Campaign Statement Cover Page Government Code Sections 84200-84216.5)	Type or print in	ink.;"	Pate Stamp  RECEIVED	CALIFORNIA 460 FORM
(COVERNMENT COURSE COURSE)	Statement covers period from1/1/14	Date of election if applicable: (Month, Day, Year)	JUL 3 I 2014	Page 1 of 36 For Official Use Only
SEE INSTRUCTIONS ON REVERSE	through06/30/14	11/4/14	Cify Clerk's Office Cify of Laguna Beach, C/	in the second se
1. Type of Recipient Committee: All Committees - Col	mplete Parts 1, 2, 3, and 4.	2. Type of Statement:		
State Candidate Election Committee Recall (Also Complete Part 5) General Purpose Committee Sponsored Small Contributor Committee	rimarily Formed Ballot Measure ommittee ) Controlled ) Sponsored lso Complete Part 6) rimarily Formed Candidate/ fficeholder Committee lso Complete Part 7)	☐ Preelection Statement ☐ Semi-annual Statement ☐ Termination Statement (Also file a Form 410 Te	Specia Supple statem	rly Statement I Odd-Year Report mental Preelection lent - Attach Form 495
	. number 363063	Treasurer(s)		
COMMITTEE NAME (OR CANDIDATE'S NAME IF NO COMMITTEE) Rob ZurSchmiede for Council 2014		NAME OF TREASURER  Matt Lawson  MAILING ADDRESS  P.O. Box 487		
STREET ADDRESS (NO P.O. BOX)		CITY	STATE ZIP CO	
515 OAK STREET		Laguna Beach	CA 92652	949-715-9800
CITY STATE ZIP CO  LAGUNA BEACH CA 92651	DE AREA CODE/PHONE 949-715-9800	NAME OF ASSISTANT TREASU	KER, IF ANY	
MAILING ADDRESS (IF DIFFERENT) NO. AND STREET OR P.O. B.O. B.O. BOX 487		MAILING ADDRESS		
city state zip co Laguna Beach CA 92652		CITY	STATE ZIP CO	DE AREA CODE/PHONE
OPTIONAL: FAX / E-MAIL ADDRESS mattlawson7@hotmail.com	Magyani, Palesta Pales	OPTIONAL: FAX / E-MAIL ADDI	RESS	
L 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	By By By	Signature of Treasurer or Assistant Controlling Officeholder, Candidate, State Measure Pr	Treasurer opponent or Responsible Officer of Sponsor	es is true and complete. I certify
Executed on	Ву	Signature of Controlling Officeholder, Candidate.		E000 Form 460 ( January/0

#### Campaign Disclosure Statement Summary Page

Type or print in ink.

Amounts may be rounded to whole dollars.

	SUMMARYPAGE
Statement covers period	CALIFORNIA 460
from 1/1/14	FORM
through06/30/14	Page2 of36
	I.D. NUMBER
	1363063

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 11363063 Calendar Year Summary for Candidates Column B Column A Contributions Received CALENDAR YEAR TOTAL THIS PERIOD Running in Both the State Primary and TOTAL TO DATE (FROM ATTACHED SCHEDULES) **General Elections** 39,087.50 1/1 through 6/30 7/1 to Date Loans Received Schedule B. Line 3 20. Contributions 39,087.50 Received. 272,00 21. Expenditures 39.359.50 Made **Expenditures Made Expenditure Limit Summary for State** 6. Payments Made ...... Schedule E, Line 4 Candidates 7 Loans Made Schedule H Line 3 22. Cumulative Expenditures Made\* 11,533.54 SUBTOTAL CASH PAYMENTS ...... Add Lines 6 + 7 \$ (If Subject to Voluntary Expenditure Limit) Total to Date Date of Election (mm/dd/yy) 11,533.54 **Current Cash Statement** 12. Beginning Cash Balance ...... Previous Summary Page, Line 16 \$ To calculate Column B, add 39,087.50 amounts in Column A to the corresponding amounts \*Amounts in this section may be different from amounts from Column B of your last reported in Column B. report. Some amounts in 11,533.54 Column A may be negative 27,553.96 figures that should be 16 ENDING CASH BALANCE Add Lines 12 + 13 + 14 then subtract Line 15 subtracted from previous If this is a termination statement, Line 16 must be zero. period amounts. If this is the first report being filed for this calendar year, only 17 LOAN GUARANTEES RECEIVED ...... Schedule B. Part 2 \$ carry over the amountsfrom Lines 2, 7, and 9 (if Cash Equivalents and Outstanding Debts anv). 18. Cash Equivalents See instructions on reverse \$ FPPC Form 460 (January/05) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

#### Schedule A Monetary Contributions Received

3. Total monetary contributions received this period.

Type or print in ink.

Amounts may be rounded to whole dollars.

		SCHEDULE A
Stateme	nt covers period	CALIFORNIA / CO
from	1/1/14	FORM 40U
through	06/30/14	Page3 of36
		I.D. NUMBER
		4000000

SEE INSTRUCTIONS ON REVERSE NAME OF FILER 1363063 Rob ZurSchmiede for Council 2014 CUMULATIVE TO DATE. PER ELECTION AMOUNT IF AN INDIVIDUAL ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TO DATE RECEIVED THIS CALENDAR YEAR DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) CODE \* (IF REQUIRED) RECEIVED PERIOD (JAN. 1 - DEC. 31) (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS) MIND Mary Lawson Retired 360.00 □ COM 360.00 360.00 1/16/14 Потн **□** PTY □scc **IND** Matt Lawson Venture Capitalist 288.00 ☐ COM Ventana Capital Mqt., L.P. 288.00 288.00 1/16/14 MOTH ☐ PTY □scc **IND** Robert ZurSchmiede Mat. Consultant 360.00 ПСОМ Kelly Associates 360.00 360.00 1/16, 6/30/14 □отн **□PTY** □ SCC **IND** Robin ZurSchmiede Attorney 360.00 ram mab die ПСОМ Robin ZurSchmiede, 360.00 360.00 various ПОТН . M 9268 Attorney at Law PTY □SCC Anne Johnson MIND Retired 100. Barrier Company of the Section □ COM. 100.00 100.00 1/16/14 OTH PTY □SCC SUBTOTAL \$ 1.468.00 \*Contributor Codes Schedule A Summary IND - Individual 1. Amount received this period – itemized monetary contributions. COM - Recipient Committee (Include all Schedule A subtotals.) 34,820.00 (other than PTY or SCC) OTH - Other (e.g., business entity) 4.267.50 PTY - Political Party SCC - Small Contributor Committee

