of the following codes accurately described campaign paraphernalia/misc. CNS campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense LIT campaign literature and mailings	MBR member common meetings and office expen petition circul phone banks polling and spostage, deli	munications I appearance ses ating urvey researd very and met	s	RAD radio airtime and production returned contributions SAL campaign workers' salaries t.v. or cable airtime and procuping and transfer between committee voter registration technology cost	n costs duction costs d meals and meals sof the san	ne candidate/sponsor
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I,D NUMBER)		CODE (	DR DES	CRIPTION OF PAYMENT		AMOUNT PAID
3.E. Owens & Company 1940 College Avenue Suite F Jakland, CA 94618		PRO				581.18
Trusted Messenger Marketing 2170 Century Park East, #1601 Los Angeles, CA 90067		WEB				200.00
Trusted Messenger Marketing 2170 Century Park East, #1601 Los Angeles, CA 90067		WEB				1,250.00
Two Sisters Media, LLC 168 N. Coast Hwy., #1125 Laguna Beach, CA 92651			Ad Design			500.00
Payments that are contributions or independent expenditures must als	o be summarized on S	Schedule D.		SL	JBTOTAL \$	2,531.18

Schedule	} F		
Accrued	Expenses	(Unpaid	Bills)

Amounts may be rounded to whole dollars.

Stat	ement covers period					
from	07/01/2018				9032	
through	09/22/2018	Page_	11	_ of_	12	
		I.D. NUM	BER			

1405838

SEE INSTRUCTIONS ON REVERSE

campaign literature and mailings

NAME OF FILER

Liberate Laguna PAC

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

CMP campaign paraphernalia/misc. member communications RAD radio airtime and production costs CNS campaign consultants meetings and appearances RFD returned contributions CTB contribution (explain nonmonetary)\* office expenses SAL campaign workers' salaries CVC civic donations petition circulating t.v. or cable airtime and production costs FIL candidate filing/ballot fees phone banks TRC candidate travel, lodging, and meals FND fundraising events polling and survey research TRS staff/spouse travel, lodging, and meals independent expenditure supporting/opposing others (explain)\* IND

postage, delivery and messenger services LEG legal defense professional services (legal, accounting) VOT voter registration

> PRT print ads

TSF transfer between committees of the same candidate/sponsor

WEB information technology costs (internet, e-mail)

				=-	•
NAME AND ADDRESS OF CREDITOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
S.E. Owens & Company 5940 College Avenue Suite F Oakland, CA 94618	PRO ,	957.90	0.00	957.90	0.00
S.E. Owens & Company 5940 College Avenue Suite F Oakland, CA 94618	PRO	0.00	601.16	0.00	601.16
Laguna Beach Independent 580 Broadway, Suite 301 Laguna Beach, CA 92651	IND Newspaper Ad	0.00	880.00	0.00	880.00
* Payments that are contributions or independent expenditures must also be summarized on Schedule D.	SUBTOTALS S	\$ 957.90	1,481.16	957.90	1,481.16

## Schedule F Summary

1. Total accrued expenses incurred this period. (Include all Schedule F, Column (b) subtotals for 

2. Total accrued expenses paid this period. (Include all Schedule F, Column (c) subtotals for payments on 

3. Net change this period. (Subtract Line 2 from Line 1. Enter the difference here and  - 44

NAME OF FILER

Liberate Laguna PAC

CODES: If one of the following codes accurately describes 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)\*

CTC child departings.

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

IND independent expenditure supporting/opposing others (explain)\*

POS postage, delivery and messenger services
LEG legal defense

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

VOT voter registration

LIT campaign literature and mailings PRT print ads 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 CREDITOR (IF COMMITTEE, ALSO ENTER I D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT	(a) OUTSTANDING BALANCE BEGINNING OF THIS PERIOD	(b) AMOUNT INCURRED THIS PERIOD	(c) AMOUNT PAID THIS PERIOD (ALSO REPORT ON E)	(d) OUTSTANDING BALANCE AT CLOSE OF THIS PERIOD
Laguna Beach Independent 580 Broadway, Suite 301 Laguna Beach, CA 92651	IND Newspaper Ad	0.00	880.00	0.00	880.00
	0.00	\$ 880.00	\$ 0.00	\$ 880.00	

I.D. NUMBER

1405838