FPPC Form 460 (January/05)

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

39,087.50

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e rounded	Statem	ent covers period	CALIFORNIA ACA
ollars.	from	1/1/14	FORM 460
	through	06/30/14	Page 4 of 36
			I.D. NUMBER
			1363063

NAME OF FILER

Rob ZurSchmiede for Council 2014 PER ELECTION CUMULATIVE TO DATE AMOUNT IF AN INDIVIDUAL, ENTER FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR CONTRIBUTOR TO DATE RECEIVED THIS CALENDAR YEAR DATE OCCUPATION AND EMPLOYER (IF COMMITTEE, ALSO ENTER I.D. NUMBER) (IF REQUIRED) CODE \* (JAN. 1 - DEC. 31) RECEIVED (IF SELF-EMPLOYED, ENTER NAME PERIOD OF BUSINESS) **IND** Retired Mary Johnson 100.00 □ COM 100.00 100.00 1/16/14 Потн i ngader **∏** PTY SCC Peter Ochs **IND** Retired 360.00 COM 360.00 360.00 1/28/14 □ОТН acuna Beau. PTY SCC Gail Ochs Retired DIND 360.00 ПСОМ 360.00 360.00 1/28/14 OTH PTY □scc Gregg Abel Construction, Inc. □IND 360.00 and their \$ 20 100 ПСОМ 360.00 360.00 2/11/14 OTH 1.00 PTY SCC Robinson & Wisbaum □IND 360.00 75 7 6 7 6 7 6 7 6 7 6 7 7 8 W ПСОМ 360.00 360.00 2/11/14 a paragraphica di Alifa Califair anno a dalla di **V**OTH PTY SCC SUBTOTAL\$ 1.540.00

\*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

Type or print in ink.

Amounts may be rounded

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Monetary Contributions Received	to whole dollars.			from1/1/14			460
			through	06/30/14	Page	5of_	36
NAME OF FILER					I,D. NUN	ABER	
Rob ZurSchmiede for Council 2014					13630	63	Diameter, Mariante Mariante
FULL NAME OTDEET ADDRESS AND REGIONS	CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE	TO DATE	PER ELE	ECTION

Rob ZurSch	miede for Council 2014				130300	)O
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)
2/11/14	Thaddeus F. Heitmann	☑IND □COM □OTH □PTY □SCC	Business Owner BioComm Network, Inc.	360.00	360.00	360.00
2/11,4/26/14	Richard D. English	☑IND □COM □OTH □PTY □SCC	Attorney Ingram Micro	360.00	360.00	360.00
2/11/14	Susan L. Kemnf  265 Trantil Laboration (Augustian Company)	☑IND □COM □OTH □PTY □SCC	Business Executive Mirion Technologies, Inc.	360.00	360.00	360.00
2/12/14	Laurence P. Nokes	☑IND □COM □OTH □PTY □SCC	Attorney Nokes & Quinn	360.00	360.00	360.00
2/12/14	Benjamin A. Simon	ØIND ☐COM ☐OTH ☐PTY ☐SCC	Designer Acme Pacific Corp.	360.00	360.00	360.⊍
			SUBTOTAL	\$ 1,800.00		

\*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

# Schedule A (Continuation Sheet)

Type or print in ink.

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Monetary Contributions Receive	Amounts in	Amounts may be rounded			Statement covers period			460	
	to who	to whole dollars.			1/1/14		FORM 46		
			through	6/30	)/14	Page _	<u>6</u>	f <u>36</u>	
IAME OF FILER			-		.,,,	I.D. NUN	VIBER :		
Rob ZurSchmiede for Council 2014						13630	63		
FULL NAME STREET ADDRESS AND	ZIP CODE OF CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUN'	Т	CUMULATIVE	TO DATE		ELECTION	

ROD ZUISCIII	miede for Council 2014				13030	
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/12, 3/18/14	Christopher A.Toy	☑IND □COM □OTH □PTY □SCC	Retired	360.00	360.00	360.00
2/13/14	Jennifer L. Wong	☑IND □COM □OTH □PTY □SCC	Physician Jennifer Wong, M.D. Inc.	100.00	100.00	100.00
2/15, 3/1/14	Wayne J. Baglin	☑IND . □COM □OTH □PTY □SCC	Real Estate Broker Baglin Real Estate	335.00	335.00	335.00
2/19, 3/1/14	Ilse Lenschow	☑IND □COM □OTH □PTY □SCC	Retired	260.00	260.00	260.0
2/19/14	Kathleen Blackburn	☑IND □COM □OTH □PTY □SCC	Retired	320.00	320.00	320
Management and Control Management of the Con		A THE STREET OF	SUBTOTAL	\$ 1,375.00		

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(other than PTY or SCC)

OTH - Other (e.g., business entity) PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statem	06/30/14	CALIFORNIA ACA					
from	1/1/14	FORM 400					
through	06/30/14	Page 7 of 36					
		I.D. NUMBER					
		1363063					

NAME OF FILER

Rob ZurSc	hmiede for Council 2014				136306	3
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)
2/19/14	David W. Wilson	☑IND □COM □OTH □PTY □SCC	Business Owner Wilson Automotive Group	360.00	360.00	360.00
2/21/14	Mark Orgill Layuna Beauly CA 92651	☐ COM☐ OTH☐ PTY☐ SCC	Business Executive Deemark, LLC	360.00	360.00	360:00
2/21/14	Michael Orgill  A 92651	☑IND □COM □OTH □PTY □SCC	Business Executive Deemark, LLC	360.00	360.00	360.00
2/21/14	Deemark, LLC	☐IND ☐COM ØOTH ☐PTY ☐SCC		360.00	360.00	360.00
2/22/14	Kay Becknell Jones	ZIND COM OTH PTY SCC	Writer Of Food & Wine	360:00	360.00	360.
			SUBTOTAL	\$ 1,800.00		

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PTY - Political Party

SCC - Small Contributor Committee

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Amounts may be rounded to whole dollars.

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Staten	nent covers period	CALIFORNIA ACA
from	1/1/14	FORM 40U
through	06/30/14	Page8 of36
		ID NUMBER

NAME OF FILER

Rob ZurSchi	miede for Council 2014					
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)
2/26/14	Anders Lasater, Inc.	□IND □COM ☑OTH □PTY □SCC		360.00	360.00	360.00
2/26, 3/16/14	Joanne C. McMahon	☑IND □COM □OTH □PTY □SCC	Sales Broker Kubin Nicholson	320.00	320.00	320.00
2/27, 3/16/14	Canterbury Enterprises	□IND □COM ØOTH □PTY □SCC		235.00	235.00	235.00
2/27/14	Elizabeth L. Jenkins	☑IND □COM □OTH □PTY □SCC	School Board Member LBUSD	360.00	360.00	360.0
2/27, 5/1/14	Gary T. Jenkins	ZIND COM OTH PTY SCC	Physician Gary T. Jenkins Medical Corporation	360.00	360.00	366.
The second secon			SUBTOTAL	\$ 1,635.00		

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SCC - Small Contributor Committee

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Amounts may be rounded

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Monetary Contributions Received	to whole dollars.	Stateme	ent covers period	CALIFOR		
	•	from	1/1/14	FORM		
		through	06/30/14	Page 9	of36	
NAME OF FILER				I.D. NUMBER	₹	
Rob ZurSchmiede for Council 2014				1363063		
			- 0.000	TO DATE	DED ELECTION	

Rob ZurScl	hmiede for Council 2014				136306	)O
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
2/28/14	Stephan S. Cohn 30 10000 St. Laguna descri Un 32651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Attorney Berger Kahn	100.00	100.00	100.00
2/28/14	Kelly Boyd  980 - 1 10 your 180 year  10 - 10 year 180 82651	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Council Member City of Laguna Beach	200.00	200.00	200.00
3/1/14	Kathryn A.Skjei	☐IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	170.00	170.00	170.0
3/1/14	John A. Hamil, D.V.M.	☑IND □COM □OTH □PTY □SCC	Retired	360.00	360.00	360.0
3/3/14	Glenn Gray	ZIND COM OTH PTY SCC	Executive South County Bank	360.00	360.00	360.0
			SUBTOTAL	\$ 1,190.00		

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NAME OF FILER

Type or print in ink.

Amounts may be rounded

to whole dollars

SCHEDULE A (C	

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		through 06/30/1		
			I.D. NUMBER	
Council 2014			1363063	

Rob ZurSchr	miede for Council 2014				136306	) 3
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/3/14	Gene Gratz	☑IND □COM □OTH □PTY □SCC	Attorney Law Offices of Eugene C. Gratz	360.00	360.00	360.00
3/3/14	Howard Conn	☑IND □COM □OTH □PTY □SCC	Physician Howard Conn MD Inc.	100.00	100.00	100.00
3/3/14	Rita Conn  Consideration of the consideration of th	☑IND □COM □OTH □PTY □SCC	Retired	150.00	150.00	150.00
3/3, 4/23/14	Eric Jessen	☑IND □COM □OTH □PTY □SCC	Environmental Consultant Eric Jessen Museum Environmental Consultant	195.00	195.00	195.00
3/3, 3/23/14	Wayne L. Peterson	ZIND COM OTH PTY SCC	Retired	360.00	360.00	366.5
		44	SUBTOTAL	\$ 1,165.00		

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Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statemen from	t covers period	california 460		
		through	06/30/14	Page11 of36		
NAME OF FILER		1		I.D. NUMBER		
Rob ZurSchmiede for Council 2014				1363063		
	IE AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE	TO DATE PER ELECTION		

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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/4/14	Bonnie Hano	☑IND □COM □OTH □PTY □SCC	Retired	170.00	170.00	170.0
3/4/14	Otis M. Healy	☑IND □COM □OTH □PTY □SCC	Retired	150.00	150.00	150.0
3/4/14	Jay S. Eastman	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Planner City of Riverside	100.00	100.00	100.0
3/6/14	Charlotte L. Masarik	☑IND □COM □OTH □PTY □SCC	Retired	360.00	360.00	360.0
3/6/14	Alexander M. Masarik	ZIND COM OTH PTY SCC	Retired	.260.00	3.60.00	360.
			SUBTOTAL	.\$ 1,140.00		

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PTY – Political Party
SCC – Small Contributor Committee

#### Schedule A (Continuation Sheet)

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Amounts may be rounded

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Monetary Contributions Received	Amounts may be rounded	Statemen	CALIF	ORNIA			
	to whole dollars.	from	1/1/14	FO	ORNIA DRM	40V	
		through	06/30/14	Page	12 of _	36	
NAME OF FILER				I.D. NUN	VBER		
Rob ZurSchmiede for Council 2014				13630	63		
	JE AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE	TODATE	PER ELE	ECTION	

Rob ZurSch	miede for Council 2014				130300	JO
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)
3/6/14	Patricia Hawk	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Nonprofit Executive Tony Hawk Foundation	170.00	170.00	170.00
3/6, 5/1/14	Morris Skenderian & Assoc., A.I.A.	□IND □COM ☑OTH □PTY □SCC		360.00	360.00	360.00
3/6/14	Mary P. Rabe	☑IND □COM □OTH □PTY □SCC	Retired	360.00	360.00	360.00
3/6/14	Douglas D. Anderson	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	170.00	170.00	170.00
3/7/14	Ken Fischbeck	☑IND □COM □OTH □PTY □SCC	Business Owner Laguna Crest Enterprise, Inc	170.00	170.00	176.0 6g - 1866 - 1866 - 1866
			SUBTOTAL	<b>\$</b> 1,230.00.		

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Type or print in ink.

Amounts may be rounded

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Monetary Contributions Received	to whole dollars.		1/1/14	FORM 460		
		from	06/30/14	Page	13 of 36	
AME OF FILER				I.D. NUR	VBER .	
Rob ZurSchmiede for Council 2014				13630	63	
	IE AN INDIVIDUAL ENTER	AMOUN	IT CUMULATIV	E TO DATE	PER ELECTION	

Rob ZurSch	nmiede for Council 2014				136306	33
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/8/14	John B.Thomas	☑IND □COM □OTH □PTY □SCC	Business Owner The Thomas Group	360.00	360.00	360.00
3/8/14	Margaret A.Thomas	□IND □COM ☑OTH □PTY □SCC	Not Employed	360.00	360.00	360.00
3/8/14	William H. Ihrke	☑IND □COM □OTH □PTY □SCC	Attorney Rutan & Tucker	100.00	100.00	100.00
3/8/14	Curt Bartsch	☑IND □COM □OTH □PTY □SCC	Retired	170.00	170.00	170.00
3/9/14	Paul Columbus	ZIND COM OTH PTY SCC	Not Employed *excess donation of \$65 refunded	*425.00	*425.00	*425
A STATE OF THE STA			SUBTOTAL	\$ 1,415.00		

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(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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

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				through06/	/30/14		14 of 36		
NAME OF FILER						I.D. NUM			
Rob ZurSc	hmiede for Council 2014					136306	3		
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR Y (JAN. 1 - DEC	EAR	PER ELECTION TO DATE (IF REQUIRED)		
3/11/14	James Murphy	IND COM OTH PTY	Attorney Oliver Vose Sandifer Murphy	360.00	360.00		360.00		360.00
3/11/14	Timothy D. Carlyle	☑IND □COM □OTH □PTY □SCC	Attorney Songstad Randall Coffee & Humphrey, LLP	360.00	360	00.00	360.00		
3/11/14	Mary Kate Saunders	IND COM OTH PTY SCC	Physical Therapist Mary Kate Saunders Physical Therapy	170.00	17	0.00	170.00		
3/11/14	Lynn Hunt	☑IND □COM □OTH □PTY □SCC	Retired	100.00	10	0.00	100.00		
VIII THE PARTY OF	Nancee Swensson	ZIND	Realtor				180		

HÔM Sotheby's

International Realty

SUBTOTAL\$

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\*Contributor Codes

IND - Individual

3/12/14

COM - Recipient Committee

(other than PTY or SCC)

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

Participant was

Francisco Barrier (1. 908F)

PTY - Political Party

SCC - Small Contributor Committee

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Statement covers period

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Monetary Contributions Received	Amounts may b to whole do	` I	Statement cov	CALIFORNIA 460			
	to whole do	mais.	from1/1	/14	FORM TOU		
			through 06	/30/14	Page	15 of	36
NAME OF FILER					I.D. NUME	3ER	
Rob ZurSchmiede for Council 2014					1363063	3	
FULL NAME STREET ADDRESS AND ZIP CODE OF CO	NTRIBUTOR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE T			LECTION

Rob ZurSch	imiede for Council 2014				10000	
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)
3/13/14	Kenneth Kaplan	☑IND □COM □OTH □PTY □SCC	Attorney Kenneth M. Kaplan Attorney at Law	200.00	200.00	200.00
3/13/14	Mace M. Morris III	☑IND □COM □OTH □PTY □SCC	Business Owner TaylorMorse	170.00	170.00	170.00
3/13/14	Thomas P. Davis	☑IND □COM □OTH □PTY □SCC	Attorney Davis Law, APC	360.00	360.00	360.0C
3/13/14	Gregory H. Vail	☑IND □COM □OTH □PTY □SCC	Land Use Planner Selva Partners	170.00	170.00	170.00
3/13/14	Ramona Castaneda	ZIND  COM OTH PTY SCC	Pubilc Official City of Fullerton	100.00	100.00	100.00
A	`		SUBTOTAL	\$ 1,000.00		

\*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

Type or print in ink.

Amounts may be rounded to whole dollars.

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Statement covers period

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NAME OF FILER Rob ZurSch	miede for Council 2014			through 06/	30/14	Page I.D. NUMI 136306	. [
DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER LD. NUMBER)	CONTRIBÚTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED THIS PERIOD	CUMULATIVE TO CALENDAR YI (JAN. 1 - DEC.	EAR	PER ELECTION TO DATE (IF REQUIRED)
3/14/14	Mountain Pacific, Inc.	□IND □COM ØOTH □PTY □SCC		200.00	200	.00	200.00
3/14, 5/1/14	Melissa E. Cavanaugh	☑IND □COM □OTH □PTY □SCC	Not Employed	180.00	180	.00	180.00
3/14/14	Law Office of William Landsiedel	□IND □COM ☑OTH □PTY □SCC		100.00	100	0.00	100.0C
3/15/14	John Lamirande	☑IND □COM	Business Executive Bio-Rad Laboratories	100.00	100	0.00	100.00

Conservation Consultant

SUBTOTAL\$

Derek Ostensen &

Associates

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□ PTY □ SCC

\*Contributor Codes

IND - Individual

3/16/14

COM - Recipient Committee (other than PTY or SCC)

OTH – Other (e.g., business entity)

Derek Ostensen

PTY - Political Party

SCC - Small Contributor Committee

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

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outions Received	Amounts may be rounded	Statement covers period	CALIFORNIA ACO	
	to whole dollars.	from1/1/14	FORM 400	
		through 6/30/14	Page17 of36	
			I.D.,NUMBER	
Council 2014			1363063	

Rob ZurSch	miede for Council 2014				136306	53
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)
3/16/14	Natalia Ostensen	IND COM OTH PTY	Restaurateur Andrei's Conscious Cuisine	100.00	100.00	100.00
3/16, 5/1/14	Toni Iseman	☑IND □COM □OTH □PTY □SCC	Council Member City of Laguna Beach	180.00	180.00	180.00
3/16/14	Sam Goldstein	☑IND □COM □OTH □PTY □SCC	Private Investor Radford Ventures	360.00	360.00	360.00
3/16/14	Pam Goldstein	☑IND □COM □OTH □PTY □SCC	Not Employed	360.00	360.00	360.00
3/16/14	Peter Blake	ØIND □COM □OTH □PTY □SCC	Business Owner Peter Blake Gallery	100.00	100.00	100,00
			SUBTOTAL	\$ 1,100.00	\$2.576.57 (\$150.555.505.500.505.505.505.505.505.505.	

\*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

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statemer from	nt covers period 1/1/14	CALIFOR FOR	<sup>RNIA</sup> 460
		through	6/30/14	Page1	8 of36
IAME OF FILER				I.D. NUMBE	R
Rob ZurSchmiede for Council 2014				1363063	
	IF AN INDIVIDUAL ENTER	AMOUNT	CUMULATIVE	TO DATE	PER ELECTION

Hob Zurschi	miede for Council 2014				,0000	
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/16, 4/19/14	Roger McErlane	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Planning Consultant McErlane Consulting	360.00	360.00	360.00
3/16/14	Laura Alcala	☑IND □COM □OTH □PTY □SCC	Public Official City of Anaheim	200.00	200.00	200.00
3/16/14	Marshall Ininns	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Architect MIDG Architects	100.00	100.00	100.00
3/16, 4/22/14	Martha Anderson	☑IND □COM □OTH □PTY □SCC	Retired	275.00	275.00	275.00
3/16/14	Thomas B. Girvin	☑IND □COM □OTH □PTY □SCC	Insurance Agent Tom Girvin Insurance	170.00	170.00	176
			SUBTOTAL	\$ 1,105.00		

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FPPC Form 460 (January/05)

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

Type or print in ink. Amounts may be rounded

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Monetary	Contributions Received	Amounts may be to whole do		Statement coverage from1/1	ers period /14	CALIFO FOR	
				through6/	30/14	Page	9 of 36
NAME OF FILER						I.D. NUMB	ĒR
Rob ZurSch	nmiede for Council 2014					1363063	
DATE	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTI	RIBUTOR CONTRIBUTOR	IF AN INDIVIDUAL, ENTER	AMOUNT RECEIVED THIS	CUMULATIVE T		PER ELECTION TO DATE

Rob ZurSch	miede for Council 2014				136306	53
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)
3/16/14	Eugene H.Felder, Jr.	☑IND □COM □OTH □PTY □SCC	Business Executive Desco Industries, Inc.	170.00	170.00	170.00
3/16/14	Oligino Construction Services Corp.	☐IND ☐COM ØOTH ☐PTY ☐SCC		200.00	200.00	200.00
3/16/14	Alexander Rug Gallery	☐IND ☐COM ØOTH ☐PTY ☐SCC	Architect MIDG Architects	360.00	360.00	360.00
3/16/14	Jon Madison	☑IND □COM □OTH □PTY □SCC	Business Owner Madison Square & Garden Café	100.00	100.00	100.00
3/16/14	Catherine Wolcott	☑IND □COM □OTH □PTY □SCC	Not Employed	170.00	170.00	176
THE REAL PROPERTY OF THE PROPE			SUBTOTAL	\$ 1,000.00		

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(other than PTY or SCC)
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PTY - Political Party

SCC - Small Contributor Committee

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Statem	ent covers period	CALIFORNIA ACO			
from1/1/14		FORM TUV			
through	6/30/14	Page 20 of 36			
		I.D. NUMBER			
		1363063			

NAME OF FILER

Rob ZurSchi	ZurSchmiede for Council 2014				1363063		
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)	
3/16, 6/29/14	Monica L. Simpson	☑IND □COM □OTH □PTY □SCC	Landscape Architect Monica L. Simpson, A Landscape Architect PC	270.00	270.00	270.00	
3/18, 5/1/14	John G. Mansour	☑IND □COM □OTH □PTY □SCC	Business Executive Athens Group	299.00	299.00	299.00	
3/18/14	Kathryn Langston	☑IND □COM □OTH □PTY □SCC	Retired	200.00	200.00	200.00	
3/20/14	James F. Rogers	☑IND □COM □OTH □PTY □SCC	Mgt. Consultant Rogers & Associates	360.00	360.00	360.00	
3/21/14	Peggy M.Trott	ZIND COM OTH PTY SCC	Hotelier Inn At Laguna Beach	100.00	100.00	100.0	
			SUBTOTAL	\$ 1,229.00			

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

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Statem	ent covers period	CALIFORNIA ACO
from	1/1/14	FORM 400
through	6/30/14	Page 21 of 36
 		I.D. NUMBER
	,	1363063

NAME OF FILER

Rob ZurSch	b ZurSchmiede for Council 2014				136306	3
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
3/21/14	Charles F. Moothart	☑IND □COM □OTH □PTY □SCC	Business Executive Lifted Research Group, Inc.	360.00	360.00	360.00
3/21/14	Susan L. Hamil	☑IND □COM □OTH □PTY □SCC	Business Owner Holiday Pet Hotel	360.00	360.00	360.00
3/22/14	Conrad Development	□IND □COM ☑OTH □PTY □SCC		360.00	360.00	360.00
3/25/14	Ackley Metal Products, Inc.	□IND □COM ØOTH □PTY □SCC	*excess donation of \$140 refunded	*500.00	*500.00	*500.00
3/28/14	Christopher M. Quilter	ØIND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.
			SUBTOTAL	\$ 1,680.00		

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

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Stateme	ent covers period	CALIFORNIA ACO
from	1/1/14	FORM 40U
through	6/30/14	Page 22 of 36
		I.D. NUMBER
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NAME OF FILER

Rob ZurSch	nmiede for Council 2014				136306	3
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 DATE: CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/3/14	Jordan Taylor Development, LLC	□IND □COM ØOTH □PTY □SCC	*excess donation of \$95 refunded	*455.00	*455.00	*455.0
4/8/14	William M. Blackburn	☑IND □COM □OTH □PTY □SCC	Retired	150.00	150.00	150.0
4/17/14	Judy Regan	□IND □COM □OTH □PTY □SCC	Nurse Garden Grove Hospital	100.00	100.00	100.0
4/14/14	Richard.D. McCormick	□IND □COM ØOTH □PTY □SCC	Business Owner R.D. McCormick Associates, Inc.	200.00	200.00	200.0
4/18/14	Kay Keating Munn	☑IND □COM □OTH □PTY □SCC	Property Mgr. STB LLC	250.00	250.00	. 250
			SUBTOTAL	\$ 1,155.00		

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Amounts may be rounded to whole dollars.

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dollars.	from	1/1/14	FORM 460
	through	6/30/14	Page 23 of 36
			I.D. NUMBER
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Rob ZurSch	miede for Council 2014	1363063				
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)
4/18/14	James S. McBride Jr.	☑IND □COM □OTH □PTY □SCC	Accountant Keys & McBride	300.00	300.00	300.00
4/22/14	Cogdill & Stirling Accountancy Corp.	□IND □COM ØOTH □PTY □SCC		100.00	100.00	100.00
4/23, 5/1/14	Ivan Spiers	☑IND □COM □OTH □PTY □SCC	Business Owner Mozambique Restaurants	- 360.00	360.00	360.00
4/23/14	Victor Opincar	☑IND □COM □OTH □PTY □SCC	Retired	150.00	150.00	150.00
4/23/14	Ramona Loucks	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	150.00	150.00	150
1			SUBTOTAL	<b>\$</b> 1,060.00		

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NAME OF FILER

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Type or print in ink. Amounts may be rounded

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Monetary Contributions Received	Amounts may be rounded to whole dollars.	Statement cov	ers period /14	CALIFORNIA FORM	460
		through6/	30/14	Page24	of <u>36</u>
NAME OF FILER				I.D. NUMBER	
Rob ZurSchmiede for Council 2014				1363063	
			CLIMEN ATIVE TO	NOATE PER	RELECTION

Rob ZurSch	nmiede for Council 2014		·		136306	i 3
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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/23/14	Lamb Studio	□IND □COM ØOTH □PTY □SCC		200.00	200.00	200.00
4/23/14	Barbara Smith Macgillivray	□ IND □ COM □ OTH □ PTY □ SCC	Producer Macgillivray Freeman Films	190.00	190.00	190.00
4/23/14	Lyn Carlyle	☑IND □COM □OTH □PTY □SCC	Not Emplyed	150.00	. 150.00	150.0
4/23/14	Harley Rouda	☑IND □COM □OTH □PTY □SCC	Business Executive Trident Holdings	200.00	200.00	200.0
4/24/14	JoAnne Sturges	ZIND COM OTH PTY SCC	Land Planner TRG Land	100.00	100.00	100
A Audit A A Audit A A A A A A A A A A A A A A A A A A A			SUBTOTAL	\$ 840.00		TO THE STATE OF TH

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Type or print in ink. Amounts may be rounded

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Monetary Contributions Received	Amounts may be rounded	Stateme	nt covers period	CALIFORNIA 460		
•	to whole dollars.	from	1/1/14	FORM 400		
		through	6/30/14	Page 25 of 36		
NAME OF FILER				I.D. NUMBER		
Rob ZurSchmiede for Council 2014				1363063		
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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 DATE CALENDAR YEAR (JAN. 1 - DEC. 31)	PER ELECTION TO DATE (IF REQUIRED)
4/24/14	Chris Spence	☑IND □COM □OTH □PTY □SCC	Investor Spence Capital	150.00	150.00	150.0
4/25/14	Gallo Corporation	□IND □COM ☑OTH □PTY □SCC		200.00	200.00	200.0
4/25/14	Cheryl Post	☑IND □COM □OTH □PTY □SCC	Retired	190.00	190.00	190.0
4/30/14	Mark Flannery	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.0
4/30/14	Kerry L. Welch	ØIND □COM □OTH □PTY □SCC	Accountant	100.00	100.00	100.C
			SUBTOTAL	\$ 740.00		

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Type or print in ink. Amounts may be rounded

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Monetary Contributions Received	Amounts may be rounded	Statement cov	vers period	CALIFO	RNIA	ACA	varant i
·	to whole dollars.	Statement covers period					
		through6	3/30/14	Page2	26 of	36	
NAME OF FILER				I.D. NUMB	BER		
Rob ZurSchmiede for Council 2014				1363063	3		-
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Rob ZurSch	nmiede for Council 2014				136306	53
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)
5/1/14	Kate Roders	☑IND □COM □OTH □PTY □SCC	Not Employed	110.00	110.00	110.0
5/1/14	George A. Orff	☑IND □COM □OTH □PTY □SCC	Retired	300.00	300.00	300.0
5/1/14	Lucas Saxe	☑IND □COM □OTH □PTY □SCC	Business Executive Global One Pet, Inc.	100.00	100.00	100.0
5/1/14	Nancy Reed	☑IND □COM □OTH □PTY □SCC	Author Nancy Reed	100.00	100.00	100.0
5/1/14	Sweetwater Original, LLC	□IND □COM □OTH □PTY □SCC		200.00.	200,00	200.
			SUBTOTAL	\$ 810.00		

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PTY - Political Party

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Amounts may be rounded to whole dollars.

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Statem	ent covers period	CALIFORNIA ACO
from	1/1/14	FORM 400
through	6/30/14	Page 27 of 36
		I.D. NUMBER
	•	1000000

NAME OF FILER

Rob ZurSch	nmiede for Council 2014				13630	63
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)
5/1/14	Lauren Howell	☑IND □COM □OTH □PTY □SCC	Interior Designer Lauren Howell Interior Design	100.00	100.00	100.00
5/14/14	Victor Grgas	☑IND □COM □OTH □PTY □SCC	Municipal Worker City of Long Beach	360.00	360.00	360.00
5/14/14	Louis M. Rohl	☑IND □COM □OTH □PTY □SCC	Business Owner Rohl, LLC	100.00	100.00	100.0
5/14/14	Fred S. Karger	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.0
5/22/14	Jane Hanauer	ZIND COM OTH PTY SCC	Business Owner Laguna Beach Books	250.00	250,00	250.
			SUBTOTAL	\$ 910.00		

\*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

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

Type or print in ink. Amounts may be rounded

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Monetary Contributions Received	Amounts may be to whole doll		Statement cov	ers period /14	CALIFORNIA 460	
			through 6/	30/14	Page 28	of36
NAME OF FILER					I.D. NUMBER	
Rob ZurSchmiede for Council 2014					1363063	
ELILI NAME STREET ADDRESS AND 71D CODE OF CONT	PIBLITOR	IF AN INDIVIDUAL, ENTER	AMOUNT	CUMULATIVE T	O DATE	PER ELECTION

Rob ZurSch	nmiede for Council 2014				130300	
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)
6/14/14	Roy H. Slavin	☑IND □COM □OTH □PTY □SCC	Retired	360.00	360.00	360.00
6/22/14	Brenda Borron	☑IND □COM □OTH □PTY □SCC	Educator So. OC Community College District	100.00	100.00	100.00
6/22/14	R. Michael Beanan	☑IND □COM □OTH □PTY □SCC	Artist Max Casualty, Inc.	100.00	100.00	100.0
6/22/14	Susan Russell	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.0
6/22/14	Gayle C. Waite	☑IND □COM □OTH □PTY □SCC	Realtor Turning Point Properties	150.00	150.00	156
The second secon			SUBTOTAL	\$ 810.00		

\*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

Type or print in ink. Amounts may be rounded

	(CONT.)

Monetary Contributions Received	Amounts may be rounded	Stateme	nt covers period	CALIFORNIA 460	
	to whole dollars.	from	1/1/14	FORM 400	
		through	6/30/14	Page 29 of 36	
NAME OF FILER				I.D. NUMBER	
Rob ZurSchmiede for Council 2014				1363063	
	IE AN INDIVADITAL EN	TEP AMOUN	CHMULATIVE	TO DATE PER ELECTION	

HOD Zurachiniede ioi Oot	31,011, 20 7 1					
	REET 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)
3/4, 6/28/14 Verna L. Ro	llinger	☑IND □COM □OTH □PTY □SCC	Retired	135.00	135.00	135.00
3/8, 6/30/14 Barbara Me	tzger	☑IND □COM □OTH □PTY □SCC	Retired	185.00	185.00	185.00
3/8, 6/22/14 Blazing Har	nmers	☐IND ☐COM ØOTH ☐PTY ☐SCC		135.00	135.00	135.00
3/15, 6/29/14 Susan M. W	Vhitin	☑IND □COM □OTH □PTY □SCC	Business Owner Whitin Design Works	185.00	185.00	185.00
Robert J. Bo 3/16, 6/30/14		ZIND COM OTH PTY	Landscape Architect BGB, Inc.	185.00	185.00	185
			SUBTOTAL	.\$ 825.00		

\*Contributor Codes

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(other than PTY or SCC)

OTH – Other (e.g., business entity) PTY – Political Party

SCC - Small Contributor Committee

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

		SCHEDI	JLE A (CONT.)
Statem	ent covers period	CALIFORNIA	ACO
from	1/1/14	FORM	TUU
through	6/30/14	Page 30	of <u>36</u>
		I.D. NUMBER	

NAME OF FILER

Rob ZurSch	nmiede for Council 2014				1363	063
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)
4/3, 6/30/14	Griffin Structures. Inc.	□IND □COM ØOTH □PTY □SCC		249.00	249.00	249.00
6/27/14	Sarah Nix Coffey	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Retired	100.00	100.00	. 100.00
6/27/14	John M. Nootbaar	☑IND □COM □OTH □PTY □SCC	Retired	100.00	100.00	100.00
6/28/14	Rebecca Thompson	☑IND ☐COM ☐OTH ☐PTY ☐SCC	Homemaker	200.00	200.00	200.0
6/29/14	Arnold Hano	☑IND □COM □OTH □PTY □SCC	Retired	200.00	200.00	200.
			SUBTOTAL	\$ 849.00		

\*Contributor Codes

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(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

Type or print in ink.

Amounts may be rounded to whole dollars.

		ONT.)

**CALIFORNIA** 

Statement covers period

360.00

1,540.00

1/1/14

NAME OF FILER			·	through 6/3	30/14	Page	31 of 36 BER
	hmiede for Council 2014					136306	33
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 \ (JAN. 1 - DEC	'EAR	PER ELECTION TO DATE (IF REQUIRED)
6/29/14	Robert J. Whalen	☑IND □COM □OTH □PTY □SCC	Attorney Stradling Yocca Carlson & Rauth, P.C	360.00	360	0.00	360.00
6/29/14	Joe Hanauer	☑IND □COM □OTH □PTY □SCC	Investment Management Combined Investments LLC	360.00	360	0.00	360.00
6/30/14	Lucinda M. Prewitt	☑IND □COM □OTH □PTY □SCC	Music Presenter Laguna Beach Live!	100.00	10	0.00	100.00
6/30/14	Lance Polster & Associates	□IND □COM ØOTH □PTY □SCC		360.00	36	0.00	360.00
	Frederick C. Balzer	<b>⊠</b> IND	Realtor Berkshire				360

Hathaway California

SUBTOTAL\$

Properties

COM...

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□ PTY □ SGC

\*Contributor Codes

IND - Individual

6/30/14

COM - Recipient Committee

(other than PTY or SCC)

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

PTY - Political Party

SCC - Small Contributor Committee

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

360.00

Type or print in ink.

Amounts may be rounded to whole dollars.

SC				

**CALIFORNIA** 

**FORM** 

Statement covers period

1/1/14

NAME OF FILER		. •		through 6/3	00/14 Page	32 of 36 JMBER					
Rob ZurSch	miede for Council 2014				1363	063					
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)					
6/30/14	Steve Kawaratani	☑IND □COM □OTH □PTY □SCC	Consultant Kawaratani Consulting	360.00	360.00	360.00					
2/3, 6/29/14	Fredric L. Sattler	☑IND □COM □OTH □PTY □SCC	Retired	199.00	199.00	199.00					
		□IND □COM □OTH □PTY □SCC									
		□IND □COM □OTH □PTY □SCC									
		□IND □COM □OTH □PTY □SCC		est en							
	SUBTOTAL\$ 559.00										

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

#### Schedule C Nonmonetary Contributions Received

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

Stateme	ent covers period	CALIFORNIA / CO
from	1/1/14	FORM 40U
	,	
through	6/30/14	Page 33 of 36
<u> </u>		I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE NAME OF FILER

Rob ZurS	chmiede for Council 2014			•		1363063	3
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 SERVICES	AMOUNT/ FAIR MARKET VALUE	CUMULATIVE TO DATE CALENDAR YEAR (JAN 1 - DEC 31)	PER ELECTION TO DATE (IF REQUIRED)
1/15/14	Matt Lawson 10 Pacific Vista Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Venture Capitalist Ventana Capital Mgt, L.P.	1-yr USPS Postal Box Rental	72.00	360.00	360.00
3/16/14	Steven B. Liuzzi 31494 West St. Laguna Beach CA 92651	☑IND □COM □OTH □PTY □SCC	Salesperson Valpak	Los Angeles Angels Baseball Tickets	200.00	200.00	200.00
		□IND □COM □OTH □PTY □SCC					
		□IND □COM □OTH □PTY □SCC					
Attach ad	ditional information on appropriately labe	eled continua	tion sheets.	SUBTOTAL !	\$ 272.00		
N. C.							

Schedule C Summary	
Amount received this period – itemized nonmonetary contributions.  (Include all Schedule C subtotals.)  \$\$	272.00
2. Amount received this period – unitemized nonmonetary contributions of less than \$100	
3. Total nonmonetary contributions received this period.  (Add Lines 1 and 2. Enter here and on the Summary Page, Column A. Lines 4 and 10.)	272.00

\*Contributor Codes

IND-Individual

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SCC - Small Contributor Committee

#### Schedule E Payments Made

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

		SCHEDULEE
Stateme	nt covers period	CALIFORNIA ACA
from	1/1/14	FORM 400
through	6/30/14	Page 34 of 36
	-	I.D. NUMBER
		1363063

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

Rob ZurSchmiede for Council 2014

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

		م حادد	(a) (i) (a) (i) (a) (i) (a) (i) (a) (a) (a) (a) (a) (a) (a) (a) (a) (a		
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		
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	TSF	transfer between committees of the same candidate/spon-
LEG	legal defense	PRO	professional services (legal, accounting)	VOT	voter registration
LIT	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
Lynx Digital Design 24062 Atun Monarch Beach CA 92629	WEB		2,000.00
Laguna Digital Inc. 1705 S. Coast Hwy Laguna Beach CA 92651	LIT		5,560.89
PayPal 2145 Hamilton Avenue San Jose CA 95125	WEB		183.07
* Payments that are contributions or independent expenditures must also be sumn	narized on S	Schedule D. SUBTOTA	L\$ 7,743.96
Schedule E Summary			4± 000 EA

1.	Itemized payments made this period. (Include all Schedule E subtotals:)	\$	11,323.54
2.	Unitemized payments made this period of under \$100	\$	210.00
3.	. Total interest paid this period on loans. (Enter amount from Schedule B, Part 1, Column (e).)	\$	
4.	. Total payments made this period. (Add Lines 1, 2, and 3. Enter here and on the Summary Page, Column A, Line 6.)	TOTAL \$	11,533.54

Schedule E	
(Continuation	Sheet)
Payments Mad	de

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

		SUREDU	ILE C (CON).
Staten	ent covers period	CALIFORNIA	AGN
from	1/1/14	FORM	TUU
through_	6/30/14	Page35	of <u>36</u>

Payments Made	from		rona		
SEE INSTRUCTIONS ON REVERSE		through	6/30/14	Page 35	_ of36
NAME OF FILER		~		I.D. NUMBER	
Rob ZurSchmiede for Council 2014				1363063	
				***************************************	

CTB contribution (explain nonmonetary)*  CVC civic donations  FIL candidate filing/ballot fees  FND fundraising events  IND independent expenditure supporting/opposing others (explain)*  OFC office expenditure expenditure supporting/opposing others (explain)*  POS postage, del	munications RAD radio airtime and production costs d appearances RFD returned contributions ses SAL campaign workers' salaries lating TEL t.v. or cable airtime and production costs
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CODE OR DESCRIPTION OF PAYMENT AMOUNT PAID
Anne Johnson 526 Oak St. Laguna Beach CA 92651	POS 693
Laguna Beach Gold & Bungalow Village 31106 Pacific Coast Highway Laguna Beach CA 92651	FND 1,247
Gary N. Shapiro 2343 Avenida Sevilla, Apt. D Laguna Woods CA 92637	FND 200
Mark Sanderson Photography 32 La Costa Ct. Laguna Beach CA 92651	FND 450
Ackley Metal Products, Inc. 1311 E. St. Gertrude Pl. Santa Ana CA 92705	RFD 140

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

SUBTOTAL \$

2,731.30

Schedule E	
(Continuation Sheet	)
Payments Made	

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

Stateme	ent covers period	CALIFORNIA A CO
from	1/1/14	FORM 400
through	6/30/14	Page 36 of 36
	A A MARK WITH A STATE OF THE ST	I.D. NUMBER

SEE INSTRUCTIONS ON REVERSE				throu	gh <u>6/30/14</u>	Page	36 of 36
NAME OF FILER						1.D. NUM 136300	
CODES: If one of the following codes accurately describe CMP campaign paraphernalia/misc. campaign consultants contribution (explain nonmonetary)* civic donations candidate filing/ballot fees fundraising events independent expenditure supporting/opposing others (explain)* legal defense campaign literature and mailings	MBR member communications MTG meetings and appearances OFC office expenses PET petition circulating PHO phone banks POL polling and survey research POS postage, delivery and messenger services PRO professional services (legal, accounting) PRT print ads		RAD	radio airtime and production costs returned contributions campaign workers' salaries t.v. or cable airtime and production costs candidate travel, lodging, and meals staff/spouse travel, lodging, and meals transfer between committees of the same candidate/sponsorvoter registration			
NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)		CODE C	CODE OR		DESCRIPTION OF PAYMENT		AMOUNT PAID
LCDC Restaurant Group 1289 South Coast Hwy Laguna Beach CA 92651		FND					848.28
		-	And a second property of the second property	e a se Mes E M			
		a de la descripción de la desc	and the second				
	GAD-0070						

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

SUBTOTAL \$

848.28